

## Evaluation of the Implementation of the Covid-19 Management Program in Takalar Regency

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**Article History:** Received: 10 March 2021; Revised: 12 April 2021; Accepted: 27 May 2021; Published online: 20 July 2021

**Abstract:** Takalar Regency is included in the red zone in the spread of Covid-19 with a total of 292 people who were confirmed positive for Covid-19 in November 2020. The government's efforts by implementing policies through various programs have been carried out. This study aims to evaluate the impact of the implementation of the COVID-19 prevention program in Takalar Regency. The type of research that will be used is qualitative research with a phenomenological approach through in-depth interviews and documentation. The informants consisted of 5 key informants and 2 additional informants. The validity of the data using triangulation of sources or informants. The results showed that at the input stage the availability of Human Resources was sufficient in terms of quantity, Human Resource Training for the 2020 COVID-19 Task Force was not maximally carried out, the availability of facilities in handling COVID-19 corpses was not sufficient, the existing budget was not sufficient. . At the stage of the process, it shows that human resources are placed according to their expertise, evaluation meetings are held once a month, cross-sectoral cooperation is closely intertwined, implementation guidelines are in accordance with regulations from the Ministry of Health, obstacles in data validation and data delays for positive confirmed cases, differences in data based on the request of the Village/Kelurahan Government and what is in the field as well as the circulation of hoax information in the community. At the output stage shows the fluctuating confirmation case. The program has not been optimal due to budget constraints and community culture. There is a need for increased education to the public regarding COVID-19.

**Keywords:** Evaluation, COVID-19 Response, Input, Process, Output

### 1. Introduction

In the 21st century, many new diseases have emerged that have attracted the attention of many people, ranging from Severe Acute Respiratory Syndrome (SARS) to avian influenza A (H7N9). At the beginning of 2020, the world was shocked by the outbreak of a new virus, namely the new type of coronavirus, Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2), which is a virus that attacks the respiratory system. The disease caused by this viral infection is called COVID-19.

According to Li X, the process of this disease is still not widely known, but it is suspected that it is not much different from the course of other known respiratory viruses. Elderly people (elderly) who are over 60 years of age and who have underlying medical problems such as cardiovascular disease, diabetes, chronic respiratory disease, and cancer, have a higher risk of developing severe illness and death. And this virus can attack anyone, whether babies, children, adults, pregnant women, and breastfeeding mothers (Susilo et al., 2020).

On January 7, 2020, China identified the case as a new type of Coronavirus. The Chinese government adopted five-level regional isolation measures in Wuhan, concentrated on temporary isolation and construction of rescue hospitals, and arranged for medical staff from all Provinces of China to support Wuhan in increasing their treatment capacity, so as to quickly digest suspected cases and reduce the number of viral infections. It is very important that the implementation of these measures keeps the virus infection rate in Wuhan well controlled (Zhou et al., 2020).

On January 31, 2020 the World Health Organization (WHO) designated the incident a Public Health Emergency of International Concern (PHEIC) (Ministry of Health, 2020). Then WHO officially declared the outbreak of the infectious disease coronavirus 2019 (COVID-19) as a pandemic on March 11, 2020. The increase in the number of cases took place quite quickly, and spread to various countries in a short time. As of October 4, 2020, there were 34804348 confirmed cases, 1030738 confirmed deaths in 235 countries in the world (WHO, 2020b).

As the Covid-19 Pandemic unfolds, governments around the world are grappling with their dual responsibility to save lives and safeguard economies. Implementation of public health measures to save people from COVID-19 in the short term, and maintain economic stability in the medium term. A series of actions have been taken including case-based self-isolation, social distancing and prohibition of mass gatherings, even regional and national lockdown measures that have been imposed on almost every continent (Watkins and Maruthappu, 2020).

In Indonesia, the research was conducted with the main topic of research on the Effect of Policy Implementation on the Effectiveness of Covid-19 Response by the Kerinci District Government, the results showed that the effectiveness of the Covid-19 virus handling policy implemented by the Kerinci district government was at a moderate level, then the relationship between the independent variables (communication, disposition, resources and bureaucratic structure) and the dependent variable (success and impact) show a positive relationship, and indicate that the policy implementation variable affects the policy effectiveness variable (Seputra, 2020).

According to WHO in Razak (2020) Indonesia's health system is very poor compared to other countries, which have been affected by the corona virus. According to data from the Ministry of Health (Kemenkes), Indonesia only has 321,544 hospital beds. That figure means about 12 beds per 10,000 people. Budi Waryanti said hospitals in Indonesia were not ready to support emerging cases, treatment would be limited to cases of the Covid-19 pandemic (Razak, 2020).

