

A Community Intervention In Covid-19 Pandemic: Occupational Health And Safety For Moslem Online Transportation

Yanwar Arief, Muhammad Rizki Fauji, Robby Fernanda Arifin, Bahril Hidayat

Universitas Islam Riau

Corresponding Email: yanwar.arief@psy.uir.ac.id

Abstract

This study was conducted to see the implementation of community intervention the Gojek Online Occupational Health and Safety (OHS) online bike during the coronavirus disease (Covid-19) pandemic in Pekanbaru City, and to provide online bike drivers with psychoeducation interventions. Main data collection by observation to see the introduction of occupational health and safety (OHS) of the Gojek online bike and questionnaires to take a look at the results of the interventions. Results from the observations made by 15 drivers indicate that the application of occupational health and safety (OHS) was 59%. The results of the 15-person questionnaire on the benefits of the intervention given are 81%. Therefore, psychoeducation interventions in the form of posters and digital videos are successful and provide advantages in the implementation of online bike occupational health and safety (OHS) Gojek during the pandemic in Pekanbaru City.

Keywords: Occupational Health and Safety, Online Bike, Covid-19

Submission	Review Process	Revised	Accepted	Published
November 10, 2021	November 12, 2021 – December 10, 2021	December 12, 2021	December 12, 2021	December 29, 2021

Introduction

Lately, the worldwide is being shocked by the existence of non-natural disasters, namely the Covid 19 pandemic. Covid 19 stands for Corona Virus Disease 19. Covid 19 is an infectious disease caused by a newly discovered type of corona virus. Common symptoms of Covid 19 include fever, dry cough and feeling tired. Other less common symptoms that some patients may experience, it includes of the aches and pains, nasal congestion, headache, conjunctivitis, sore throat, diarrhea, loss of taste or smell, rash on skin, or discoloration of fingers or toes. The virus itself will initially experience an incubation period of 2-14 days in the human body and then it will be detected positively in the human body. The spread of this virus is very fast and it doesn't look at the one who is exposed to it.

The Coronavirus pandemic that was pronounced on 11 March 2020 has impacted nations on all landmasses (Ebrahim et al,

2020). Announced case numbers are surely misjudges given the deficiencies or inaccessibility of test packs in numerous nations, an infection with a fundamental regenerative worth (R0) of 2.2, and proof of viral shedding from asymptomatic contaminated individuals (Tian et al, 2020). As well as suspending travel and endeavors to decrease swarms, nations are going to extraordinary lengths, including wartime methodologies to upgrade creation of clinical supplies in the US, the utilization of the public watchman to limit development of individuals, and suspension of commodities of clinical items from specific nations.

The practices of people in general are significant for episode the board, especially during the beginning stage when no treatment or immunization is free and nonpharmaceutical intercessions are the main choices. The adequacy of nonpharmaceutical intercessions relies upon people's level of commitment and consistence in prudent practices, for example,

facial covering wearing, hand cleanliness, and self-confinement. Readiness to take part in prudent practices intentionally relies upon hazard discernment toward the current wellbeing danger. Indeed, hazard discernment is a primary topic in like manner wellbeing conduct speculations (Glanz et al, 2015). Also, with cutting edge data innovation as of late comes the vulnerability of how hazard discernment is formed by different data sources (Kwok et al, 2020).

Despite their widespread use, fear appeals in Covid-19 pandemic have been controversial (Stolow et al, 2020). There is mounting proof that accomplishing the fragile harmony between saw seriousness and vulnerability with self-and reaction viability is hard to bundle in a solitary wellbeing message. Much more, studies have archived that dread requests or dread affecting wellbeing correspondence missions might create potentially negative side-effects like disavowal, kickback, evasion, preventiveness, trashing, wretchedness, tension, expanded danger conduct, and a sensation of absence of control (Albarracín et al., 2005; Earl and Albarracín, 2007; Kok et al., 2014; Kok et al., 2018; Peters et al., 2013; Ruiter et al., 2014; Witte and Allen, 2000). This fear appeals have been impact the community in pandemic condition.

Meanwhile, the impact of this virus is very large, all sectors are affected, including in the online transportation sector. This online transportation is commonly referred to as an online motorcycle taxi. Online motorcycle taxi companies in Indonesia are diverse, one of which is Gojek. This Gojek does not only provide services in the form of shuttle passengers, but many services are offered such as food shuttle service (Gofood), goods shuttle service (Gosend), cleaning service (Goclean), and others. With the many services have been provided, this has been able to attract the

public's interest to use this online motorcycle taxi service in the midst of the Covid 19 pandemic. However, apart from the advantages that Gojek offered at the time of the Covid 19 pandemic, the occupational safety and health (OHS) or in Indonesian known as Kesehatan dan Keselamatan Kerja (K3) of Gojek drivers is at stake in the midst of the Covid 19 pandemic. It is due to they are at risk of being exposed to Covid 19.

