



Community Nursing Strategies for Tourism Health Families during COVID-19 Pandemic



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Manuscript submitted: 18 June 2021, Manuscript revised: 09 July 2021, Accepted for publication: 27 August 2021

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Keywords

*COVID-19;
health protocol;
pandemic;
tourism health;
community nursing;*

Abstract

Traveling during the COVID-19 pandemic to reduce boredom or stress due to staying at home, must continue to apply health protocols. However, there are still many people who are indifferent to these rules, causing community nurses to have a role and have the right strategy so that there will no longer be an increase in the positive number of COVID-19. This study aims to find out the right strategy carried out by community nurses for families doing tourism to continue to apply health protocols during the COVID-19 pandemic. This type of quantitative descriptive research is carried out through interviews and filling out questionnaires to expert respondents. The results of the questionnaire showing strategic priorities, paired comparisons were carried out which were analyzed using the Analytical Hierarchy Process (AHP) method. The results of the study, which was preceded by the determination of three indicators consisting of health, family, and tourism protocol, resulted in 7 alternative strategies. Of the seven alternatives, there are three strategic priorities in a row which consist of providing communication, information, and education (KIE) media regarding the prevention and control of COVID-19 in strategic locations in every tourist spot.

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Contents

Abstract	224
1 Introduction	225
2 Materials and Methods	226
3 Results and Discussions	226
4 Conclusion	229
Acknowledgments.....	229
References	230
Biography of Authors	230

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1 Introduction

Since the spread of the COVID-19 virus in the world until the World Health Organization established a global emergency status, it has raised awareness not only of the spread of the disease but the possible impact on the world economy. The COVID-19 outbreak has had an impact on international activities, such as the economy and various other activities, one of which is activities in the tourism sector (Berger, 2020). In Law Number 10 of 2009 concerning tourism, it is explained that tourism consists of various kinds of tourism activities and is supported by various facilities, as well as services provided by the community, businessmen, government and local governments, while tourism is a travel activity carried out by a person or group (Dryglas & Salamaga, 2018). People by visiting certain places for recreational, personal development, or studying purposes the uniqueness of the tourist attraction visited in a temporary period. Before the COVID-19 outbreak, the tourism sector in 2020 was predicted to be the largest contributor to the country's foreign exchange in 2020, but this hope was suddenly lost due to the existence of COVID-19. As a result of the COVID-19 outbreak, many potential tourists have canceled visits to tourist attractions (ODTW) (UNWTO, 2020). This is reinforced by a statement from the UNWTO (United Nations World Tourism Organization) (2020a) which estimates that international tourist arrivals may fall by 20% to 30% by 2020 (UNWTO, 2020).

COVID-19 has caused people to remain at home, must always be vigilant by maintaining distance from each other and are advised to reduce travel (Kissler et al., 2020). Even though these conditions prevent people from traveling, it does not mean that this condition will last forever. The results show that after the area quarantine status or mobility restrictions are lifted, the community will continue to travel (Sayili et al., 2007). This aims to reduce the level of stress or boredom experienced by the community when there is a stay at home rule. In addition, tourism becomes a means of revenge or what is known as revenge travel or revenge travel.

This revenge tour is a tour carried out by tourists who have plans and are delayed due to COVID-19 or revenge tours for limited freedom and want to go back out to visit tourist attractions and socialize like before the pandemic. Therefore, the government needs to prepare all tourism stakeholders to welcome the post-quarantine tourist wave. In connection with the strong desire of the community to do tourism, strategic steps have been taken by UNWTO and WHO (UNWTO, 2020a). Apart from UNWTO and WHO, the government has also started to implement policies, especially in tourist locations to avoid the new COVID-19 spread cluster. But in fact, it took quite a long time to allay the concerns of potential tourists regarding the transmission of the virus in a crowd (Mufti, 2020). Therefore, community nurses are needed to help families who are still worried about traveling or families who want to travel.

Community nurses are nurses providing a form of professional service based on nursing knowledge and tips aimed primarily at high-risk groups to improve community health status by emphasizing efforts to improve health, prevent disease and not neglect curative and rehabilitative (Betony & Yarwood, 2013). From this understanding, it is known that this community nurse aims to maintain public health together with other professionals and work more closely with community members (Jansen et al., 1996; Hussin et al., 2021). This makes the role of community nurses to deliver health education or promotion very large and more heard by the public. With the potential for revenge travel, it is hoped that the community nurse will have a strategy for families who are going on trips or tours, which will have the potential to meet many people. Therefore, community nurses must have a strategy for families who are going to travel to stay healthy during the COVID-19 pandemic (Clase et al., 2020; Campbell, 2020). Thus, this study aims to develop a community nursing strategy for the family for tourism health during the COVID-19 pandemic.

