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The Elaboration of Persuasive Health Protocol Messages During The Adaptation of New Habits of Covid-19

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Abstract

The increasing The increasing number of victims caused by COVID-19 has prompted the Indonesian government to implement various strategies to handle and prevent the spread of the virus, one of which is enforcing health protocols. The public has responded to these health protocol recommendations with varying attitudes; some comply while others resist. Young people, in particular, are believed to have lower compliance levels and tend to disregard health behaviors, especially during the COVID-19 pandemic. The Elaboration Likelihood Model (ELM) is a theoretical framework that focuses on how individuals process the persuasive messages they receive. Using the ELM approach, this study aims to identify how young people process the government's recommendations to adhere to health protocols during the COVID-19 pandemic. By surveying 174 young people in two regions that successfully reduced the spread of COVID-19 in Indonesia, this study found that young people tend to process health protocol messages through both central and peripheral routes simultaneously. This means that the messages are processed in a simpler and less critically. The results are expected to provide valuable input for the government in formulating policies or public health interventions aimed at increasing adherence to health protocols among young people.

Keywords: health communication, Covid-19, elaboration likelihood model

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Elaborasi Pesan Persuasi Protokol Kesehatan Selama Masa Adaptasi Kebiasaan Baru Covid-19

Abstrak

Semakin meningkatnya jumlah korban yang disebabkan oleh COVID-19, mendorong pemerintahan Indonesia menerapkan kebijakan penanganan dan pencegahan penyebaran COVID-19 melalui berbagai strategi, salah satunya adalah menerapkan protol kesehatan. Pesan anjuran mengikuti protokol kesehatan direspon dengan berbagai macam sikap oleh publik, ada yang mengikuti namun ada juga yang menolak. Kalangan anak muda merupakan kelompok yang diyakini memiliki tingkat kepatuhan yang rendah dan cenderung abai terhadap perilaku kesehatan terutama sekali di masa pandemi COVID-19. Elaboration Likelihood Model (ELM) adalah sebuah model teoritis yang berfokus pada bagaimana individu memproses pesan pesuasaif yang mereka peroleh Dengan menggunakan pendekatan ELM, penelitian ini ingin mengidentifikasi sejauh mana anak muda memproses pesan anjuran mematuhi protokol kesehatan di masa pandemi COVID-19 yang disampaikan pemerintah. Dengan melakukan survei terhadap 174 anak muda di 2 wilayah yang berhasil menurunkan angka penyebaran wabah Covid-19 di Indonesia, penelitian ini menemukan bahwa kalangan anak muda cenderung memproses pesan penerapan protokol kesehatan di masa pandemi Covid-19 melalui dua jalur yaitu central dan periferal secara bersamaan dimana pesan yang disampaikan dielaborasi secara lebih sederhana dan tidak terlalu kritis. Dari hasil penelitian ini, diharapkan dapat menambah masukan bagi pemerintah dalam membuat kebijakan atau intervensi kesehatan masyarakat yang bertujuan meningkatkan kepatuhan protokol kesehatan di kalangan anak muda.

Kata Kunci: komunikasi kesehatan; Covid-19; elaboration likelihood model

INTRODUCTION

Since March 2020, the Indonesian government through Presidential Decree (KEPRES) Number 12 of 2020 has declared the coronavirus or Covid-19 a national disaster. Through the Presidential Decree, President Jokowi stated that non-natural disasters caused by the spread of Covid-19 as a national disaster. He also confirmed that the handling of national disasters caused by the spread of Covid-19 is carried out by the Task Force for the Acceleration of Handling Corona Virus Disease 2019 (Covid-19) through synergies between ministries or institutions and local governments (Keputusan Presiden Republik Indonesia Nomor 12 Tahun 2020, 2020). The decision stimulated various government policies in handling and preventing the spread of Covid-19 both in economic and social aspects. The Task Force for the Acceleration of Handling Covid-19 (GTPP Covid-19) has implemented various policies to prevent and control the spread of the virus, starting from establishing guidelines for preventing and controlling Covid-19, recommending self-prevention efforts such as using masks that meet standards when leaving the house and interacting with other people, washing hands and using hand sanitizer, social distancing, working from home, Large-Scale Social Restrictions (PSBB), and health protocols in the new normal period

which have now changed to Adaptation to New Habits (Adaptasi Kebiasaan Baru; hence AKB) (Amin et al., 2023; Kartinawati et al., 2022).

