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Faculty of Public Health

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CONFERENCE OF PUBLIC HEALTH**

Theme :

**“ The workplace Initiative : Health, Safety and
Wellbeing Regarding COVID - 19 ”**

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**PROCEEDING
THE 3rd SRIWIJAYA INTERNATIONAL
CONFERENCE ON PUBLIC HEALTH**

*The Work Place Initiative: Health, Safety and Wellbeing
Regarding COVID-19*

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THE 3rd SRIWIJAYA INTERNATIONAL
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*The Work Place Initiative: Health, Safety and Wellbeing
Regarding COVID-19*

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PREFACE

On behalf of the organizing committee, I am delighted to welcome you to the 3rd Sriwijaya International Conference on public Health (SICPH 2021) during 21th October 2021 at Palembang South Sumatera, Indonesia. The SICPH 2021 is international conference organized by Faculty of Public Health, Sriwijaya University (UNSRI). I would like to extend my warmest welcome to all the participant of The SICPH 2021 under the theme *“The Impact of Climate Change on Infectious Disease Transmission”*.

The SICPH 2021 consists of keynote sessions from well known expert speakers in the field of public health, and academic paper sessions (oral presentations) who are coming from several region. This conference seeks to bring together academics, public health professionals, researchers, scientists, students and health stakeholders from a wide range of disciplines to present their latest research experience and further development in all areas of public health. We hoped that this conference will be usefull platform for researchers to present their finding in the areas on multidisciplinary realted to public health and health system issues.

This conference will provide opportunities to exchange ideas, knowledge, and development of the latest research among the participants. We will publish the paper as output from the SICPH 2021 in proceeding book with ISBN and selected paper will be published in Jurnal ilmu kesehatan masyarakat- SINTA 3 (a nationally-accredited journal). The SICPH 2021 is being attended by about 50 participants. I hope you enjoy the conference.

With regard to considerable conference agenda, we greatly appreciate any support and sponshorship derived from any governmental as well as private institutions for the success of the conference. Great appreciation is also handed to organizing committe of the conference for any voluntarily effort that bring to the succes of the conference.

The conference committee expresses its gratitude towards all the keynote speakers, authors, reviewers, and participanst for the great contribution to enssure the succes of this event. Finnally, I sincerely thank all the members of the organizing committee who have worked hard to prepare this conference.

Palembang, October 2021

Chair,

Anita Camelia, SKM., MKKK.

PREFACE



First of all, let us thank God, the Almighty, who has given His grace and guidance so that the 3rd Sriwijaya International Conference of Public Health (SICPH) with the theme of The Workplace Initiative: Health, Safety and Wellbeing Regarding Covid:19 can be held successfully. I welcome all of you to this seminar which has received great attention not only from university, but also other communities to submit papers to be presented in this seminar. I express my highest gratitude and appreciation the presenters.

The conference is divided in two session, the first session is speeches and the second session is round table discussion. In the first session, the invited keynote speakers were Prof. Dr. Tan Malaka, MOH, DrPH, SpOk, HIU (A Professor from Medical Faculty Universitas Sriwijaya), Prof. Dr. Retneswari Masilamani (University Tunku Abdul Rahman, Malaysia), Prof.Dr.Joselito L. Gapaz MD, M.PH(University of the Philippines) and Prof. Dr Tjandra Yoga Aditama, MHA,DTM&H, DTCE,SpP(C).FIRS (Professor from Griffith University, Australia)

Of course, this conference activity would not have succeeded without the support of all parties involved, as well as the presence of all participants in all regions in Indonesia and internationally. I especially thank to all the organizing committees for their hard work, perseverance, and patience in preparing and organizing this conference so that it can go well, smoothly and successfully.

Finally, through this conference let us extend the network and cooperation among all stakeholders of the public health sector, especially in Indonesia and in the world in general, to build a better public health world in Indonesia

Thank you for participating in this conference.

