

Providing Health Education as an Effort to Improve Knowledge and Prevention of COVID-19 for Persons with Disabilities, PPDMS Social Institutions, Nglipar, Gunungkidul

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Abstract. People with disabilities are vulnerable to being infected with the COVID-19 virus. The COVID-19 pandemic has had an impact on human life, including the health of people with disabilities. The government makes various policies and programs to prevent the spread of COVID-19, but their implementation is still challenging for people with disabilities. This community service program was carried out in collaboration with Mitra Sejahtera Disability Empowerment Centre (PPDMS), an organization empowering people with disabilities in Gunungkidul Regency. Empowerment of people with disabilities was carried out using 'community control' principle in which the community has the control in making decisions regarding the problems they face so that they can adopt a 'new normal' lifestyle because of their knowledge. The principle of 'community control' was applied by providing education about COVID-19 situation in Indonesia, the symptoms and signs of COVID-19 infection, wash hands, proper cough etiquette, how to use masks, food and lifestyle that can prevent COVID-19 transmission, as well as about the benefits of COVID-19 vaccination. Education was given with a presentation followed by discussion. Evaluation was carried out quantitatively and qualitatively. Quantitative evaluation using pre-test and post-test showed an increase in knowledge. Qualitative evaluation using FGD indicated changes in attitudes and behaviour that support the adoption of 'new normal' lifestyle to prevent transmission of COVID-19. People with disabilities who have received education disseminate the information obtained to other people with disabilities, resulted in multiplication effect of this empowerment program for people with disabilities.

Keywords: community service, disabilities, COVID-19, health education

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INTRODUCTION

The COVID-19 pandemic that has hit the entire world since 2019 until now has had far-reaching impacts and consequences for the world, countries, and has changed many aspects of human life. One of the impacts as a consequence of the Covid-19 pandemic is the field (Turk et al., 2020). According to the Indonesian Ministry of Social Affairs, persons with disabilities are a group of people who directly or indirectly have a high vulnerability to the COVID-19 virus (Badan Pusat Statistika, 2015). The Central Statistics Agency has 8.56% of the Indonesian population with disabilities (Badan Pusat Statistika, 2015). Gunungkidul Regency has the second-highest population of people with disabilities after Sleman in the Special Region of Yogyakarta. People with disabilities in DIY in 2020 found a total of 8,333 people and 1,757 of them are residents of Gunungkidul (Biro Tata Pemerintahan Setda DIY, 2021).

Law No. 8 of 2016 define and arrange persons with disabilities as "Persons with disabilities are any people who experience physical, intellectual, mental, and or sensory limitations in the long term who is interacting with the environment can experience obstacles. In addition, difficulties to participate fully and effectively with other citizens based on equal rights" (Indonesian President and Parliament, 2016). In order to prevent Covid-19 in Indonesia, the government has made various policies and programs to prevent the spread of Covid-19. The Ministry of Social Affairs has carried out socialization and education both for persons with disabilities and for Assistants for Persons with Disabilities, but it is still challenging to implement it for persons with disabilities. There is considerable concern regarding the safety and effectiveness of vaccines and distrust of vaccines (Humas Dit. Penyandang Disabilitas, 2021).

PROBLEMS

Pusat Pemberdayaan Disabilitas Mitra Sejahtera (PPDMS) is a community empowerment institution whose office is located in Nglipar Village, Gunungkidul. The main activity of PPDMS is in the social sector to empower its members with disabilities and families of people with disabilities to be more independent. PPDMS consists of 19 branch organizations spread across 14 sub-districts, namely: Ponjong, Semin, Ngawen, Nglipar, Semanu, Karangmojo, Panggang, Wonosari, Patuk, Gedangsari, Playen, Tanjungsari, Paliyan, Saptosari. The total number of PPDMS members is 435 people.



Assessment of PPDMS needs is carried out through online meetings and field visits. Based on the online and offline discussions, it is known that persons with disabilities want to know about COVID-19: causes, prevention, disease process, and vaccinations, even though they have not received education about COVID-19. From the needs assessment, it is agreed to organize COVID-19 education for PPDMS members with disabilities.

METHOD OF IMPLEMENTATION

This community service uses one of the principles of community empowerment, namely that the community is in control (Audit Scotland, 2019). The community will be more empowered if they have control to make decisions and manage the assets they have. This condition can be achieved in various ways including increasing the capacity of the community, especially marginalized groups such as persons with disabilities. Capacity building is carried out through training and mentoring so that the community has sufficient knowledge to make decisions regarding the problems they face. Servants provide training and assistance to administrators from 19 PPDMS member organizations.

The capacity building of PPDMS members with disabilities is carried out in several stages, namely:

1. Preparation.

- a) The first preparatory stage, starting with a discussion among team members regarding the goals, objectives, and methods and narrowing the topic of community service on January 11, 2021. After reaching an agreement, a meeting with the chairman of the PPDMS institution was held on January 13, 2021, to get an overview of PPDMS activities and profiles.
- b) The second preparation stage, carried out with a field visit on February 7, 2021, to meet with representatives of PPDMS members and discuss to dig deeper into the wants and needs of PPDMS.
- c) The third preparatory stage, carried out on March 15, 2021, is to determine the schedule, distribute tasks, and prepare transportation, materials, and files related to counselling.