The policies issued by GTPP Covid-19 regarding health protocols have been responded to by various parties. Some support and follow the government's instructions and recommendations regarding public health guidelines during a pandemic (Mujani & Irvani, 2020; Putra et al., 2020). However, not a few also have attitudes and behaviors that reject and do not follow government appeals regarding health protocols in the new normal period or AKB (Anggreni & Safitri, 2020; Pribadi & Yulianto, 2020).

The Indonesian government has faced several specific challenges and criticisms in implementing and enforcing health protocols among young people during the COVID-19 pandemic. These challenges and criticisms include social cultural factors, economic pressures, public trust, compliance and awareness.

In July 2020, there were 76,981 cases of infection caused by the Covid-19 virus in Indonesia where the age group that died the most and the highest was the age group over 60 years (Egeham, 2020; Rizal, 2020) with a total of 1,429 people or 15.93% of death cases, followed by the 46-59 years group of 1,367 people (7.53%),

and 31-45 years of age at 2% or 448 death cases. So when compared to children, adults are more likely to experience less severe symptoms or asymptomatic cases of Covid-19, this means that adolescents under the age of 30 may be more likely to engage in behaviors that contribute to the spread of infection (lack of social distancing and hygiene behaviors) and may be less likely to monitor emerging news about the virus (Oosterhoff & Palmer, 2020). In 2021, reports indicated that adherence to health protocols remained a challenge, with young people tending to be less disciplined in following rules such as wearing masks and maintaining social distance (Farisa & Meiliana, 2021). compliance levels showed a slight improvement due to ongoing education and supervision by both the government and communities. The level of public compliance with the implementation of the 3M health protocols has consistently increased since the PPKM program was introduced (Kementerian Kesehatan Republik Indonesia, 2021)

Former Executive Staff of President Joko Widodo, Adamas Belva Syah Devara, said that young people are the largest group or generation of infectious causes of Covid-19, this group is three times larger than the 30-39 age group, and twice as large as the 40 and over age group (Ansori, 2020). Rieger (2020) found that on average, young people aged 26 in Germany tend to have mixed attitudes towards wearing masks during the Covid-19 pandemic. Of the 241 respondents, 50 - 80% answered that they would "probably" wear a mask. Many of them tend not to wear a mask when they are on the street because they are worried that other people might think that they look strange when wearing a mask (Rieger, 2020, p. 52). In the Netherlands, a study of 16-24-year-olds showed that 80% of respondents had a high level of adherence to social distancing and the ability to endure "solitude", followed by the prerequisite that respondents were already aware and had a thorough knowledge of Covid-19 (Koning et al., 2021). Meanwhile, in Indonesia, a study of the 18-25 age group showed low compliance with the implementation of health protocols, especially social distancing and the use of masks when doing indoor and outdoor sports. The low compliance is due to the assumption that wearing a mask during sports activities can inhibit the flow of oxygen, as well as due to cognitive bias (Dunning Kruger effect), where Indonesians believe that they know and understand how to protect themselves from the pandemic and handle it better than the government (Silvano et al., 2021).

Based on the results of reports that show the tendency of young people as a group that is vulnerable to exposure and spread of the virus but with a low level of compliance. This article wants to analyze further how young people's health behavior in the new normal and the factors that encourage them to follow or ignore government instructions regarding health protocols. Elaboration Likelihood Model (ELM) is often used to explain attitude change through the persuasion process and has been widely applied in various fields such as psychotherapy, counseling, advertising and mass media sales (R. Petty & Cacioppo, 1986), information technology acceptance behavior (Bhattacherjee & Sanford, 2006; Zhou, 2012), but still limited in the field of health literacy (Chiang &

Jackson, 2013). Nevertheless, during the COVID-19 pandemic, various countries and regions employed different strategies to ensure youth compliance with health protocols. Such as in China, using internet celebrities medical experts, and influencers on social media to promote health protocols has effectively captured the attention of young people. This strategy has led to an immediate increase in compliance due to the influence of these source's credibility. Through the connection of informationdemand, Internet celebrity medical experts can greatly influence the perceived value, by coaction with trust to influence the final intention(Wei et al., 2022). In Europe, at least 34,000 schools were used as health protocol promoting schools in the European region in the 2012-2013 school year (Bartelink & Bessems, 2019).