Occupational safety and health (OHS or K3) is all attempts and thoughts that can be carried out in order to reduce, prevent and cope with the occurrence of an accident and its impacts through steps in the form of analysis, identification and return of hazards by implementing a hazard control system appropriately and implement legislation on occupational safety and health (K3) (Kemenaker, in Kurniawan, 2016).

Law Number 13 of 2003 which asserts that occupational safety and health (K3) is a form of effort that aims to provide security in the form of safety and improve health by preventing occupational diseases and accidents, occupational medication, health promotion, medication, and rehabilitation (Kurniawan, 2016). Widodo (Pramono, 2017) defines occupational safety and health (K3) as fields thst related to health, safety and human welfare who work in an institution or project site. Meanwhile, according to Mangkunegara (Pramono, 2017) work safety shows in conditions that are safe from suffering, damage or loss in the workplace. Occupational safety and health refers to the protection of work security experienced by every worker. Protection refers to the physical and mental conditions of workers due to the existing work environment at the company. Companies that carry out work safety programs will experience few short or long term injuries from their work (Bangun, in Pramono, 2017).

Occupational safety and health (K3) is an essential aspect for employees, due to the impact of occupational accidents and diseases is not merely detrimental to employees, but also to the company directly or indirectly (Kusuma, in Haryanto, 2013). The main target of occupational safety and health (K3) is aimed at workers, by making all efforts such as prevention, maintenance and improvement of workforce health in order to avoid bad risks at work. According to Adia (Haryanto, 2013), safety and health guarantees can make workers feel comfortable and safe in realizing a job, so that they can minimize or even create conditions of zero occupational accidents and diseases.

During the Covid 19 pandemic, Gojek drivers must comply with the health protocols recommended during the Covid 19 pandemic. As quoted from *detik.com*, the Gojek drivers must comply with the new normal Covid 19 pandemic based on a Circular or SE Minister. Transportation Number 11 of 2020, namely, (1) drivers are required to wear masks, gloves, long-sleeved jackets, and provide hand washing tools, (2) transactions are recommended in cash or cashless, (3) the companies of application should provide bulkheads for passengers and drivers, (4) establishing a health post in which disinfectants, hand washing equipment, and body temperature gauges are provided, (5) companies are required to provide haircaps for passengers that can be used if using a helmet belonging to the driver helmet itself. If this health protocol is implemented, certainly, the occupational safety and health can run well, and vice versa. This is in accordance with Pasiak's statement (Miyanti, 2019) that the aspects of K3 behavior are initiative, bureaucracy, responsiveness and obedience in taking various actions.

Mangkunegara (in Kurniawan, 2016) argued that K3 aims to gain guarantee of K3

both physically, socially, and psychologically, work tools and equipment are used properly and effectively, all products can be guaranteed safety, there is a guarantee for maintenance and improvement of employee nutritional health, increase passion, work harmony and work participation, avoid health problems caused by the environment and working conditions, employees feel safe and protected at work.

The benefits of implementing occupational safety and health (K3) according to Suardi (in Fridayanti and Kusumasmoro, 2016) are:

1. The protection of employee: the main objective in implementing safety and health (K3) is to provide protection to workers, due to the workers are assets of the company that must be maintained and guarded.
2. Showing the compliance with regulations and laws: it can be seen that the bad influence obtained by companies that fight against regulations and laws such as a bad image, lawsuits from government agencies often face problems related to its workforce, thus, it leads to the company experiences bankrupt. Therefore, by implementing a health and safety management system (K3), at least the company has shown good ethics in complying with laws and regulations so that it can operate normally without facing obstacles in terms of its workforce.
3. Reducing costs: the implementation of occupational safety and health (K3) can prevent things that are not desirable such as accidents, damage, or illness due to work. Therefore, the company does not need to pay the costs caused by this incident. One of the costs that can be reduced is the insurance premium. Most companies that issue insurance premiums are much smaller than before

implementing an occupational health and safety (K3) management system.