On March 2, 2020, Indonesia reported its first case of COVID-19. As of November 3, 2020, the Ministry of Health reported 248,852 confirmed cases of COVID-19 with 9,677 deaths. The first case of Covid-19 in South Sulawesi Province was detected on March 19, 2020, so far (November 3, 2020) there are 17,031 cases with 430 deaths. On April 15, 2020, the first Covid-19 patient was recorded in Takalar Regency. The first patient who was classified as Patient Under Monitoring had a travel history from the red zone area, namely Jakarta and then experienced several symptoms such as fever and cough, then the patient was referred to the Covid-19 referral hospital in South Sulawesi,

Takalar Regency Government's efforts to overcome the Covid-19 Pandemic in Takalar Regency by stipulating Takalar Regent Regulation Number 25 of 2020 concerning Implementation of Discipline and Law Enforcement Protocols, Health as an Efforts to Prevent and Control Corona Virus Disease 2019. Based on the data obtained above, Takalar Regency including the red zone in the spread of Covid-19 with a total of 292 people who were confirmed positive for Covid-19. Takalar Regency consists of 10 sub-districts with an area of 566.51 Km<sup>2</sup>, which has health facilities, namely 16 health centers, and 4 hospitals in its area.

Awareness of risks to make changes in people's behavior is the main element to improve individual health and public health status in order to avoid Covid-19 (Sampurno et al., 2020). Community compliance with these control measures is very important, the compliance is strongly influenced by Knowledge, Attitudes, and Actions (Zhong et al., 2020).

According to Purnamasari and Raharyani (2020) efforts to break the chain of the spread of COVID-19 require good understanding and knowledge from all elements, including the community. The community has an important role in breaking the chain of transmission of COVID-19 so as not to cause new sources of transmission. Considering how transmission can occur at home, travelling, at work, places of worship, tourist attractions or other places where people interact socially. The level of transmission of COVID-19 in the community is strongly influenced by the movement of people, interaction between humans and the gathering of many people, for that protection of public health must be carried out by all elements in society, including the government, the business world, law enforcement officers and other components of society. So the author is interested in analyzing the implementation of the Covid-19 prevention program in Takalar Regency

## **2. Methods**

This research is a qualitative research with a phenomenological approach that aims to explore in-depth information about the impact of the implementation of the Covid-19 prevention program in Takalar Regency. In this study, the selection of informants was selected according to certain criteria determined based on the research objectives. The criteria referred to in this study are all parties who play a role in the implementation of the Covid-19 Response

Program and can provide accurate information about the implementation of the Covid-19 prevention program. The determination of informants will start from the Policy Implementer, namely the 2020 Covid-19 Task Force. The data collection in this study consisted of primary data and secondary data. The data of this study were collected by using an interview guide (In-Depth Interview) conducted by the researcher on research informants. Where the interview guide was conducted, it contained a list of questions given to the implementing officers who were respondents in the study. In this study, the evaluation of the implementation of the COVID-19 response program consists of input, process and output.

### 3. Result and Discussion

Takalar is an area located in eastern Indonesia, namely South Sulawesi Province with Makassar as the capital. Takalar Regency has health service facilities consisting of 16 Puskesmas, and 4 hospitals in its area. This research was conducted in Takalar Regency, with a number of key informants consisting of one part in the Data and Information Sector, one part in the Public Communication Sector, one part in the Behavior Change Sector, one part in the Health Handling Sector, one part in the Field of Law Enforcement and Discipline, one of the sections in the Volunteer Field. There were two additional informants, namely the implementer in handling Covid-19 at one of the Puskesmas in Takalar Regency and one of the implementers in handling COVID-19 in one of the Subdistricts in Takalar Regency.

Researchers made interview guidelines and interviewed several informants who were considered to know and understand the implementation of the Covid-19 prevention program in Takalar Regency. The informants are willing and have answered the researcher's questions regarding the evaluation of the implementation of the Covid-19 prevention program in Takalar Regency in 2020. Then, all answers from the informants will be abstracted and concluded. The results of the interview regarding the Evaluation of the Implementation of the Covid-19 Management Program in Takalar Regency in 2020 can be seen based on the following evaluation indicators.

#### Input

##### Human Resources

Based on the results of the interview with the informant above regarding the availability of human resources in the implementation of the Covid-19 prevention program, it is known that the human resources available at every health service facility, both puskesmas and hospitals, have been fulfilled. A total of 315 health cadres have been assigned to carry out education related to Covid-19 in each hamlet in Takalar Regency along with 17 health promotion officers at each puskesmas.