ELM is a fairly commonly used framework for organizing, categorizing, and understanding the basic processes underlying the effectiveness of persuasive communication. Elaboration Likelihood refers to the likelihood of a person engaging in problem-relevant thinking to determine the merits of a message or argument for a purpose. ELM proposes the idea that people are not universally thoughtful or unthinking in evaluating the messages they get. Rather, the cognitive effort a person puts into processing a message depends on several situational and individual factors (Chiang & Jackson, 2013; R. E. Petty & Cacioppo, 1984). ELM tries to explain and predict how someone manages information and messages, then whether or not these messages can persuade someone to change their behavior. This theory attempts to explain and predict how individuals

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process information and messages, and whether these messages can persuade them to alter their behavior in the future (Shaffira & Silvana, 2022, p. 98).

In ELM, there are two ways individuals process information: the central route and the peripheral route. The central route is when an individual actively thinks about and weighs new information against prior knowledge. In this route elaboration or critical thinking occurs, a person considers the arguments of others carefully but if the message can be accepted then there is a tendency to become a relatively lasting behavior change that may affect one's behavior completely (Littlejohn et al., 2017). The central route requires one to think critically about issue-related arguments in informational messages and examine the merits and relevance of those arguments before forming informed judgments about one's behavior (Bhattacherjee & Sanford, 2006). Those who process centrally (central route) actively and consciously process information to determine the quality of the message and the merits of the argument. Under these conditions, the likelihood of elaboration of the message is high (Chiang & Jackson, 2013). The peripheral route is a process where one processes the information they receive not through critical thinking. One does not look closely at the strength of arguments but quickly makes judgments based on simple cues. Under the peripheral route, attitude change occurs because the person associates the issue or attitude object with positive or negative cues or makes simple inferences about the merits of the suggested situation (Chiang & Jackson, 2013; R. E. Petty & Cacioppo, 1984). Factors such as likeability, credibility,

whether there is agreement among those hearing the message, and mood are among the possible considerations that operate when the peripheral route is chosen. Changes caused by peripheral processing are likely to be temporary.

In the ELM concept, motivation, source credibility, and likeability are key factors in how health information is processed leading to adherence to following government recommendations on health protocols. When motivation to process recommendations to follow health protocols is high, the central route will be taken, whereas when motivation is low or difficult to process, the peripheral route will be taken. Bitner and Obermiller (Chiang & Jackson, 2013) say that high motivation in the context of peripheral pathways and central pathways may both be involved. In highly motivated processing, the central and peripheral routes act together to influence attitudes and intentions. In the context of health messages, especially regarding the motivation to follow the recommendation to keep a safe distance from others (social distancing). According to Oosterhoff et al. (2020), There are several motivations associated with health messages. First, is personal autonomy motivation. This motivation is represented by a person's motivation to follow health recommendations because they do not want to get sick personally. Second, prosocial motivation, which is a person's motivation to follow health recommendations is to not want to make other people sick. Prosocial motivation includes one's concern for the welfare of others. And third, control motivation, which is a person's motivation to follow health recommendations due to

parental rules or policies from the state or city (Oosterhoff et al., 2020).

Health protocol information that motivates individuals is processed using central pathways. One of the core factors when individuals follow health protocols is when the information presented is relevant and motivating to the issue of the impact of the Covid-19 virus. Because motivation has a positive and significant effect on health behavior change (Aini et al., 2011; Brophy et al., 2013; Hessler et al., 2018; Yaslina et al., 2018), we propose some hypotheses.

H1: Motivation has a positive and significant influence on compliance with health protocol recommendations during the AKB period.