4. Creating an effective occupational safety and health (K3) management system: many factors can encourage the achievement of an effective management system. Apart from quality, environment, finance, and information technology, definitely, the occupational health and safety (K3) management system can be seen from the implementation of a health and safety management system (K3), namely the existence of documented procedures. With this procedure, all activities and activities will be organized, directed and in an orderly corridor.
5. Increasing the trust and satisfaction of customer: employees whose occupational health and safety (K3) system is guaranteed, they will work more optimally and have an impact on the products and services produced. In turn, this will improve the quality of the products and services produced before the implementation of the system. In addition, with the recognition of the implementation of the occupational health and safety (K3) management system, the image of the organization on its performance will increase and it will certainly have an effect on increasing the trust of customer.

Based on the phenomena described above, the researcher is interested in examining about the implementation of the occupational safety and health (K3) of online motorcycle taxi in the city of Pekanbaru during the Covid 19 pandemic. Pekanbaru city and then intervened in Gojek online motorcycle taxi drivers in Pekanbaru City.

Research Methods

The design of this study was a Quasi Experiment with a one group pre-test and pre-

test design, which was aimed to find out the application of occupational health and safety on online motorcycle taxis (Gojek) during the Covid 19 pandemic in Pekanbaru city. Quasi experiment itself is an experiment that is carried out without randomization, but can still use a control group, compared to the pre-experimental design, and quasi-experiments are usually better because they have carried out a control as a comparative group to be able to understand the effects of the treatment (Latipun, 2015).

In this study, there was no comparison group or control group. However, the first observations were undertaken by the researcher and it can test the changes that occur after there was treatment. This type of research data was primary data from the results of the questionnaire that has been given (Yolanda, et al. 2018). After giving intervention in the form of psychoeducation in the form of videos and posters, which contained about improving Occupational Safety and Health on online motorcycle taxis (Gojek) during the Covid 19 pandemic in Pekanbaru city.

The population in this study were all online motorcycle taxis (Gojek) in the city of Pekanbaru. Meanwhile, the sample in this study were 30 respondents with random sampling technique. The determination of the number of samples in this study refers to the implementation of OHS carried out by online motorcycle taxi drivers (Gojek) during the Covid 19 pandemic in the city of Pekanbaru.

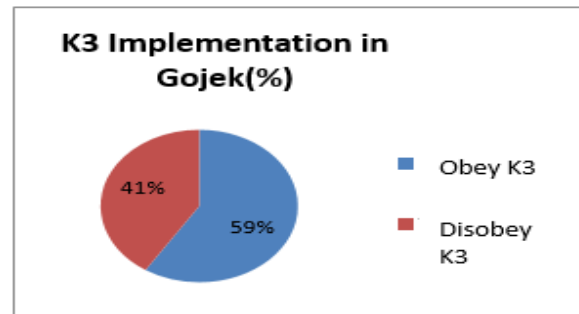
Results and Discussion

Observation Result

The results of the observation method with 15 subjects were 13 subjects who wore masks and 2 other subjects did not use masks, 11 online motorcycle taxi drivers who wore gloves and 4 more did not use gloves, 15 online motorcycle taxi drivers wore jackets while working, as well as 15 drivers. Besides, there

were no drivers who used a bulkhead between drivers and customers, meanwhile there were 10 customers who brought their own helmets and 5 customers did not bring their own helmets, 5 customers used a non-cash payment system and 10 customers did not use a non-cash payment system, and there were 3

subjects that used a handsanitizer and 12 others did not use a handsanitizer, 14 customers used masks and 1 customer did not use masks. In summary, the results of the observations can be seen in the graph below.



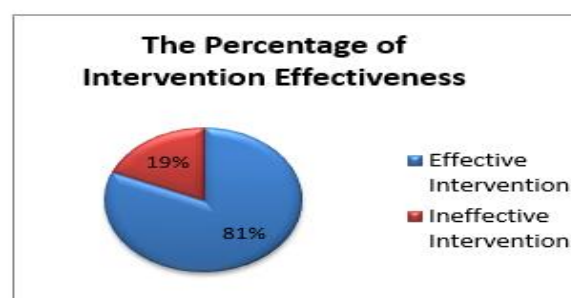
Graph 1. The Implementation of Occupational Safety and Health (K3) of Online Motorcycle Taxi During the Covid 19 Pandemic in Pekanbaru City

The results that can be seen from the graph above obtained through observation with a sample of 15 subjects show that the implementation of K3 has been running by 59% in terms of complying with health protocols during the Covid 19 pandemic, while the implementation of K3 on online motorcycle taxi drivers (Gojek) has not been carried out by 41%. This implies that the implementation of K3 of online motorcycle taxi during the Covid 19 pandemic has been going well, even though it is not optimal.