2 Materials and Methods

In developing a strategy, a quantitative descriptive study was conducted using data collection techniques, interviews with expert respondents and literature studies. Furthermore, using a pairwise comparison questionnaire between the elements at each level in order to obtain a hierarchical structure, which is processed by expert choice, and analyzed using the Analytical Hierarchy Process (AHP) method (Saaty, 1993). According to Marimin (2005); Latifah (2005), AHP's working principles consist of hierarchical arrangement (decomposition), criteria and alternatives assessment (comparative judgment), priority determination (synthesis of priority), and logical consistency (local consistency). The basic concept of AHP is the use of a pairwise comparison matrix to produce relative weight values between criteria and alternatives. A criterion is compared with other criteria in terms of how important it is to achieving the goals above (Saaty, 1993).

3 Results and Discussions

Since the COVID-19 pandemic, various sectors in human life have decreased, including the tourism sector. A number of stimuli prepared by the government to revive the tourism sector were unable to stem the negative impact of COVID-19 (Ningsih et al., 2021). Since the COVID-19 pandemic, various sectors in human life have decreased, including the tourism sector. A number of stimuli prepared by the government to revive the tourism sector were unable to stem the negative impact of COVID-19. Facing this, various efforts have been made by the Indonesian government to save and accelerate the pace of Indonesia's economy in the tourism sector, besides that the tourism sector plays an important role in overcoming community saturation during this pandemic. Under normal conditions, there is a possibility that society may experience burnout (Asman et al., 2020; Asman & Asman, 2021).

This saturation can be caused by factors of job loss due to staff reduction, loss of livelihoods, health workers who cannot meet with their families and large work demands, people who are at home also experience saturated, bored and stressed conditions (Asman, 2020; Lisbet, 2020). In dealing with the stress of this pandemic, it can be done by thinking realistically, being able to take lessons from the disaster, surrendering and praying (Asman & Fatimah, 2020). Sharing, doing positive things, by involving families for excursions and obeying tourism health protocols of course (Sayili et al., 2007). This can be seen from the new normal tourism which is opened in several places, but still adheres to the prevailing health protocols in accordance with Ministerial Decree 02/KB/2020 and KB/1/UM.04.00/MK/2020 which was approved by the Minister of Tourism and Creative Economy with Minister of Education and Culture.

With the ratification of the decree, it encourages activists in the tourism sector to immediately open tourist objects and at the same time causes the Indonesian people who are already bored at home to want to do tourism activities. Given the importance of maintaining distance between tourists, local governments and related stakeholders also need to prepare supporting policies or regulations that can prevent crowding. Supporting this, education or health promotion is also provided to the community around tourist objects and tourism service entrepreneurs so that they can jointly monitor and comply with policies made to prevent the spread of the plague. This is to avoid panic and worry about the spread of COVID-19. In addition to the preparations made by the government, the community around tourist objects and tourism service entrepreneurs, families who are going to travel to tourist attractions must also understand the health protocol and the rules that have been set (Gunter et al., 2018; Foddai et al., 2020). If families or tourists do not know and understand it, then the potential spread of COVID-19 cannot be prevented. Health education or promotion can be carried out by community nurses. Despite the fact that community health nurses in Indonesia, especially those in health centers, do not carry out many professional duties for various reasons and problems (Swarjana, 2015). However, health education and promotion must still be provided to families or tourists. Therefore, to develop a community nurse strategy for families who will travel during a pandemic, 3 indicators are used consisting of health, family and tourism. These three indicators are analyzed for the level of consistency indicated by the small consistency ratio (CR) value of 0.1, namely 0.04 which

is shown in Figure 1. This assessment produces a weighted value for each element, as well as provides an overview of the priorities for each of these elements (Putri al., 2018; Ratiu & Purcarea, 2015).