The second factor of the ELM concept is source credibility. Early communication studies on source credibility established the idea as a component of persuasion. The intention, expertise, and trustworthiness of the source influence the audience's perception of the credibility of the message (Cole & Greer, 2013). Source credibility is the extent to which the source of information is considered trustworthy, competent, and reliable by the recipient (Bhattacherjee & Sanford, 2006). Spence et al. (2013) say that source credibility can be defined as an assessment made by the recipient of the message. Source credibility is about the communicant trust in the communicator (p. 4). Messages from sources with high credibility have been shown to increase opinion or attitude change, at least in the short term. To view a source as credible, audiences must believe that the communicator's opinions are unbiased and perceive the source as knowledgeable in the field. Source credibility is particularly important when applied to health information issues. There are three dimensions of source credibility acceptance: trustworthiness (the perception that someone will tell the truth if they are knowledgeable in the field), expertise/ competence (the perception that someone knows the truth), and goodwill/caring (the perception that the communicator cares about the communicant) (Spence et al., 2013). Based on the above views, it can be said that source credibility influences health behavior change. Since source credibility influences health behavior change, we hypothesize as follows:

H2: Source credibility has a significant influence on compliance with Covid-19 health protocols during the AKB period.

The third factor of the ELM concept is likeability. Personal likeability is considered a persuasion tactic and self-presentation scheme (Nguyen et al., 2013; Reysen, 2005) to persuade people (Lai & Liu, 2020), whereas aspects that are considered to increase likeability include physical attractiveness, similarity to oneself, praise, and association (Reysen, 2005). In persuasive communication, likeability refers to the communicator so that likeability can be seen as a perception of the communicator's position and advocacy (Chaiken & Eagly, 1983; R. E. Petty & Cacioppo, 1986).

Assessment of perceptions indicates that perceptions such as being likable and intelligent, will be rated more positively if strong arguments are presented. Conversely, if the arguments presented are weak then they become unattractive, or the arguments presented are less carefully processed (thought through) (R.

E. Petty & Cacioppo, 1986). In this study, likeability is assessed by an individual's satisfaction and trust in the institution or government that issued the health protocol mandate. Positive satisfaction and trust in the institution will support increased processing and scrutiny of the message, and conversely, if trust is low, there will be neutral or negative satisfaction with the institution (MacDonald et al., 2016; Weber et al., 2017). Assessment of trust is seen from the degree of public confidence in the government in fulfilling expectations and expectations; while satisfaction is seen from public agreement on needs, expectations, and fulfillment of these needs by the government (Weber et al., 2017). Individuals view others who are likable as having personalities and beliefs that are similar or in line with themselves.

Based on the above views, it can be said that institutions or government agencies that are liked (likeability) by the community influence health behavior compliance. We hypothesize as follows:

H3: Likeability has a positive and significant influence on compliance with Covid-19 health protocols during the AKB period

ELM is one of the most popular models in organizing and understanding the effectiveness of persuasive communication. The basic premise of ELM is that attitude change caused by message strength depends on the likelihood that an issue or argument will be elaborated (Jones et al., 2003). Certainly, research with the ELM approach in the field of health communication is an interesting thing to study, especially in persuasion and attitude change towards the implementation of health protocols during the Covid-19 pandemic. This is certainly because health communication has an important role in the prevention and treatment of personal, organizational groups, and public health (Littlejohn et al., 2017).

In general, several studies have shown that ELM can help create effective messages to motivate individuals to engage in healthy behaviors. ELM provides an opportunity to understand individuals' thoughts, feelings, and actions (through cognitive processes) when responding to persuasive communications that promote the benefits of certain health behaviors. One example is the use of ELM in health literacy to athletes understand and follow concussion treatment protocols that occur in sporting incidents, where information from sources improves understanding and implementation of health protocols (Turner et al., 2019). Furthermore, research on the challenges of public behavior in implementing health protocols, especially during Covid-19, has also been conducted in the United States, which provides input in efforts to increase motivation for compliance with health protocols without coercion. Through the ELM and cognitive dissonance theory approaches, they showed that individual motivation is present due to fear of the consequences that could occur due to Covid-19, as well as the reinforced perception that everyone is threatened by the same pandemic (Fischer et al., 2020). The effectiveness of health appeals during the pandemic has also been studied in the Philippines using the approach of motivation theory and planned behavior. The results show that understanding the Covid-19 virus has a direct effect, especially

on factors that refer to the anxiety and willingness of individuals to follow health recommendations (Prasetyo et al., 2020). In Indonesia, research on Covid-19 is mostly seen in terms of its impact on the Indonesian economy and exploration of online education (Annas et al., 2020; Olivia et al., 2020). Research in Indonesia that focuses on the role of communication that explores factors on the implementation of behavior change during a pandemic seems to be minimal.