*"For now, what is meant by training the tracker team like what was done in Makassar, there is nothing special, we only seem to be based on PE experience. Overcoming the epidemic so far has been like that, that's all, so specifically for covid PE, it doesn't exist, not like in Makassar, Gowa, and the 3 regencies, it seems that there is indeed training at the head office for training on tracing. So we do it according to other emergency cases, Samaji, basically. For swab training, we did have training but in-house just training too"*

(NY, 55 years old)

Based on the results of the interviews above, it is known that for implementing activities, especially for Health Human Resources, there is still very minimal in optimizing the preparation of their human resources such as tracking activities based on experience in emergency cases that have occurred before. For swab activities, the informant said that training had been carried out.

From all the information from the informants above, it can be seen that the availability of human resources in the implementation of the COVID-19 response has been sufficient in quantity. Where a team has been formed in each agency by decree and is still playing an active role. However, in terms of the quality of human resources that are prepared in handling COVID-19 from not being optimal, there are still many human resources that are not prepared through training, especially in their Health Human Resources.

#### Facility

The implementation of the Covid-19 prevention program must be supported by the existence of supporting facilities for the implementation of the program, both in terms of quality and quantity. The facilities owned by several task forces in the health sector have not been fulfilled properly. The following are the results of the

interviews that have been conducted:

*"As with the handling of Covid's corpse, we are also in the health sector. That's usually a problem in the coffin, then the second one is actually the mobilization if it's according to expectations, actually every task force has a hearse for covid. But now we are collaborating with all health sectors such as hospitals."*

(AM, 35 years old)

Based on the results of the interview above, it is known that in the implementation of the covid-19 prevention program, every task force in the health sector should have a hearse for handling Covid, but in reality not all task forces have a hearse, as for another obstacle in handling Covid bodies, namely the availability of coffins.

Another informant in the field of data and information said that for the sampling process, they were still getting assistance from the Provincial Health Office, here are excerpts from the interviews:

*"We have received assistance from the Provincial Health Office for the sampling process so far."*

(NY, 55 years old)

The availability of facilities to support the implementation of the COVID-19 prevention program has not been fulfilled. However, in practice it can be done by maximizing existing resources.

## Money

Based on the results of the interview, it is known that the funds used in the implementation of the covid-19 prevention program in Takalar Regency came from Regional Unexpected Costs which were budgeted by the regions themselves then for several agencies also used refocusing funds from the Minister of Finance in the implementation of the covid-19 prevention program. as the following interview results:

*"In terms of funds... so the funds in the task force, we use BTT funds. Unexpected costs are regional and it is budgeted by the regions themselves"*

(AM, 35 years old)

*"Yesterday we used refusal funds from the Minister of Finance. Yesterday, what we got was the Social Service, Health Office, the damker task force, the Satpol, who gave out masks on the streets,"*

(YU, 36 years old)

The available funds are not sufficient to cover the people affected by the COVID-19 pandemic. In accordance with the results of interviews with the following informants:

*"...until the field there are still many people who haven't been covered... so maybe because of budget constraints, everything has not been covered..."*

(YU, 36 years old)

## Process

### Resource organization and management

In the process of implementing Covid-19 prevention activities, the program implementer, in this case the puskesmas, manages the human resources they have according to their expertise in carrying out COVID-19 prevention activities.

To carry out COVID-19 prevention activities, it is necessary to plan ahead about the activities that will be carried out. Planning is very important, given the existence of planning then the application of the program can run well. In every activity that will be carried out, program implementers from the volunteer field carry out their plans according to the data from the village in advance. The following is an excerpt from the interview:

*"We went straight, so the story is that the village collects data from us for data on people affected by COVID, we give them basic necessities"*

(YU, 36 years old)

Based on the results of the interview above, it can be seen that each field in the Covid-19 Task Force has

had their respective tupoksi which then in the implementation of each activity involves the sub-district government to assist or facilitate every activity carried out by the fields in the Handling Task Force. Covid-19 in the year of Takalar Regency in 2020.

The implementation of the covid-19 prevention program cannot be separated from the existence of good monitoring/supervision reports on activities that have been carried out by each OPD in the 2020 COVID-19 handling task force.

*"Through the coordination meeting. Often meet once a month. Like yesterday, we had a PSBB meeting, then disinfected, tracking, handling corpses. So each team has set what to do"*

(AM, 35 years old)

Based on the results of the interview above, it can be seen that for the evaluation of the Covid-19 prevention program, an evaluation meeting is held for all OPDs every month. In the coordination meeting that was carried out, all planning activities and evaluation of activities that had been carried out, such as handling bodies to implementing PSBB (Large-Scale Social Restrictions) were evaluated.