**Dean of Public Health Faculty,
Universitas Sriwijaya**

Dr. Misnianti, S.K.M, M.K.M

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THE EFFECT OF SEMINARS ONLINE ON COMMUNITY KNOWLEDGE ABOUT NEW HABITS ADAPTATION IN CHILDREN DURING THE COVID-19 PANDEMIC

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ABSTRACT

The current COVID-19 pandemic has not been resolved, however, various activities in adapting to new life have begun. Knowledge about Adaptation of New Habits to Children needs to be increased. This is very important in preventing the occurrence of new sources of infection. This study aims to determine the effect of online seminars on general public knowledge. This study used a quasi-experimental pre and post-test design. This research was conducted from August to September 2020 using the total sampling. Data collected with an online questionnaire by google form. Data analyzed using the SPSS 25.0 program using t-test dependent (alternative: Wilcoxon Test) with p-value < 0,05. This results showed that the majority of respondents had an average age of 27 years, most of them were female (67.6%), the last education was college (85.9%), students and private employees each with the same proportion (25.4 %), and most of them had a good level of prior knowledge about Adaptation of New Habits in the era of the COVID-19 pandemic (84.5%) before attending online seminars. There was a significant increase in knowledge about Adaptation of New Habits in the era of the COVID-19 pandemic before and after attending online seminars with p value = 0.032 (p value < 0.05). Seminars can increase health knowledge immediately after the end of the seminar due to health education interventions to the community delivered during the seminar. Online seminars are the right way to promote health in increasing public knowledge in the era of the COVID-19 pandemic.

Keywords: Adaptation of New Habits, COVID-19, Children, Online Seminar

ABSTRAK

Pandemi COVID-19 saat ini belum terselesaikan, namun berbagai aktivitas dalam beradaptasi dengan kehidupan baru telah dimulai. Pengetahuan tentang Adaptasi Kebiasaan Baru pada Anak perlu ditingkatkan. Hal ini sangat penting dalam mencegah terjadinya sumber infeksi baru. Penelitian ini bertujuan untuk mengetahui pengaruh seminar online terhadap pengetahuan masyarakat umum. Penelitian ini menggunakan desain quasi-experimental pre and post-test. Penelitian ini dilakukan pada bulan Agustus hingga September 2020 dengan menggunakan total sampling. Data dikumpulkan dengan kuesioner online dengan google form. Analisis data menggunakan program SPSS 25.0 menggunakan uji-t dependen (alternatif: Uji Wilcoxon) dengan p-value < 0,05. Hasil penelitian menunjukkan mayoritas responden rata-rata berusia 27 tahun, sebagian besar berjenis kelamin perempuan (67,6%), pendidikan terakhir perguruan tinggi (85,9%), mahasiswa dan pegawai swasta masing-masing dengan proporsi yang sama (25,4 %), dan sebagian besar memiliki tingkat pengetahuan awal yang baik tentang Adaptasi Kebiasaan Baru di era pandemi COVID-19 (84,5%) sebelum mengikuti seminar online. Terdapat peningkatan pengetahuan

yang signifikan mengenai Adaptasi Kebiasaan Baru di era pandemi COVID-19 sebelum dan sesudah mengikuti seminar online dengan p-value = 0.032 (p value < 0,05). Seminar dapat meningkatkan pengetahuan kesehatan segera setelah berakhirnya seminar dikarenakan adanya intervensi pendidikan kesehatan kepada masyarakat yang disampaikan selama seminar. Seminar online merupakan cara yang tepat untuk mempromosikan kesehatan dalam meningkatkan pengetahuan masyarakat di era pandemi COVID-19.

Kata Kunci: Adaptasi Kebiasaan Baru, COVID-19, Anak, Seminar Online

Introduction

Coronavirus Disease 2019 (COVID-19) is a disease that attacks the respiratory tract caused by a new type of corona virus that has never been previously identified in humans, on February 11, 2020. According to the World Health Organization, the new type of corona virus is *Severa Acute Respiratory Syndrome Coronavirus-2* (SARS-CoV-2). WHO announced that COVID-19 has become a pandemic. COVID-19 was first discovered in Wuhan, China at the end of 2019. COVID-19 transmission can be transmitted from human to human and can affect anyone, regardless of age or socioeconomic status. Signs and symptoms of COVID-19 in children are difficult to distinguish from respiratory disease due to other causes. Symptoms can include coughing and colds such as *common cold*, with or without fever, which are generally mild and will heal on their own.¹

As of 27 September 2020 there were 32.429,965 confirmed cases of COVID-19 with more than 180 countries infected with COVID-19. Death cases reached 985,823 people.² The incidence of COVID-19 in children is not as much as adults, and most children with confirmed COVID-19 get it from their families. Indonesia holds the record for the highest child mortality rate in Asia Pacific due to COVID-19 at 2.5 percent. Meanwhile, based on data from the Indonesian Pediatrician Association (IDAI), 11,000 Indonesian children have been exposed to COVID-19.³

The current COVID-19 pandemic has not been resolved, however, various activities in adapting to new life have begun. The new normal life order is structured according to the basic needs of children's growth and development and health. Adaptation of new habits is carried out while maintaining health with complete balanced nutrition, eating more fruits and vegetables, adequate rest, and age-appropriate physical activity.⁴