Using the ELM theory approach, this study aims to examine the factors that influence health behavior change, which focuses on how the individual cognition process responds to government messages to always adhere to health protocols during the New Normal. In addition, research on the behavior of young people during a pandemic can provide input into the prevention, handling, and implementation of health policies during a virus outbreak that can be tailored to the needs and behavior of young people. Additionally, we hope this study's findings will provide valuable recommendations for policymakers, health communication strategists, and educators on effectively conveying health protocols to the younger generation in Indonesia.

RESEARCH METHOD

A quantitative research approach was employed for this research where the data collection technique used a survey technique with a data collection instrument in the form of a questionnaire that included close-ended questions. The questionnaire given to participants was given through a link on Google Forms media where respondents were asked to complete 52 survey questions covering various factors such as the intensity of the application of health protocols during the New Normal Adaptation period, individual motives for following health protocols, individual motives for not complying with protocols, the credibility of the Covid-19 Task Force Team in handling the Corona Virus outbreak, and factors of public trust in the Covid-19 Task Force Team.

There are 17 question items posed to identify the intensity of compliance behavior with health protocols, where these questions refer to public health guidelines during the Covid-19 pandemic issued by the Covid-19 Task Force (GTPP Covid-19). The scale used is a Likert scale of 1-5 (1= not at all; 5= very often). For the motivation to follow or not follow health protocol recommendations, this study refers to the research conducted by Oosterhoff et al., where there are 8 question items related to the motivation to follow government recommendations and 6 questions regarding the motivation not to follow government health protocol recommendations. The scale used is a Likert scale (1=strongly disagree; 5=strongly agree). For the variable of source credibility, this study adopts questions from the research by McCroskey & Teven (1999), which assesses three dimensions of source credibility, including trustworthiness (the assessment that the government conveys truthful information), expertise/competence (the assessment that the government possesses expertise, qualifications, intelligence, and authority), and goodwill/caring (that the government has concern for the public). The scale used is a Likert scale of 1-5 (1= strongly disagree; 5= strongly agree). The likeability factor adopts the research conducted by Reysen (2005) and is adjusted to the focus of this study, where respondents are asked to assess their level of satisfaction with the government's performance in handling the Covid-19 outbreak and the extent to which respondents perceive the performance of government institutions (pleasant, unusual, competent, and knowledgeable) in handling the Covid-19 virus outbreak. The scale used is a 5-point Likert scale (where 1= strongly disagree; 5= strongly agree).

The survey was conducted in early January 2021 when January 2021 was the worst month for Indonesia in facing the Covid-19 pandemic. A total of 7,860 people, or 26%, accounted for more than a quarter of the total deaths since March 2020 (Montesori, 2021). Furthermore, according to the Covid-19 Handling Task Force, in January 2021, the compliance rate of the Indonesian population with health protocols (such as wearing masks, physical distancing, and avoiding crowds) was still significantly below 100%. Specifically, there were 109 regencies/cities where compliance with maintaining physical distance and avoiding crowds during the Covid-19 outbreak was less than 60% (Satuan Tugas Penanganan Covid-19, 2021). Additionally, 147 regencies/cities had a compliance rate between 61-75%, and 173 regencies/cities had a compliance rate between 76-90%. Only 67 regencies/cities had a compliance rate of 91-100%. Regarding mask-wearing compliance, 408 regencies/cities had compliance rates below 90%, and only 88 regencies/cities had a mask-wearing compliance rate above 90% (Suwandono, 2021).

The sample was drawn using a nonprobability sampling technique with a qualified volunteer sample. This type of research sample is people who meet the criteria desired by the researcher and are willing to volunteer to become respondents (Morissan, 2012). Respondents in this study were young people with a good level of education (students), who live in Bandung City and Solo City. Bandung and Solo have been categorized as areas in the red zone of the Covid-19 outbreak in 2020 (Prihatsari, 2020). As of January 2021, Solo is still in the red zone (Shalihah, 2021) and Bandung is in the orange zone (Hafizh, 2021). When compared to other cities such as Jakarta, Surabaya, and Semarang which remain the highest areas of Covid-19 spread, Solo and Bandung have succeeded in suppressing the number and reducing the spread of Covid-19. This commitment is also shown by the local government's efforts to impose Large-Scale Social Restrictions (PSBB) January 11-25 with each region's policy standards to further reduce the spread, where Solo focuses on limiting retail operating hours and Bandung on inter and out-of-town travel rules (Khairunnisa, 2021; Kurniawan & Prakoso, 2021). Therefore, the selection of the two cities was deemed appropriate to provide data on the motivation of young people in implementing health protocols to implement New Habit Adaptation to reduce the number of Covid-19 virus outbreaks and their views on the credibility of the government so that they participate in preventing the spread of the virus.