### Program Organizing

The handling of the Covid-19 prevention program cannot be separated from cross-sectoral cooperation in the Corona Virus Disease (Covid-19) Handling Task Force, which plays an important role. As the following interview results:

*"We involve the local village government, village or lurah, we continue to involve Babinmas, Polres, Polsek in sharing, yesterday the Health Office also participated with us in distributing basic necessities, he gave it in."*

(YU, 36 years old)

From the interview excerpt above, it shows that the implementation of the COVID-19 response program in 2020 was carried out in collaboration with several OPDs with various different main tasks.

The socialization of the covid-19 prevention program is carried out almost every day by health cadres together with health promotion officers at 17 health centers, with a total of 315 health cadres who have been trained to educate the public in 76 villages and 24 sub-districts. As the results of the following interview excerpts:

*"Almost every day during the pandemic. Until now it is still being carried out by cadre friends because the health cadre is a hamlet, so he educates the people in his hamlet. Organizes outreach education in the community in collaboration with the puskesmas with village health cadres. There are 315 village health cadres, we have trained and he came out to provide education for the community, plus health promotion officers at 17 puskesmas. in 76 villages, 24 sub-districts"*

(HM, 40 years)

### Program Implementation

The implementation of the Covid-19 prevention program can be said to be going well as the following interview results:

*"If it's implemented, we can see that it's going well, it means that if we look at any problem, the program must have a problem, but how can we find a solution for that problem. But it's going well."*

(AM, 35 years old)

The COVID-19 response program activities are carried out in accordance with the guidelines from the Ministry of Health, according to excerpts from interviews with several informants below:

*"All of the implementation stages, we only follow the rules from the ministry, ..."*

(AM, 35 years old)

Other fields in the 2020 COVID-19 response task force are law enforcement and discipline, in the implementation of judicial operations by providing concrete examples to the community and providing sanctions for policy violators in accordance with what is written in the Takalar Regency Regent Regulation, as quoted from the following interview. :

*"If someone opens a cafe and then doesn't heed the health protocol, we will first warn them, secondly, if we come again tomorrow night and don't pay attention to it, we will reprimand him again. We continue to do things that are persuasive. How do they realize that this health protocol is useful for them and the visitors rather than the cafe itself. Then for the third time we came there and still did not heed the health protocols, including maintaining distance, not preparing soap and hand sanitizer, then the visitors were not informed by the cafe owner that visitors must wear masks and then when sitting not keeping their distance. So we have to convey to the PSC in this case the chairman is the head of the health department. So after we coordinated that there were people like this who did not heed the process, this woman coordinated again with the regional government, the local government how to make this person obey the prokes earlier. so the permit can be taken, the permit is withdrawn by the local government. Keep us following. So that's what it's called, that's how we participate as people who are at the forefront of doing or calling for the implementation of health protocols."*

(A, 50 years old)

Furthermore, the informant explained the obstacles faced in disciplining the public to comply with existing policies and the main obstacle was the existence of hoax news about COVID-19 circulating among the public. For the volunteer field, in this case, it is represented by a social service agency whose core activity in dealing with COVID-19 is to provide economic recovery for residents affected by COVID-19, which in its implementation requires data from the local government but in its implementation in the field the data is obtained. not in accordance with what is in the field

Another obstacle found in the implementation of the COVID-19 response program was the delay in collecting data from the puskesmas so that updates and other activities related to cases were also hampered. In addition, validating data for positive cases found outside the work area, such as those found in Makassar City, is difficult to track cases due to incomplete data.

## Output

In general, the implementation of the Covid-19 response has been made as much as possible by the 2020 Covid-19 task force team. As quoted from the previous interview, it is said that tracking cases until the decline in existing cases can be said to have been carried out well. The following are some of the informants regarding the implementation of the programs that have been carried out, as follows:

*"If we maximize yesterday, that's yesterday's order at the beginning of the 11th month, the middle of the 10th month, the end of the 10th month, thank God the children's work, volunteer work, sometimes until late at night. Until the night we go out with help, Saturday and Sunday will continue."*

(YU, 36 years old)

*"Maybe 75% of the realization that 100 seems difficult."*

(HM, 40 years)

*"Yes, thank God. We, from the police, are not bored and will never be bored to do this work, yes, as I said earlier, we are carrying out justification operations to carry out blue operations. That's the goal, we from the police force that the police are the protectors and servants of the community."*

(A, 50 years old)

As for the changes that occurred after the policies related to the Covid-19 response were considered much more effective, all OPD collaborated and coordinated much better. As the following interview results:

*"The existing policy is much better, actually this policy. Because all OPD collaborated, all OPD worked together yesterday, there were only a few and indeed we are stuck, in trouble in everything because actually the most difficult thing in a system is how to coordinate it is the most difficult if for example the coordination is not clear, make sure it doesn't work, the program . So if the direction of this task force is much better because all opd are inside, across sectors, so if for example we want to coordinate, it's easy to ask for help here, someone like this asked for easy backup, yesterday wasn't it, yesterday we needed this, come in this opd , no, we went down by ourselves again, that's why yesterday at PSC he said wow this is amazing PSC, all of them even though our spirits are not actually in the task force."*