2. Implementation

The implementation of this service program began with socialization and continued with counselling about COVID-19.

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3. Evaluation

Evaluation and assessment are carried out in two methods, namely quantitative and qualitative.

- a) Quantitative method, that is, participants' understanding is measured by giving a test before and after the delivery of health education materials. The answer to the question is to choose a true or false choice totalling 15 numbers.
- b) Qualitative method, namely, Focus Group Discussion (FGD) conducted by inviting PPDMS members who were present at the previous counselling.

RESULTS AND DISCUSSION

This service activity was carried out in April-June 2021, starting with socialization on April 10, 2021 (Figure 1). At the meeting, the volunteers had the opportunity to meet with the management of the 19 PPDMS member organizations to learn about the activities of each organization. Before the pandemic, these 19 PPDMS member organizations were always acting according to schedule, but since the pandemic, they are no longer able to carry out activities together in routine meetings. Communication between members is established through the WhatsApp group. Then the volunteers explained the purpose of the program, namely increasing knowledge about COVID-19 so that people with disabilities can make their own decisions regarding the 'new normal' lifestyle to prevent the transmission of COVID-19 disease. There are many questions about COVID-19 that have been asked by PPDMS members and the volunteers try to answer some questions that can be answered briefly. Several questions were not answered at the first meeting because the material on COVID-19 was expected to be given at the agreed counselling session, which was held on May 1, 2021.





Figure 1. (a) Socialization Workshop; (b) Workshop

Counselling about COVID-19 was given using a PowerPoint presentation method and continued with a discussion (Figure 2). There were 14 who participated in this outreach. COVID-19 counselling materials include the development of COVID-19 in Indonesia, symptoms, and signs of COVID-19 infection, how to prevent and wash hands, correct cough etiquette, how to use masks, food, and lifestyle that can prevent the transmission of COVID-19, and immunity and the benefits of Covid-19 vaccination. The material and discussion were conducted for 3 hours.

Before and after receiving the counselling material, participants were given 15 questions, as shown in Table 1. Based on the results of the first stage of the evaluation, it was seen that there was an increase in the average number of correct answers answered by participants; from an average of 66% to an increase of 66%. to 88%. In conclusion, there was an increase in knowledge of the counselling participants with the pre-test-post-test evaluation method.

Table 1. Comparison of the correct answers' percentage to the pre-test and post-test

| No. | Questions | Correct Answer Percentage | |
|-----|---|---------------------------|-----------|
| | | Pre-test | Post-test |
| 1 | The cause of COVID-19 is a type of bacteria | 20% | 86.70% |
| 2 | Covid-19 only affects adults | 80% | 100% |
| 3 | Good handwashing should be 10 seconds | 53.30% | 80% |

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| No. | Questions | Correct Answer Percentage | |
|-----|--|---------------------------|-----------|
| | | Pre-test | Post-test |
| 4 | Hand sanitizer with 60% alcohol can kill germs | 66.70% | 93.30% |
| 5 | 1 layer cloth mask is enough to prevent the | 53.30% | 93.30% |
| | transmission of COVID-19 | | |
| 6 | Sunshine doesn't kill Covid-19 | 6.70% | 33.30% |
| 7 | Cough is not necessarily a sign of Covid-19 | 100% | 100% |
| 8 | Loss of smell is suspected of Covid-19 | 93.30% | 93.30% |
| 9 | A throat swab is one of the Covid-19 tests | 73.30% | 93.30% |
| 10 | The elderly and disabled can be infected | 86.70% | 100% |
| 11 | The duration of self-isolation is > 1 week | 66.70% | 93.30% |
| 12 | Vaccine injected 2x | 86.70% | 93.30% |
| 13 | Shaking hands can spread the Coronavirus | 73.30% | 80% |
| 14 | Sneezing etiquette: cover with elbow/tissue | 80% | 93.30% |
| 15 | Vaccine Content: dead/attenuated Covid-19 | 53.30% | 93.30% |
| | virus | | |
| | Average | 66% | 88% |

The second stage of the evaluation was carried out with a focus group discussion (FGD) on June 13, 2021. FGD is a data collection using qualitative methods by involving a group of people who meet the research/assessment objectives and discuss a predetermined topic. This FGD was facilitated by a professional moderator. This method aims to explore attitudes and perceptions, knowledge, and experience (van Eeuwijk et al., 2017). Through FGD participants were given several selected questions regarding the attitudes and behaviour of participants and participants' experiences after receiving counselling last month. This FGD invited participants who participated in the previous counselling. There were 5 participants who participated in this FGD. The selected questions are a combination of several questions asked by participants during the previous counselling. This is intended to assess whether there are changes in attitudes and behaviour of PPDMS members related to COVID-19.