This research data analysis uses statistical data analysis including quantitative descriptive and inferential analysis. The inferential analysis used multiple linear regression analysis where the variables of motive, source credibility, and likability were tested for their causal relationship with adherence to Covid-19 health protocols during the New Normal.

RESULT AND DISCUSSION

Based on the results of the survey, the study obtained 174 respondents consisting of 79 respondents from Bandung, West Java, and 95 respondents from Solo, Central Java with an average age of 15-24 years (35.6%). 70 respondents were male and 104 respondents were female. The majority of respondents have an undergraduate education level (S1) (69%) and are currently studying in semesters 1-2 (52.3%). On average, respondents had a monthly income of 1-2 million (mean = 1.64, standard deviation 0.854).

In implementing health protocols during this pandemic, respondents showed different intensities of compliance. Based on the survey results, this study found that respondents very often used masks when traveling (82.2%), covered their mouths when coughing and sneezing with their upper arms (52.9%), avoided leaving the house, going to school, working, and worshiping at home with a percentage between 50 to 52%, and avoided people with sick symptoms (42.5%). The health protocols that respondents often practiced were maintaining distance avoiding crowds and the implementation of protocols (48%). Respondents sometimes disinfected frequently touched objects (e.g. household furniture) 39.7 percent and minimized shopping at markets or supermarkets with 41 percent. More complete data is shown in the following Table 1.

Item	Never	Rare	Sometimes	Often	Very	Maara	Std
Item	(%)	%) (%) (%) (%)	(%)	Often (%)	Mean	Deviation	
- Complying with health	-	1.7	5.7	48.9	43.7	4.34	.668
protocols in the last 7 days							
- Washing hands with soap	-	2.3	9.2	50.0	38.5	4.25	.715
and water or use hand							
sanitizer							
- Avoid touching eyes, nose,	1.1	11.5	35.6	36.8	14.9	3.53	.923
and mouth with unwashed							
hands							
- Using face mask when	0.6	1.1	1.7	14.4	82.2	4.76	.595
traveling							
- Avoiding shaking hands	3.4	6.3	22.4	35.6	32.2	3.87	1.048
- Avoiding People who have	2.9	1.7	12.1	40.8	42.5	4.18	.919
symptoms of illness	0.6					4.40	854
- Covering mouth when	0.6	1.1	9.2	36.2	52.9	4.40	.751
coughing or sneezing with							
upper arm or using a tissue							
- Changing clothes when	1.1	5.7	17.8	39.7	35.6	4.03	.934
getting home after traveling					1.0.0		
- Regularly using	1.7	14.4	39.7	30.5	13.8	3.40	.955
disinfectant to clean objects							
that you frequently touch							
(for example household							
furniture)							
- Avoiding traveling out of	5.7	7.5	16.7	35.1	35.1	3.86	1.150
town or abroad							
- Avoiding traveling to	4.6	4.6	20.7	20.3	40.8	3.97	1.104
tourist attractions							
- Reducing visits to the	1.7	8	34.5	35.1	20.7	3.65	.954
homes of relatives, friends,							
or family and reducing							
guest visits							
- Minimize the frequency	0.6	7.5	41.4	34.5	16.1	3.58	.868
of shopping or going							
shopping to the market or							
supermarket							
- School / Work From Home	7.5	3.4	10.9	27.6	50.6	4.10	1.193
- Implement physical	1.1	3.4	21.8	48.3	25.3	3.93	.844
distancing from other							
people							
- Carry out worship at	2.3	5.2	9.2	30.5	52.9	4.26	.985
home							

Table 1. Level of compliance with health protocols during the Adaptation to the New Normalperiod among students

Based on Table 1, this study found high compliance among young people with health protocols. This is shown in the use of masks, as the frontline in avoiding the spread of the Covid-19 virus. This compliance is also followed by implementing other health protocols, such as maintaining social distancing, worshiping at home, diligently washing hands, and avoiding crowds, which is shown by only half or between 40-50% of the total number of respondents who very often and the other 30% often implement these protocols. This finding is in line with research conducted by Lutpiah & Hatta, 2020 and Saimin et al., 2020, which found that young people (aged 17-30 years) with a good educational background have a high level of health protocol compliance during the adaptation of new Covid-19 pandemic habits.