(AM, 35 years old)

The success of the COVID-19 response program in 2020 is also related to community culture, as quoted from the interview below:

*"Adami he, if his behavior is adami people who have good behavior but there are also those who are not good behavior maybe because of the education factor or ignorance factor."*

(HM, 40 years)

*"If it works, actually the government is really good, that's how good it is, it's amazing with this policy back to the people so how the government really does it like if the people don't want to follow the Samaji process anyway, actually if they all want to join, you can't wait until the end of the Covid-19 We can see for ourselves, after all, they have a party. You can't be banned."*

(YU, 36 years old)

The same thing was also explained by other informants, that in terms of the implementation of the main tasks and functions, it was maximally carried out, but beyond that, the behavior of the community was out of control which could not be ascertained.

*"If we as a government we have maximized, we have been maximal in distributing masks, we have been maximal in providing socialization and so on and then providing assistance to stakeholders who have the authority, that's what we have maximized there, but we can't make sure that the behavior of the community has been maximally implemented. everything we convey to the public. But if we look at this, people are all wearing masks. It is considered a mask is an obligation."*

(MD, 50 years)

Furthermore, informants from the field of public communication stated that this could be based on the ignorance and fear that arose in the community that underlies the behavior.

*"Actually, it's still lacking, because maybe people's behavior is really or really doesn't know or maybe the fear factor seems to also be about covid, so indeed in the promotion, there are no other activities that we carry out in the promotion..."*

(HM, 40 years old)

Another thing that needs to be considered in the implementation of the COVID-19 prevention program in 2020 is the limited budget which also greatly affects how the policy is implemented.

*"If you say it's effective, it's effective, it's efficient, it's only possible because of budget constraints, but not everything can be covered."*

(YU, 36 years old)

After obtaining the research results from the processing, analysis and presentation of data, further discussion is carried out according to the variables studied. The discussion in the research is presented in the form of a narrative by reviewing relevant references and several previous studies related to this research.

## Discussion

### Input

#### Human Resources

Human resources who are empowered and capable are inputs that are able to save the condition of a nation that is in a state of decline (Hs et al., 2020). As the results of research that has been done, the government of Takalar Regency has empowered as many as 315 Health Cadres to carry out educational activities to the community in 76 villages, 24 Kelurahan plus 17 health promotion officers in 17 puskesmas.

Meanwhile, according to Wang (2020) in Jin et al. (2020) training, knowledge and skills for Covid-19 prevention and control for health care providers is important especially because SARS-CoV-2 can turn into a chronic disease and coexist with humans like flu, therefore according to him health workers should receive education In addition, during surge events, learning and dissemination of epidemic prevention knowledge and skills should be enhanced not only for the health sector but for all communities, for self-protection, emergency planning, and workflows should be improved.

As previously stated by several other informants, according to him, human resources in dealing with the

covid pandemic are human resources who provide concrete examples in Covid-19 prevention and mitigation activities.

The implementation process is not a mechanical process, where each actor will automatically do whatever should be done according to the scenario of policy makers, meaning that it is a complicated process, colored by conflicts of interest between the actors involved, so that the objectives, targets, and implementation strategies can develop. Various factors can also lead to delays, abuse of authority, or deviations from policy direction. (Tuwu, 2020). Including the implementation of government policies in dealing with the Covid-19 pandemic in Takalar Regency. It can be concluded that the implementation of the COVID-19 prevention program in 2020 was successful and fulfilled in the aspect of human resource input, meaning that the quality might not be optimal, but in terms of the goals or targets of the programs that have been implemented, existing human resources have been able to cover it.

### **Facilities**

From the results of interviews, it is known that this program has been implemented with sufficient health facilities, although there are several informants who stated that this program has not been implemented with adequate facilities, but the government is still working hard to provide and improve the performance of community facilities, especially health facilities. in Takalar Regency in the face of the ongoing covid-19 pandemic.

For facilities for health workers, PPE has been equipped in carrying out their duties, the PPE obtained has received a lot of assistance in its fulfillment from outside parties and has been specially prepared by the health facilities/Health Office/Takalar Regency Government. It is important for health workers to use PPE (Personal Protective Equipment) in accordance with standards to prevent the transmission of Covid-19 to health workers who are very at risk (Isngadi et al., 2020).