One way to control and improve health during this pandemic is through health promotion. Seminar is one method of health promotion, namely health education and counseling efforts that are carried out for a large group of people to increase public knowledge and awareness of a health problem.⁵ An information obtained by one's senses of an object produces knowledge.⁶ Having knowledge about

disease prevention and control can effectively help break the chain of disease transmission.⁷ During this pandemic, not traveling to large crowds must be done as one of the steps to break the chain of transmission of COVID-19.⁸ As many as 89.35% of internet users in Indonesia use applications *instant messaging* and *WhatsApp* is the platform most widely used.⁹

The seminar is held online through the WhatsApp application, which can be carried out during this pandemic era so that health promotion to the community can continue to be carried out. The use of WhatsApp itself is expected to be able to reach ordinary people who have difficulty accessing *meetings videos*. Therefore, this study interest to analyze the effect of seminars *online* on knowledge about adapting new habits in children during the COVID-19 pandemic.

Method

This research uses a design study quasi-experimental pre and post. This study aims to determine changes in knowledge regarding the adaptation of new habits in children during the COVID-19 pandemic to respondents who took part in seminar *online* about “COVID-19 is not over yet. Are children ready to adapt to new habits?” The population in this study were 255 participants who joined seminars *online* and filled out questionnaires before and after the seminar. This research was conducted from August to September 2020 using the total sampling method to all participants who met the inclusion criteria and the exclusion criteria.

This study uses primary data from questionnaires that have been filled out before and after the seminar *online* regarding the physical profile, demographics, and knowledge of IMR respondents in children. Respondents' knowledge was assessed from the correct answers obtained from 15 "true" and "wrong" questions regarding IMR in children. Respondents are categorized in the level of knowledge less if the value is <56%, sufficient if the value is 56-75%, and good if the value is 76-100%.¹⁰

The data will be analyzed using the SPSS 25.0 program. Univariate analysis was conducted to determine the frequency distribution of respondents' characteristics based on age, gender, occupation, last education level, and knowledge. Bivariate analysis was carried out to find out changes in the average knowledge of respondents both before and after attending seminars *online* on adapting new habits in children in the era of the COVID-19 pandemic using t-test dependent (alternative: Wilcoxon Test) with p-value < 0,05.

Results

Characteristics

Based on the characteristics of 71 research respondents, the majority of respondents in this study had an average age of 27 years, women (67.6%), the last education was college and equivalent (85.9%), and students and private employees had the same proportion (25.4%). The following table 1 describes the characteristics of the respondents in full (table 1).

Table 1. Characteristics of Respondents

Characteristics	Total (n)	Percentage (%)
Age (years)		27 ± 12
Gender		
Male	23	32.4
Female	48	67.6
Last Education		
Not completing elementary school	0	0
Elementary school or equivalent	1	1.4
Primary or equivalent	0	0
Secondary or equivalent	9	12.7
Higher education or equivalent	61	85.9
Occupation		
Student/Student	18	25.4
Housewife	12	16.9
Private Employee	18	25.4
Self-employed	7	9.9
Civil servant/soldier/police	16	22.5

Characteristics of Correct Answers for each Question

Prior to the seminar, the first and second questions regarding Clean and Healthy Behavior (*Perilaku Hidup Bersih dan Sehat–PHBS*) in children were mostly answered correctly by respondents (97.6%). After the seminar, there were four questions that were answered correctly by all respondents who were included in the inclusion criteria, namely the second, sixth, seventh and ninth questions. The increase in correct answers was mostly found in the fourth question regarding the flu vaccine where there was an increase from 22.7% to 100% of respondents who answered correctly (table 2).