Intervention Result

The intervention was carried out for 4 days starting on Saturday, August 22, 2020 by

distributing posters and digital videos on the Instagram and Youtube platforms. Then it was proceed with distributing posters and digital videos to drivers on Wednesday, 26 August 2020 to Friday, 28 August 2020 by technically ordering food through the Gojek application and then distributing it by paying attention to health protocols. After conducting the intervention, then distributing outcome or benefit questionnaires from the intervention that had been given to 15 respondents. The purpose of providing this questionnaires was to discover whether the interventions that had been carried out were effective or ineffective. In summary, the results of the questionnaire can be seen from graph 2 below:



Graph 2. The Percentage of Effectiveness of Intervention

Based on the circle graph above, 15 respondents assert that the level of effectiveness and the usefulness in the intervention is 81%, 19% is ineffective and useless. This implies that the level of effectiveness and usefulness of the interventions that have been carried out in the form of posters and digital videos with Occupational Safety and Health (K3) guideline content of online motorcycle taxi during the Covid 19 pandemic has run well with a percentage of 81%.

Community intervention is a planned change carried out by change agents towards various targets of change consisting of: individuals, families, and small groups, communities and organizations and the wider community, both at the district/city, provincial, state, and global levels (Adi, 2013; Rivaldi & Tohari, 2020). Community intervention is an activity to achieve the goal of improving community welfare. In the social planning model, the emphasis is task goal oriented which is oriented towards completing tasks, or address the problem of social system disruption through the provision or development of systems services related to concrete social problems Adi (2013). Suharto (2014) explained that the orientation of social planning as community intervention is social problems solution which happen in society, with the tasks carried out to solve the problems. In this purpose, Islam has Islamic teachings on safety and human welfare,.

Rasulullah Muhammad saw., the Holy Prophet (may peace be upon him) has given clear instructions about the behaviour of the Muslim. He observe, ‘Whoever among you wakes up physically healthy, feeling safe and secure within himself, with food for the day, it is as if he acquired the whole world.’” (Sunan Ibn Majah, Vol. 5, Book 37, Hadith 4280). The Holy Qur'an has explained the point in Sura al-

Baqarah, 2: 195, in these words: “And spend in the way of Allah and do not throw [yourselves] with your [own] hands into destruction [by refraining]. And do good; indeed, Allah loves the doers of good.” The excerpt of verse in the holy Quran above depicts Islam not only stress on the safety aspect as well, this religion also focus on to evade man from peril or unsafe acts.

Conclusion

Dealing with the interventions that have been carried out with the psychoeducation method in the form of posters and digital videos, it can be concluded that the intervention was effective and beneficial for drivers of online motorcycle taxi with a percentage of 81%. The suggestions for interventions that have been carried out are to add other intervention methods such as webinars and subjects in implementing the intervention is not only concerned on the Gojek driver.

Acknowledgement

We gratefully thank Prof. Dr. Shukron Abdul Rahman and the International Seminar on the Roles of University in Responding to Psychosocial Issues in the Community (ISRUPIC) 2020 team in International Islamic University, Malaysia which well-recognized to review and present this article in that international seminar.

References

- Adi, I. R. (2013). *Intervensi Komunitas Pengembangan Masyarakat Sebagai Upaya Pemberdayaan Masyarakat*. Jakarta: Rajagrafindo Persada.
- Albarracín, D., Gillette, J. C., Earl, A. N., Glasman, L. R., Durantini, M. R., Ho, M.-H. (2005). A test of major assumptions about behavior change: A