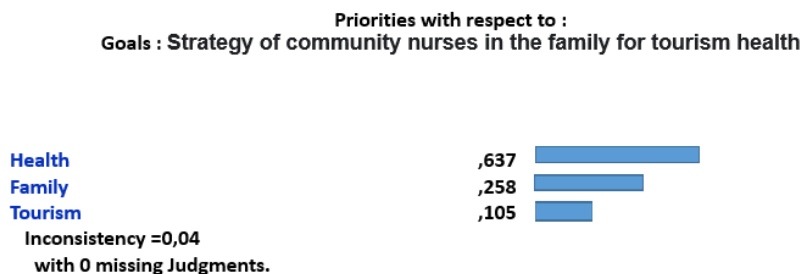


Figure 1. Value consistency criteria

Furthermore, after the established criteria are consistent, then an alternative policy or strategy is prepared related to each of these criteria. This alternative strategy is a strategy that can be carried out by the government and community caregivers, at the same time it can be applied in the family environment who will be doing tours during the COVID-19 period, as follows:

- 1) Evaluation of the health service program provided to the family.
- 2) Increasing coordination and cooperation of community nurses with local communities who live around tourist sites.
- 3) Direct checking and monitoring within a certain period of time for families doing tours.
- 4) Using an emotional approach in providing health services to the family.
- 5) Community nurses socialize health protocols that need to be implemented by families at tourist attractions.
- 6) Provision of communication media, information and education (kie) regarding the prevention and control of COVID-19 in strategic locations in every tourist spot.
- 7) Improving the quality and role of community nurses as supervisors of families at each tourist location.

The hierarchy of the criteria and alternative policies can be seen in Figure 2. This figure explains that the purpose of the hierarchy is to determine the family nurse strategy for tourism health during the COVID-19 pandemic which is a priority based on health, family and tourism criteria with 7 alternatives. policies or strategies that have the potential to be implemented.

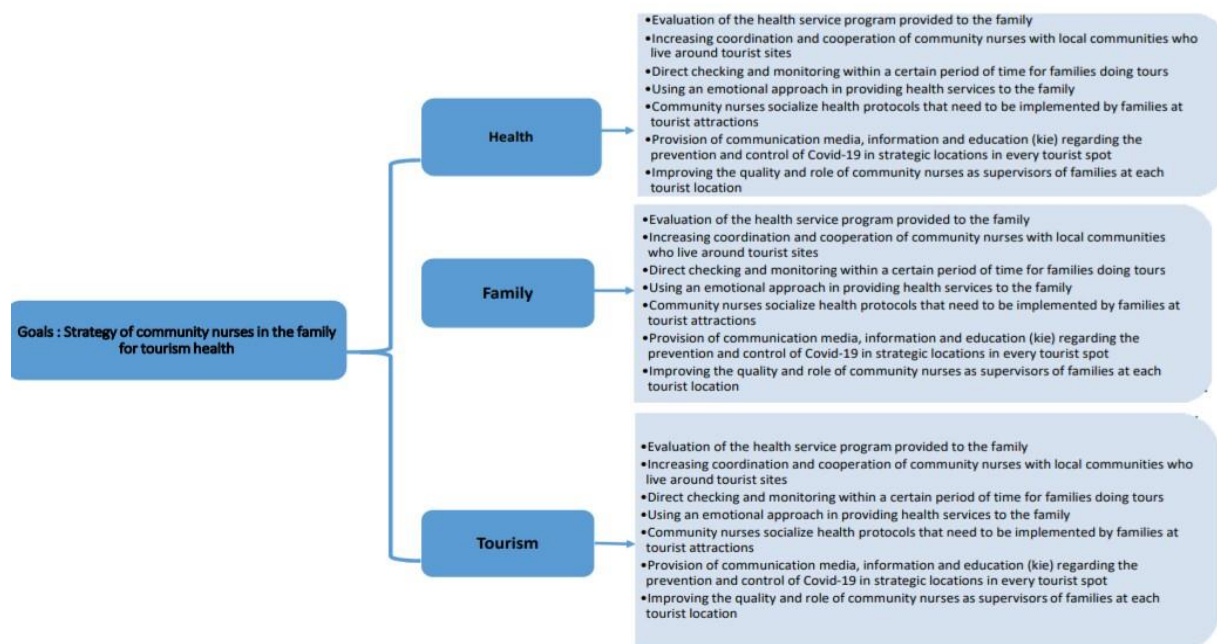


Figure 2. Hierarchy of community nurse strategies in families

The results of the pairwise assessment between policy alternatives carried out by the expert resulted in three policy priorities. This means, of the seven existing policy alternatives, what the government can do in priority to implement is the alternative that has the highest weight, namely three policies or strategies. The priority strategies or policies based on Figure 3 are as follows:

- 1) Provision of communication, information and education (IEC) media regarding the prevention and control of COVID-19 in strategic locations in every tourist spot (37%). This strategy can be implemented in the following steps:
 - a) Designing and designing media in various forms that are effective and in accordance with the needs of the target community by choosing the determination of images, covers and paying attention to aesthetics that can attract people's attention.
 - b) Evaluating the IECs that have been produced and those that have been distributed. The extent to which benefits the community and impacts on changes in attitudes and behavior in society.
 - c) Develop modules, manuals, and posters that are easy to understand and apply that can be used by families.
 - d) Designation of field officers with the aim of promoting the prevention and control of COVID-19.
- 2) Direct checking and monitoring within a certain period of time for families doing tours (22%). This strategy can be implemented in the following steps:
 - a) Tourists are required to report to the RT head and community nurse that they will and have taken a tour.
 - b) Tourists are required to bring a rapid test as proof that tourists are not indicated by COVID-19.
 - c) Facilitating health protocols for tourists who will enter tourist areas.
 - d) Assignment of field assignments with the aim of monitoring tourists in order to follow health protocols.

- 3) Community nurses socialize health protocols that need to be implemented by families at tourist sites (16.2%). This strategy can be implemented in the following steps:
- Formation of community nurses who are experienced and have expertise or knowledge about COVID-19.
 - Community nurses disseminate information about health protocols that must be applied by every family when outside the home, especially in crowded places.
 - Community nurses are assigned to accompany each family for which they are responsible.
 - The community nurse will record or check periodically for family members who return from traveling.

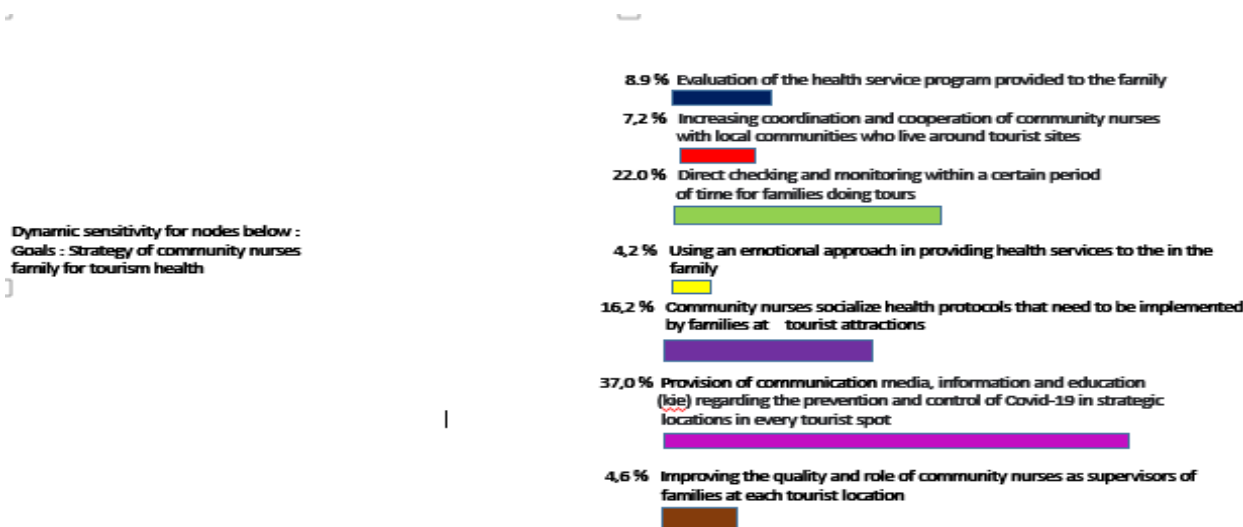


Figure 3. Policy priorities

These three policy priorities or strategies can be applied with the cooperation between the government, especially the Health Office in assigning community nurses, the community represented by the head of the RT and the head of the household, and the Tourism Office. If cooperation is not well established, then families in traveling can increase the risk of spreading COVID-19.

4 Conclusion

The strategy of community caring for the family for tourism health during the COVID-19 pandemic which is a priority based on the criteria for health, family and tourism in sequence which consists of providing communication, information and education (IEC) media regarding the prevention and control of COVID-19 in strategic locations in every tourist spot; direct checking and monitoring within a certain period of time for families conducting tours; community nurses socialize health protocols that need to be implemented by families in tourist attractions; evaluating the health service program provided to the family; increasing coordination and cooperation of community nurses with local communities living around tourist sites; improving the quality and role of community nurses as supervisors of families at each tourist location; and using an emotional approach in providing health services to families.

Acknowledgments




We are grateful to two anonymous reviewers for their valuable comments on the earlier version of this paper.

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