However, the survey results also show that respondents still lack efforts to disinfect items that they often touch and change clothes after traveling. This is precisely what increases the transmission of the Covid-19 virus in family clusters or special/closed environmental clusters. This spread is reinforced by the finding that indirect transmission can occur through objects or objects contaminated with the Covid-19 virus (Brlek et al., 2020).

The next analysis was to test the causal relationship between motives, source credibility, and likeability with adherence to health protocols. Table 4 displays the model estimates from the three multiple linear regression analyses that tested the influence of motivation, source credibility, and likeability on compliance with health protocols during the pandemic. Of the three variables tested, it was found that motivation and source credibility have a positive and significant influence on compliance with health protocols during the pandemic. Meanwhile, the factor of likeability did not have a significant effect. Using multiple linear regression analysis, this study found that the significance value of the motivation variable is 0.000 or <0.05 and the count value is 3.958 or greater than the t_{table} value of 1.973 (df = 172), so it can be said that motivation has a positive and significant influence on compliance with health protocols. This finding supports the first hypothesis (H1) which states that motivation has a positive and significant influence on compliance with health protocol recommendations during the New Normal Adaptation period.

The significance value of the effect of the source credibility variable on health protocol compliance shows a significance value of 0.034 or <0.05 and a t_{count} value of 2.133> table 1.972 (df = 172) so that it can be concluded that the source credibility owned by the Task Force Team for the Acceleration of Handling Covid-19 has a significant influence on compliance among young people in implementing health protocols. This is in line with the second hypothesis (H2) which states that source credibility has a significant effect on compliance with Covid-19 health protocols during the New Normal Adaptation period.

Meanwhile, the significance value of the likeability variable on compliance with health protocols during the New Normal Adaptation period shows a significance value of 0.467>0.05 and a t_{count} score of -0.729 < t_{table} 1.972 so it can be said that there is no significant influence between the likeability factor and the level of compliance with health protocols among young people. This finding contradicts the third hypothesis (H3) which states that there is a significant influence between favorable factors and health protocol compliance during the New Habit Adaptation period (see Table 2).

	Health Protocol Compliance						
Item	T _{test}	Significance					
Motivation	3.958	.000*					
Source	2.133	.034*					
Credibility							
Likeability	-0.729	.467					
ANOVA		.000*					
R ²		.162 (16.2%)					

Table 2. Multiple Linear Regression Test Results

The COVID-19 virus outbreak is a virus outbreak faced globally that has a very significant impact on human life that has never happened before. Facing this outbreak, many countries, especially Indonesia, are experiencing uncertainty and anxiety in dealing with the spread of the virus. Various ways that the government has done, one of which is implementing health protocols. The implementation of health protocols during the pandemic requires individuals to implement various health behaviors such as wearing masks, washing hands, maintaining distance and interaction (social and physical distancing), and so on.

Based on the results of various analyses that have been carried out, this study found that there are changes in health behaviors carried out by young people which are inversely proportional to what has been assumed in the background. This study found that young people, especially students living in Solo and Bandung, have a high level of compliance with health protocols. This finding also reinforces and adds to research that found that most adolescents are compliant with implementing health protocol behaviors during the Covid-19 pandemic (Anjaswarni et al., 2021; Mitra et al., 2020; Sari et al., 2020)

Adherence to implementing health protocols during a pandemic by young people is driven by various motivations, including autonomous motivation, prosocial motivation, and control motivation. Respondents stated that they adhered to health protocols driven by the attitude of not wanting to get sick or be exposed to the Covid-19 virus personally, they also implemented a healthy lifestyle during the pandemic because they were motivated by prosocial motivation, namely the desire for the closest people (friends or family) not to contract the Covid-19 virus and control motivation, namely due to parental rules or policies from the state/city. This finding is in line with several studies that found that motivation is one of the factors that play an important role in influencing health behavior change (i.e., Brophy et al., 2013; Nurfalah et al., 2022; Sepriadi, 2017; Setiyaningsih & Ningsih, 2019).