Based on the results of interviews with other informants regarding the availability of health facilities and supporting facilities, information was obtained that the availability of facilities in the activities of handling bodies was constrained in the provision of coffins. Another obstacle related to the facilities that should be available is the hearse which actually must be owned by each Task Force, especially in health care facilities. For sampling, obtain assistance from the Provincial Health Office.

Based on the previous description, it can be said that if viewed from the availability indicator it is not sufficient, but all activities in the context of handling COVID-19 carried out by the task force can be implemented and covered by maximizing existing facilities.

The limited facilities and infrastructure that are not yet complete affect the running of the Covid-19 control program activities in Takalar Regency, which should be supported by adequate facilities and infrastructure so that the activities can run smoothly.

### **Money**

According to Hs et al. (2020) The existence of Perppu Number 1 of 2020 concerning State Finance policies and financial system stability, where one of the important points is the additional budget of Rp. 405.1 trillion which is not yet in the 2020 State Budget, meaning that during the handling of the Covid-19 situation, budgeting and deficit financing can exceed 3% (three percent) of Gross Domestic Product (GDP). One of the sources of this budget is budget cuts for projects to various regions through cuts in the Special Allocation Fund (DAK).

From the results of the study by interviewing informants related to the implementation of handling Covid-19 at the Village or Sub-District level using a budget that comes from an additional DAU which is then allocated to the government at the Rural or sub-district level for the provision of Direct Cash Assistance (BLT) as well as the provision of masks and activities other countermeasures.

This is also supported by the response of Hs et al. (2020) that one of the opportunities that is very likely to be carried out by the government is the budget opportunity as a bailout input in increasing the strength of economic externalities during this pandemic.

The widespread impact of the pandemic has affected several sectors of life, such as the economic sector,



many people have lost their livelihoods due to the pandemic and the policies that apply therein, so the welfare of the people is also a big responsibility of the government.

Based on the results of interviews regarding the adequacy of funds available for the implementation of the COVID-19 response program, information was obtained that the availability of existing funds had not been able to cover the implementation of the maximum level program. Funds originating from Unexpected Costs (BTT) and also several task forces that received refusal funds from the Minister of Finance have not been able to maximize the implementation of the 2020 COVID-19 response program in Takalar Regency from the aspect of money input.

## **Process**

### **Resource organization and management**

Policies according to Suharto (2006) in (Tuwu, 2020) are essentially decisions or choices of actions that directly regulate the management and distribution of natural, financial and human resources for the public interest. Human resource management activities in the COVID-19 response program include various processes, team formation, placement of human resources according to their expertise, to the development of task force skills.

In relation to human resource management, it cannot be separated from how the government improves the quality of its health workers (task units). The results of interviews that have been conducted with program implementers by the Puskesmas team, it is known that those who are tasked with handling COVID-19 are officers who are in accordance with their expertise, but the choice of task transfer for officers is also used depending on case trends.

The planning stage in providing assistance to the community by the Government begins with data collection carried out by the Village/Kelurahan Government regarding communities affected by the COVID-19 pandemic, then the team in the volunteer field represented by the Social Service goes to the community to provide assistance in accordance with previously obtained data.

The task execution team at the Puskesmas was carried out by direct tracking of suspect patients or positive confirmed patients, then continuing the search for close contacts of previously confirmed patients, which were then directed according to the symptoms felt by the patient.

The results of the interviews that have been conducted show that for each activity carried out by the task force, in this case the task force, involves the District Government as a companion as well as a facilitator. Like the implementation of the socialization carried out by the Public Communications Sector, the District Government gathers participants from both the government and the community.

Research conducted by Zhong et al. (2020) shows that education/socialization programs aimed at increasing knowledge of Covid-19 greatly help the Chinese population to have an optimistic attitude and maintain appropriate practices. Meanwhile, the research conducted shows the problem in community discipline efforts in Central Java, namely the lack of socialization to the community (Rani and Safarinda, 2020)

The division of roles based on the results of the research above aims to ensure that the implementation of the COVID-19 prevention program in Takalar Regency runs smoothly. The division of roles can be seen by the existence of an organizational structure and implemented during the implementation of activities. The division of roles involves cross-sectoral, in this case all OPDs have been found in the task force. The task force manages existing human resources to occupy positions that match their expertise.

In line with the opinion by Seputra (2020) that the bureaucratic structure greatly influences policy implementation, a clear bureaucratic structure will provide a clear chain of command so that in the implementation of the program carried out there are no errors in the application process, this is of course because it follows a unified command.

Seputra added (2020) that a clear bureaucratic structure will also provide clarity of responsibility for each implementing unit so that there is no overlapping of tasks, so the role of the organization will be effective and efficient.

Based on the results of the evaluation research, each activity carried out by the task force is described in a meeting which is held once a month in a coordination meeting. Evaluation is not just giving routine reports related to the number of victims, but the substance of the evaluation is that each related field is able to communicate the shortcomings or advantages of its performance and the performance of other fields (Sulistiani and Kaslam, 2020).