Table 2. Frequency Distribution Based on Correct Answers for each Question

Question	Pre (n (%))	Post (n (%))
Because rare cases, children and adolescents are more resistant to COVID-19 than in adults (1)	54 (76.1 %)	62 (87.3%)
Children and adolescents cannot transmit COVID-19 (2)	67 (94.4%)	71 (100%)
A good child's immune system is one of the efforts to prevent COVID-19	67 (94.4%)	67 (94.4%)
Because During the COVID-19 pandemic, children and toddlers are not recommended for immunization (3)		
Giving vitamin supplements to children can form immunity to COVID-19 (4)	65 (92.7%)	15 (21.1%)
Due to the COVID-19 pandemic, children and toddlers are not recommended for immunization (5)	26 (27.1%)	70 (98.6%)
The flu vaccine makes children -children are more susceptible to corona virus infection (6)	22 (22.9%)	71 (100%)
Children's immune system can be increased by obtaining complete balanced nutrition, eating more fruits and vegetables, adequate rest and age-appropriate physical activity (7)	68 (95.8%)	71 (100%)
Other than m To increase the body's resistance to prevent the transmission of COVID-19, children and adolescents must also apply clean and healthy living behavior and follow the new habit adaptation protocol (8)	69.5 (97.9%)	71 (100%)
New habit adaptation is a substitute term for "new normal", where people can carry out normal activities outside the home but are still required to carry out health protocols (9)	68.79 (96.9%)	71 (100%)
Because they have adapted to new habits, toddlers are allowed to participate going out of the house (10)	64 (90.1%)	62 (87.3%)
Because they have adapted to new habits, children and adolescents are allowed to go to school as usual (11)	62 (87.3%)	65 (91,5%)
Children and adolescents do not have to keep a distance of 1-2 meters from other people during the adaptation period to new habits (12)	69 (97.2%)	68 (95.8%)
Children and adolescents do not need to be routine washing hands with soap during the adaptation period to new habits (13)	69 (97.2%)	70 (98.6%)
Children and adolescents do not have to wear masks when forced to go out during the policy adaptation period new feelings (14)	70 (98.6%)	70 (98.6%)
Parents do not have to take a bath before contact with their children after going out of the house during the adaptation period to new habits (15)	66 (93.0%)	68 (95.8%)

Knowledge Level of Respondents Before and After the Online Seminar

The results of the analysis of respondents' knowledge before the seminar *online* showed that most of the respondents had a good level of knowledge regarding the adaptation of new habits in children in the era of the COVID-19 pandemic (82.8%). After attending the seminar *online*, there was an increase in the level of respondents' knowledge where around 84.6% of respondents had good knowledge (figure 1).

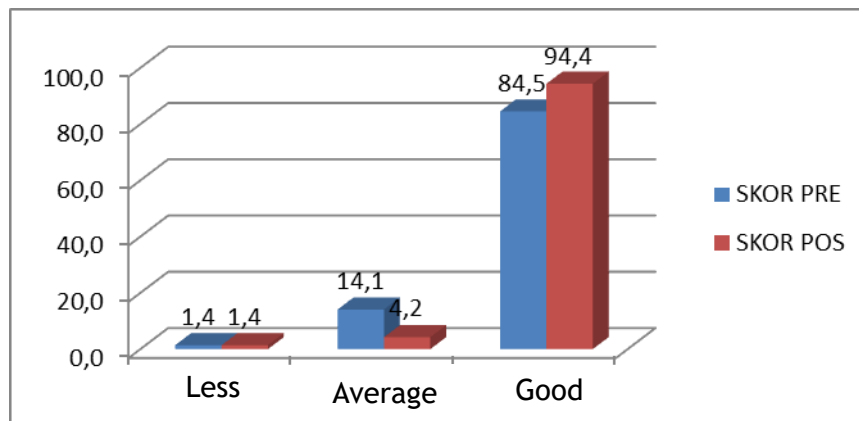


Figure 1. Respondents Knowledge of Adaptation to New Habits in Children in the COVID-19 Pandemic Era (Before and After the Online Seminars)

Normality Test

The results of the normality test of respondents' knowledge of the adaptation of new habits in children before and after attending the seminar *online* using the Kolmogorov-Smirnov test it was obtained that prior knowledge showed $p\ value = 0.000 < 0.05$, which means that the data is not normally distributed. Knowledge after showing $p\ value = 0.000 < 0.05$ which means the data is not normally distributed, so the Wilcoxon test is used to compare the knowledge of respondents before and after attending the seminar *online* (table 3).

Table 3. Normality Test of Knowledge

Knowledge	Kolmogorov-Smirnov		
	Statistics	Df	Sig.
Pretest	0.263	71	0.000
Post-test	0.291	71	0.000

Respondents' Knowledge Changes Before and After the Online Seminar

The results of the analysis using the Wilcoxon test obtained $p\ value = 0.032 < 0.05$ which means that there is a significant change in the average knowledge of respondents' knowledge before and after attending the seminar *online*. This shows that seminars *online* have an influence in increasing knowledge about adapting new habits in children in the era of the COVID-19 pandemic (table 4).