- comprehensive look at the effects of passive and active HIV-prevention interventions since the beginning of the epidemic. *Psychological Bulletin*, 131(6), 856–897. <https://doi.org/10.1037/0033-2909.131.6.856>
- Earl, A., Albarracín, D. (2007). Nature, decay, and spiraling of the effects of fear-inducing arguments and HIV counseling and testing: A meta-analysis of the short- and long-term outcomes of HIV-prevention interventions. *Health Psychology*, 26(4), 496–506. <https://doi.org/10.1037/0278-6133.26.4.496>
- Ebrahim, S. H., Ahmed, Q. A., Gozzer, E., Schlagenhauf, P., & Memish, Z. A. (2020). Covid-19 and community mitigation strategies in a pandemic. doi: <https://doi.org/10.1136/bmj.m1066>
- Edi, S. (2014). *Membangun Masyarakat Memberdayakan Rakyat: Kajian Strategis Pembangunan Kesejahteraan Sosial dan Pekerjaan Sosial*. Bandung: Refika Aditama.
- Fridayanti, N., & Kusumasmoro, R. (2016). Penerapan Keselamatan Dan Kesehatan Kerja Di PT Ferron Par Pharmaceuticals Bekasi. *Jurnal Administrasi Kantor*, 4(1), 211-234.
- Glanz K, Rimer BK, Viswanath K.(2015). Health behavior: theory, research, and practice. 5th edition. San Francisco: Jossey-Bass.
- Haryanto, S. (2013). Pengaruh Sistem Manajemen K3 Terhadap Kinerja Karyawan Pada Pt “Xx”. *Jurnal Ilmu-ilmu Teknik*, 9(3), 42-52.
- Kurniawan, D. (2016). Pengaruh Kompensasi dan Keselamatan dan Kesehatan Kerja (K3) Terhadap Kepuasan Kerja Pada Karyawan. *Psikoborneo: Jurnal Ilmiah Psikologi*, 4(4), 472-481.
- Kok, G., Bartholomew, L. K., Parcel, G. S., Gottlieb, N. H., Fernández, M. E. (2014). Finding theory- and evidence-based alternatives to fear appeals: Intervention mapping. *International Journal of Psychology*, 49(2), 98–107. <https://doi.org/10.1002/ijop.12001>
- Kok, G., Peters, G. Y., Kessels, L. T. E., Ten Hoor, G. A., Ruiter, R. A. C. (2018). Ignoring theory and misinterpreting evidence: The false belief in fear appeals. *Health Psychology Review*, 12(2), 111–125. <https://doi.org/10.1080/17437199.2017.1415767>
- Kwok, K. O., Li, K. K., Chan, H. H. H., Yi, Y. Y., Tang, A., Wei, W. I., & Wong, S. Y. S. (2020). Community responses during early phase of COVID-19 epidemic, Hong Kong. *Emerging infectious diseases*, 26(7), 1575.
- Latipun. (2015). *Psikologi Eksperimen, Edisi Ketiga*. Yogyakarta: UMM Press.
- Miyanti, S. D. (2019). Pengaruh Shift Kerja dan Burnout Terhadap Perilaku Kesehatan dan Keselamatan Kerja (K3). *Psikoborneo: Jurnal Ilmiah Psikologi*, 7(1), 22-28.
- Peters, G. J. Y., Ruiter, R. A. C., Kok, G. (2013). Threatening communication: A critical re-analysis and a revised meta-analytic test of fear appeal theory. *Health Psychology Review*, 7(Suppl. 1), S8–S31. <https://doi.org/10.1080/17437199.2012.703527>
- Pramono, A. F. (2017). Hubungan Budaya Organisasi dan Program Keselamatan dan Kesehatan Kerja (K3) Terhadap Disiplin Kerja Dalam Pemakaian Alat Pelindung Diri (APD) Pada Karyawan PT Komatsu Remanufacturing Asia Balikpapan. *Jurnal Psikoborneo*, 5(1), 172-183.

- Rivaldi, M., Kusmawati, A., & Tohari, M. A. (2020). Intervensi Sosial Melalui Terapi Psikoreligius pada Remaja Penyalahgunaan Narkoba. *KHIDMAT SOSIAL: Journal of Social Work and Social Services*, 1(2), 127-137.
- Ruiter, R. A. C., Kessels, L. T. E., Peters, G. J. Y., Kok, G. (2014). Sixty years of fear appeal research: Current state of the evidence. *International Journal of Psychology*, 49(2), 63–70. <https://doi.org/10.1002/ijop.12042>
- Stolow, J. A., Moses, L. M., Lederer, A. M., & Carter, R. (2020). How fear appeal approaches in COVID-19 health communication may be harming the global community. *Health Education & Behavior*, 47(4), 531-535.
- Tian, H., Liu, Y., Li, Y., Wu, C. H., Chen, B., Kraemer, M. U., ... & Dye, C. (2020). An investigation of transmission control measures during the first 50 days of the COVID-19 epidemic in China. *Science*, 368(6491), 638-642. <https://doi.org/10.1101/2020.01.30.20019844>
- Witte, K., Allen, M. (2000). A meta-analysis of fear appeals: Implications for effective public health campaigns. *Health Education & Behavior*, 27(5), 591–615. <https://doi.org/10.1177/109019810002700506>
- Yolanda, R., Ferusgel, A., & Nuraini, N. (2018). Pengaruh Promosi Kesehatan Dan Keselamatan Kerja (K3) Terhadap Pengetahuan Dan Sikap Pemulung Di Tempat Pembuangan Akhir Medan Marelan. *An-Nadaa: Jurnal Kesehatan Masyarakat*, 5(2), 51-57