### **Program Organizing**

The Takalar Regency Government has issued a policy as a response to the handling of the Covid-19 outbreak in Takalar Regency. Such as the formation of the Takalar Regency Corona Virus Disease (COVID-19) Handling Task Force in 2020 in accordance with the Takalar Regent's Decree No. 471 of 2020. Which involves many elements, institutions, organizations, agencies, and the community itself.

The actions of the Takalar Regency Government in social distancing activities, emergency investments in health facilities, forms of providing social welfare, contact tracing and other interventions to contain the spread of the virus, to activities to improve the health system and manage the consequences of already extraordinary actions.

Information obtained from various existing informants is that the government's socialization of the COVID-19 response program is carried out almost every day through activities carried out by health cadres who have been distributed in 76 villages and 24 sub-districts with a total of 315 health cadres plus 17 Puskesmas which the target group are the people of Takalar Regency and also stakeholders in the 2020 COVID-19 response program.

For the implementation of each COVID-19 prevention program, it is carried out in collaboration with cross-sectors, both for socialization activities to justification operations carried out by the Law Enforcement and Discipline Division. Therefore, this policy is considered capable of preventing and overcoming the corona virus and this policy is considered to be able to overcome the social, psychological, and economic impacts caused by the corona virus.

### **Program Implementation**

According to Satria (2020) in Tuwu (2020) the Covid-19 pandemic has made almost everyone confused in dealing with it, the problem is very serious because what is being faced is new uncertainty, the Covid-19 pandemic is disrupted so we need to recognize, overcome, and prevent it to end this uncertainty. The results showed that the management of Covid-19 patients was carried out in all symptomatic and asymptomatic cases based on the guidelines of the Ministry of Health.

Based on the results of the research that has been carried out, it is known that the Takalar Regency Government carries out Justification Operations by implementing the Regent's Regulation, giving warnings to places with crowds without regard to health protocols. And provide sanctions for place owners who have been reprimanded before but do not heed health protocols in order to keep the community from spreading COVID-19 in Takalar Regency.

This is in line with research conducted by Rani and Safarinda (2020) in the early stages of disciplining residents in the application of health protocols only in the form of appeals and recommendations, but after the Governor's Regulation (Pergub) No. 25 of 2020 concerning Control of Infectious Diseases in Central Java, citizen discipline has begun to take the form of massive sanctions.

In the implementation of the COVID-19 response program in 2020 in Takalar Regency going well, all activities can be carried out. However, the implementation of the COVID-19 response program in Takalar Regency is not without obstacles. This is seen from how the volunteers in the economic recovery activities are carried out. In accordance with the statement by Tuwu (2020) that the impact of the corona virus not only affects the level of public health in general, but also affects economic activity, government, culture, psychology and others.

Based on the previous discussion, it is known that the activities carried out in the context of economic recovery are carried out based on data received from the Regional Government, according to the request of the Village Government. in the sense of several situations that occur in the community, for example drivers who have lost their livelihoods due to the COVID-19 pandemic and other situations that make people need assistance

from the government, but in reality there are still many people who have not been covered because they are not registered in the village government's request.

Another obstacle found in the implementation of the COVID-19 response program was the delay in data collection from the puskesmas so that updates and other activities related to cases were also hampered. Another basis for this obstacle was the lack of maximum training for human resources in the previous discussion. In addition, validating data for positive cases found outside the work area, such as those found in Makassar City, for case tracking is difficult to do because of incomplete data.

In addition, the issue of hoax news is also an obstacle for officers in disciplining the public to comply with health protocols and maintain distance, the news circulating in the Takalar Regency community makes people indifferent to protecting themselves and the environment from COVID-19.

Efficient and effective public health responses to disease outbreaks, including stay-at-home orders, testing, resource allocation are an integral part of health emergency work and have slowed and prevented transmission, optimized care and minimized impacts on health care delivery systems (WHO, 2020a, Yang, 2017).

## **Output**

Based on the results of the study, the trend of COVID-19 cases in Takalar Regency is uncertain in terms of the number of confirmed cases, but case tracking has increased. The more cases there are, the faster the spread can be suppressed. Good close contact tracing is the main key in breaking the chain of transmission of COVID-19 (Ministry of Health, 2020).

This is in line with the opinion of Furuse et al. (2020) that the discovery and investigation of active cases is the key to establishing relationships with other cases or transmission events. Detecting cases can lead to effective quarantine of close contacts and identification of risk factors for the formation of such groups. The findings provide information as well as further insight into the clusters of Covid-19 cases in the community that can help with ongoing efforts to curb the pandemic.