In the FGD, the volunteers compare the answers of the PPDMS group members using pre-existing minutes. In this second evaluation stage, PPDMS members who initially did not know properly how to wash their hands, the percentage of alcohol content in hand sanitizer,



and how to prevent COVID-19, were able to answer correctly in accordance with the COVID-19 Transmission Prevention Guidelines for the community. Washing hands 20 seconds, 5M, choosing a hand sanitizer with 70% alcohol content, masks, and social distancing are measures that can be taken to prevent COVID-19 transmission (Kementerian Kesehatan Republik Indonesia & GERMAS, 2020). After the counselling was carried out, currently PPDMS members are more likely to sunbathe, maintain good ventilation and airflow and eat vegetables and fruit to increase immunity. Vaccination was something that PPDMS members were afraid of during their first field visit, now their insights are broadened and according to PPDMS members, they will patiently wait for their turn to be vaccinated according to the government schedule and receive vaccinations as an effort to fight the COVID-19 pandemic.



Figure 2. Group Photo after FGD, volunteers with some members of PPDMS

From the second stage of the evaluation, the counselling materials were provided and sent via the PPDMS WhatsApp group, they were downloaded by members of the PPDMS group and became a topic of discussion and reference for sources when there were PPDMS members who asked questions related to COVID-19, including ordinary members, who are not management members of the 19 PPDMS organizations. From this evaluation, it can be concluded that there has been a change in the attitudes and behaviour of persons with disabilities after they have received a correct understanding of COVID-19. This shows that when the community has control over decisions related to the problems at hand, the community can progress and develop. The participation of persons with disabilities in the realization of a healthy society is not only limited to oneself, but also manifested in initiatives

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to share knowledge with other persons with disabilities that can strengthen social solidarity in society, cooperation, and a sense of empathy (Margarini, 2021).

CONCLUSION

Community service activities using the principle of empowering the community to have control in making decisions related to the problems at hand have proven to be effective. Education about COVID-19 provided according to the needs of PPDMS members, Nglipar District, Gunungkidul Regency was enthusiastically welcomed by PPDMS members and had a positive impact on changing attitudes and behaviour of persons with disabilities related to COVID-19 prevention. Persons with disabilities further disseminate knowledge about COVID-19 to other persons with disabilities and produce multiplication effects in community empowerment.

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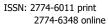
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Edukasi Kesehatan Sebagai Upaya Peningkatan Pengetahuan Dan Pencegahan COVID-19 Bagi Penyandang Disabilitas, Lembaga Sosial PPDMS, Nglipar, Gunungkidul

Abstrak. Penyandang disabilitas merupakan kelompok masyarakat yang memiliki kerentanan tinggi terinfeksi virus COVID-19. Pandemi COVID-19 yang melanda seluruh dunia sejak tahun 2019 hingga saat ini membawa dampak dalam kehidupan manusia, termasuk dampak bagi kesehatan penyandang disabilitas. Pemerintah membuat berbagai kebijakan dan program dalam upaya pencegahan penyebaran Covid-19, namun masih dirasakan sulit implementasinya bagi penyandang disabilitas. Program pengabdian kepada masyarakat ini dilakukan bermitra dengan Pusat Pemberdayaan Disabilitas Mitra Sejahtera (PPDMS), sebuah organisasi yang memberdayakan penyandang disabilitas di Kabupaten Gunungkidul. Pemberdayaan penyandang disabilitas dilakukan dengan menggunakan prinsip 'community control' atau 'masyarakat memegang kendali' dalam pengambilan keputusan terkait masalah yang dihadapi. Anggota PPDMS mempunyai keingintahuan tentang COVID-19 agar mereka dapat mengadopsi gaya hidup 'new normal' karena pemahaman tentang penyakit ini. Prinsip 'masyarakat memegang kendali' diterapkan dengan memberikan edukasi tentang perkembangan COVID-19 di Indonesia, gejala dan tanda infeksi COVID-19, cara pencegahan dan cara mencuci tangan, etika batuk yang benar, cara menggunakan masker, makanan dan gaya hidup yang dapat mencegah penularan COVID-19, serta tentang kekebalan dan manfaat vaksinasi COVID-19. Edukasi diberikan dengan presentasi kemudian dilanjutkan dengan diskusi dan tanya jawab. Evaluasi program dilakukan secara kuantitatif dan kualitatif. Melalui evaluasi kuantitatif dengan pretest dan post-test menunjukkan adanya peningkatan pengetahuan, sedangkan evaluasi kualitatif dengan focus group discussion mengindikasikan terjadinya perubahan sikap dan perilaku yang mendukung adopsi gaya hidup baru untuk mencegah penularan COVID-19. Penyandang disabilitas yang sudah menerima edukasi bahkan menyebarkan pengetahuan yang diperoleh kepada penyandang disabilitas lain, sehingga terjadi efek multiplikasi dari program pemberdayaan penyandang disabilitas ini.

Kata kunci: Pengabdian masyarakat, disabilitas, COVID-19, edukasi kesehatan