Apart from being driven by various motivations, young people's compliance with health protocols is also influenced by young people's assessment of the government's messages and recommendations conveyed by the Task Force Team for the Acceleration of Handling Covid-19. They rated the credibility of the task force team very highly.

The young people considered that the Task Force for the Acceleration of Covid-19 Handling (GTPP Covid-19) is a team that is well-trained and proficient in handling the Covid-19 virus outbreak. In addition, they stated that the GTPP Covid-19 conveys information honestly, and sincerely, has sincerity and is trustworthy, and has a sensitivity to the fate of the community that focuses on community interests rather than business interests. In general, the credibility of the Covid-19 acceleration handling team, which includes truth worthiness (that the Covid-19 GTPP will tell the truth), expertise/competence (that the Covid-19 GTPP masters the field and will convey information about Covid-19 issues correctly), and goodwill/caring (that the GTPP cares about the community) is so high that it affects the compliance of young people to implement health protocols during the Adaptation of New Habits of Covid-19 pandemic.

CONCLUSION

The Covid-19 virus outbreak is a virus outbreak faced globally that has a very significant impact on human life that has never happened before. Facing this outbreak, many countries, especially Indonesia, are experiencing uncertainty and anxiety in dealing with the spread of the Covid-19 virus. Various ways that the government has done, one of which is implementing health protocols. The implementation of health protocols during the New Normal Adaptation period requires individuals to implement various health behaviors such as wearing masks, washing hands, maintaining distance and interaction (social and physical distancing), and so on.

Using the ELM theory approach, it can be concluded that in the context of health messages, especially regarding the recommendation to implement health protocols during the Covid-19 pandemic and to understand young people's processing of health messages specially how this model enhances our standing of behavior change in public health contexts during pandemic. From the analysis conducted, young people tend to process these messages through central and peripheral channels simultaneously where the messages obtained are elaborated more simply and less critically. Motivated by health persuasion messages and a high level of source credibility, young people decide to comply with and implement health protocols delivered by the government. There are three motivations for young people to follow health recommendations. First, they are motivated not to get sick or be personally exposed to the virus. Second, motivated not to make other people sick. And the third is motivated by parental rules or policies from the state/city. The perception that the Task Force Team has high credibility (which includes trustworthiness, competence, and goodwill) makes young people accept and comply with the messages delivered. Therefore, increasing motivation and credibility of government institutions can be used as input for agencies or governments in implementing health policy communication in implementing health protocol compliance to deal with the Covid-19

Like any research, this research also has several limitations which can later be used as a reference for conducting

future research. First, the research sample is limited to voters from two cities in Indonesia, namely Surakarta and Bandung, so the research results only show results from certain groups, and do not represent the overall situation of the provinces of West Java and Central Java and especially Indonesia. It is important to develop wider coverage, for example, by taking samples from all regions in Indonesia that are included in the red zone for the Covid-19 outbreak. Second, the demographic group used as the unit of analysis is only defined as a group of young people, so further research needs to present groups of children and older adults. Third, this research does not analyze in more depth the intensity of individuals consuming news regarding the development of Covid-19. Fourth, this research only analyzes 3 variables, namely motivation, credibility, and likeability, and does not test other influences such as anxiety and worries. Additionally, we propose potential avenues for future research to explore in-depth motivations behind compliance behaviors with a qualitative approach. The fifth, this research is only limited to cases from January to March 2021 so the level of compliance with implementing health protocols changes over time, especially when people have been vaccinated. Cases of Covid-19 transmission are still relevant to discuss. From the end of 2021, until the beginning of 2022, Indonesia faces the threat of a variation of Covid-19, namely, Omicron. Omicron is a variation of Covid-19 that is highly transmissible, has a risk of re-transmission, is only detected via Polymerase Chain Reaction (PCR), and carries up to 10 mutations. This omicron variant does not show symptoms such as loss of sense of smell and taste like Covid-19, so it is more difficult to detect. Finally, it is hoped that the findings from this study will provide valuable input for future policy-making aimed at improving public health preparedness and response strategies in Indonesia and other countries.

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