Table 4. Respondents Knowledge Before and After the Online Seminar

Knowledge	Mean Value \pm SD	$p\ value^*$
Before the seminar	10.72 \pm 0.28	0.032
After the seminar	12.77 \pm 0.33	

Discussion

Based on the distribution of age data, respondents who attended online seminars and filled out questionnaires both before and after the seminars *online*, the average age was 27 years. This study used an online questionnaire so that it only reached respondents who had access to technology and understood how to fill out questionnaires *online*. This is in accordance with data released by the Ministry of Communication and Informatics where the productive age group of 20 to 29 years is the age group that accesses the most *gadgets* of all total internet users.¹¹ The distribution of sex data is dominated by women (67.6%). This is in accordance with the characteristics of respondents in the study in Wonosobo, where most of the respondents were women (64.6%).¹²

The distribution of employment data shows that the group of students and private employees is the largest (25.4%), which is mostly dominated by students. The highest distribution of data for the latest education level is college and equivalent respondents (85.9%). The characteristics of these respondents are similar to research in Indonesia which was conducted online through the Google Form application which was distributed via WhatsApp to the people of Wonosobo Regency to find out community knowledge and behavior towards COVID-19. The majority of respondents are private employees (49.3%). Bachelor, master, and doctoral graduates are the majority of the respondents' last education (49.3%).¹²

Most of the respondents have a good level of initial knowledge regarding the adaptation of new habits in children, which is 84.5%. Public knowledge about COVID-19 is a very important aspect in the current pandemic, includes the causes and the characteristics of the virus, signs and symptoms, terms related to COVID-19, necessary examinations and the transmission process as well as disease prevention efforts. The high knowledge of respondents in this study about COVID-19 and adaptation of new habits influences the incidence and prevention of COVID-19 disease. Good knowledge can be supported by acceptance of information circulating in the community about COVID-19.¹³ One of the internal factors that affect a person's level of knowledge is the level of education, the higher a person's education level, the higher the knowledge.¹⁰

Other studies that are in line with this results¹⁴ shows that the people of the United States have good knowledge and behavior and on the Chinese society as the initial place for the discovery of the Corona virus, have a good knowledge and positive behavior. This is also related to the experience of the Chinese community in dealing with the SARS outbreak in the 2000s.^{15,14}

A study in DKI Jakarta Province regarding the knowledge, attitudes and skills of the community in preventing COVID-19 through an online questionnaire shows that 83% of respondents had good knowledge about preventing COVID-19, as much 70.7% of respondents have a good attitude regarding COVID-19 prevention and 70.3% of respondents have good skills regarding COVID-19 prevention. This study also has a similar distribution of data on age, gender, and occupation, where most of the respondents are private employees with higher education level/equivalent. Generally, the majority of the knowledge, attitudes, and skills of the people of DKI Jakarta Province are good at preventing COVID-19, and a few are not good enough. So, it's expected that other sectors such as the education sector assist the government to carry out health promotion efforts. Interventions and campaigns are aimed at influencing behavior someone.¹⁶ Interventions based on theories can increase public knowledge and awareness of certain health risks and result in positive behavior change.¹⁷

There was a significant change in the knowledge of the general public after attending the seminar *online*. This is supported by research conducted by the Nursing Study Program, Faculty of Medicine, UNSRI which compares the level of public knowledge about the effect of health education with leaflet media on citizens' knowledge in preventing the transmission of COVID-19. There is a significant difference in the knowledge of the seminar participants after attending the seminar (*p value* < 0.01).¹⁸ A similar study was conducted in Bandung regarding descriptions *pre* and *post-test* of health counseling activities for cadres on Babatan Health Center in Bandung, there was an significant increase in knowledge of cadres on integrated service post (*Pos Pelayanan Terpadu-Posyandu*) based on questionnaire answers *post-test*.¹⁹

According to the Knowledge-Attitude-Behavior Model theory, knowledge is an essential factor that can influence behavior change, and individuals can acquire knowledge and skills through the learning process.²⁰ Thus, public knowledge that still needs to be straightened out and community behavior that is still negative can be pursued with learning activities through education by the authorized parties. In the community, village health forums or the like can play a role in the effort to implement these activities. Seminars can increase health knowledge immediately after the end of the seminar due to health education interventions to the community delivered during the seminar.^{21,22} Using WhatsApp application, information can be provided easily because flexible and widely reached by people and provide educational content in various ways, including in the form of images, videos, and sound recordings.²³

Conclusion

Seminars online via WhatsApp can increase public knowledge about Adaptation to New Habits for children ($p < 0.032$). Seminars Online are the right way of health promotion to increase knowledge in preparing ordinary people to face the *new normal*.

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Conflict of Interest

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