Based on the results of research that has been carried out, the policy issued by the Takalar Regency Government in the form of the formation of the Task Force for Handling Corona Virus Disease 2019 (2019) in 2020 is considered very efficient and more effective, the real impact can be seen from the more coordinated every activity carried out. The team was formed into several fields consisting of several Regional Apparatus Organizations that have their respective duties, so that this policy is very helpful in carrying out activities in order to cope with Covid-19 in Takalar Regency.

In such an emergency, the ability to deliver essential services depends on the basic capacity of the health system. Research conducted by Nyasulu and Pandya (2020) advocates close collaboration between essential services and covid-19 teams to identify priorities, restructure critical services to accommodate physical distancing, promote task shifting at primary level, optimize use of mobile/web-based technologies for service delivery /training/monitoring and involving the private sector and non-health departments to improve management capacity. Strategic responses planned thus can help reduce the detrimental effects of pandemics while preventing morbidity and mortality from preventable diseases in the population (Nyasulu & Pandya, 2020).

Based on the results of interviews with informants from the Public Communications Sector, information was obtained that the success of the Covid-19 response program in 2020 in Takalar Regency was considered to be lacking, one of the things that was very influential was the culture of the people where the factors were ignorance and fear of covid-19. Then another informant on implementing the policy, in this case the sub-district government, said that the behavior of the community in accepting existing policies was beyond the control of the government.

Meanwhile, according to (Rani and Safarinda (2020)) the problem in community discipline efforts that occur is the demands in terms of the economy of each citizen so that there are some rules that are difficult to stay at home and rules to always keep a distance. The Corona virus makes people experience trauma and the atmosphere is threatened and afraid, there are residents who feel panicked, confused, and sad (Tuwu, 2020).

This government policy of course caused a "cultural shock" and psychological upheaval among the people of Takalar Regency, this created new problems and challenges for the government and society. Based on the

results of research that has been carried out, it is known that in the implementation of providing assistance to people affected by the Covid-19 pandemic, it has been fully implemented as it should, but due to budget constraints, there are still people who do not receive assistance from the government.

Meanwhile, according to research conducted by Hs et al. (2020) the fantastic budget issued by the government for the Pre-Employment Card policy can actually be diverted to other more important and concrete needs including Direct Cash Assistance (BLT).

This is in accordance with the statement of Scott L et al. (2020) that it is wrong to think that social and economic policies are simply a matter of recovery. This is also a problem for emergency response. Relatively authoritarian public health measures (such as social distancing or temporary economic closures) depend on public compliance. Compliance requires not only things like good communication and trust, but also a political economy that allows people to stay at home without going hungry.

The results of the above study indicate a direct impact on the health system, negatively impacting its function, as the depletion of resources to deal with emergencies is very prominent. Diversion of health personnel, suspension of services, reduced health-seeking behavior, unavailability of supplies, decreased monitoring of data, and funding crisis were some of the noted challenges (Nyasulu & Pandya, 2020).

#### 4. Conclusion

Based on the results of in-depth interviews that have been carried out related to the implementation of the Covid-19 prevention program in Takalar Regency in 2020, it was concluded that the Input section, namely the Man available in the implementation of the COVID-19 response program in Takalar Regency, had met in terms of quantity. Human Resource Training for the 2020 COVID-19 Task Force has not been maximally carried out. Materials and machines owned by the 2020 COVID-19 Task Force have not been fulfilled, especially facilities for handling COVID-19 bodies, taking suspects who are still assisted by the Provincial Health Office. The available money has not been able to cover activities in the COVID-19 response program, especially in economic recovery activities carried out by the task force. In the process of implementing the COVID-19 response program, each field has Human Resources assigned to each activity according to their respective expertise. Evaluation meetings are held 1 (one) time in 1 (one) month as well as planning activities for socialization and education programs, handling COVID-19 patients, providing assistance, as well as planning for judicial operations to be carried out. Cross-sectoral collaboration between fields in the COVID-19 handling task force is closely intertwined. Socialization activities for the community as well as for officers are carried out. Guidelines for implementing the COVID-19 response program are in accordance with the regulations of the Ministry of Health. In its implementation, there are several obstacles, including: Validation of data on confirmed positive cases outside the Takalar Regency area and delays in data from the Puskesmas. Another obstacle is that there are differences in the data requests made by the village/kelurahan government with what is in the field. As well as the circulation of hoax news in the community. In the Output section, the trend of COVID-19 cases in Takalar Regency is uncertain in terms of the number of confirmed cases, but case tracking has increased. The COVID-19 response program has not been carried out optimally due to several obstacles, including the limited budget available and the culture of the community in implementing the prokes which is still minimal.

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