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Student's Perspective On Face-To-Face Learning UMS Academic Year 2021/2022 In Applying Health Protocol

Nurlaila Fitriani[1*], Ilham Kukuh Sejati[2], Pramudita Setya Widya Utami[3], Risdiana Nur Izzah[4], Naura Farkhia Putri[5], and Aura Safitri[6]

Department of Nursing, Muhammadiyah University Of Surakarta, Indonesia
*Coresponding author: nsf540@ums.ac.id

Abstract: In the 2021/2022 academic year when the Covid-19 pandemic is still ongoing, various educational institutions have begun to carry out face-to-face learning. The implementation of face-to-face learning in every educational institution cannot be separated from the application of strict health protocols to prevent the transmission of Covid-19. One of the educational institutions that will implement face-to-face learning is the Muhammadiyah University of Surakarta. This study aims to look at the perspective of students as learning actors in the application of health protocols and the effectiveness of learning at the Muhammadiyah University of Surakarta when face-to-face learning is applied. The survey method used in this study and followed by one hundred respondents consisting of universities of health sciences participated by filling in the given. Aspects assessed in this study are learning effectiveness, lecturer competence, and infrastructure which are divided into thirteen statements in which respondents can answer using a Likert scale format. The data obtained were processed using descriptive quantitative analysis method of percentage technique. Based on data analysis, the majority of respondents have positive opinions regarding the preparation of face-to-face learning by universities in implementing health protocols. However, because the research is subjective and limited to health science students, further research needs to be done

Keywords: *face-to-face learning, covid-19 pandemic, student point of view, health protocol, student*.

1. Introduction

The COVID-19 pandemic is a global disease outbreak caused by the SARS-CoV-2 virus with very fast transmission and difficult to control (Ratnawati & Vivianti, 2020). According to WHO (2021), in May 2021 confirmed cases of Covid-19 worldwide were 162,184,263 people with 3,364,446 deaths. Meanwhile, in Indonesia the number of confirmed Covid-19 cases is 1,728,204 people with 47,617 deaths (WHO, 2021). Because the transmission is very fast and difficult to control, many countries have implemented a lockdown system to reduce the spread of Covid-19. The Covid-19 pandemic causes various impacts that affect human activities. Many sectors have started to paralyze due to the implementation of the lockdown, one of which is the education sector which implements the WFH (Work From Home) system to reduce crowds so that the transmission of Covid-19 cases can be suppressed (Ratnawati & Vivianti, 2020). In Indonesia, because cases continue to increase and are difficult to control, based on a decree of four ministers in the education sector during the pandemic period for the 2020/2021 school year, they implement the Belajar Dari Rumah (BDR) system in all regional zones (Kemendikbud, 2020). However, in its application the BDR (Belajar Dari Rumah) learning system is less

effective in learning activities. Submission of material online makes it difficult for teachers to interact and know the condition of students so that communication becomes ineffective. The difficulty of accessing the network also makes students unable to carry out learning optimally. In addition, practical learning that should be carried out directly is hampered due to online learning policies (Ratnawati & Vivianti, 2020). Based on the analysis of online learning in Indonesia which is less effective, the government through the Joint Decree of four ministers Number 03 of 2020 considers the possibility of implementing face-to-face learning in early 2021 (Kemendikbud, 2020). However, due to the high daily increase in Covid-19 cases, the government and society must prepare themselves and their environment for the face-to-face learning implementation plan which will be held in early 2021 (Nugroho et al, 2020). On the other hand, if face-to-face learning is applied in the education sector, considering that in the 2021/2022 school year the Covid-19 pandemic is still ongoing, it is necessary to implement strict health protocols. Based on the Decree of the Ministry of Health Number HK.01.07 of 2020, that the principle of health protocols during a pandemic is an effort made by the entire community to prevent the transmission of Covid-19. The principles of the health protocol used are the 3M principles, namely wearing masks, washing hands, and maintaining distance. In addition, the application of health protocols must be implemented in various sectors, one of which is the education sector. (Kemenkes, 2020). Therefore, at the tertiary level, not all campuses have implemented face-to-face learning, one of which is the Muhammadiyah University of Surakarta which has not implemented face-to-face learning in the first semester of 2021. Seeing the possibility of implementing face-to-face learning in the 2021/2022 academic year, students at the Muhammadiyah University of Surakarta, especially the Faculty of Health Sciences, must prepare themselves and their environment in the face-to-face learning process later. Due to the high increase in Covid-19 cases, it is very likely that there will be differences of opinion among students regarding the readiness of universities to implement face-to-face learning in the 2021/2022 academic year regarding the implementation of health protocols during the pandemic. Based on this, it is necessary to conduct research to show student assessments and perspectives on the plan for implementing face-to-face learning, especially in terms of implementing health protocols which are seen in 3 main aspects that must be met for effective learning to take place, namely learning effectiveness, lecturer competence, and infrastructure. .

2. Materials and Methods

Materials and methods should describe complete material applied in the study. Method should contain all steps and rule that used, include the procedure clearly. New method, new procedure or new treatment could be cited from previous researcher that available on the field. Study about animal or human need requirement to provide ethical approval.

The research uses a quantitative method approach with a cross sectional survey type survey method, namely research by taking subject data at one time. The survey was conducted for 20 days, from September 06 to September 25, 2021. This study involved 100 respondents who were students of the Faculty of Health Sciences, Muhammadiyah University of Surakarta and

consisted of 25 nursing students, 25 nutrition studies students, 25 physiotherapy study program students, and 25 students of public health study program, each of which is a student of the academic year 2018/2019, 2019/2020, 2020/2021, and 2021/2022. The sampling method used purposive sampling method which focused on respondents who fit the specified criteria. The criteria for respondents are students of the Faculty of Health Sciences, Muhammadiyah University of Surakarta who are still active in the lecture process in the 2021/2022 academic year and have internet network access.

The data collection technique used in this study used a questionnaire made in the form of a Likert Scale which aims to assess the results of positive or negative assessments from the student's point of view of face-to-face learning in implementing health protocols. The questionnaire was created using Google Form media which consists of demographic data and three main aspects of the assessment, namely learning effectiveness, lecturer competence, and infrastructure. Demographic data consists of full name, gender, study program, year of class, student status, address, and telephone number. Meanwhile, the three main aspects of the assessment were developed into 13 statements in which respondents can provide answers in a Likert scale format consisting of Strongly Agree (SA), Agree (A), Neutral (N), Disagree (D), and Strongly Disagree (SD). Each respondent is expected to fill in every statement given without exception to avoid data discrepancies. In the first part of the questionnaire, respondents can answer questions related to demographic data, followed by the second part, namely there are 4 statements regarding the effectiveness of learning, in the third part there are 4 statements regarding the competence of lecturers, and the last part there are 5 statements regarding facilities and infrastructure in which all statements will measure student assessment related to university readiness for face-to-face learning in implementing health protocols. Furthermore, the research data were analyzed using descriptive quantitative analysis method, percentage technique

3. Results and Discussion

Table 1 shows the demographic data of the respondents who participated in the study. Based on these data, the number of respondents who participated was 100 people consisting of Nursing (25%), Nutrition Science (25%), Physiotherapy (25%), and Public Health (25%). The majority of respondents came from 3rd semester students (58%) followed by 1st and 5th semester students respectively by 20% and 7th semester (2%). In addition, the majority of respondents were dominated by female students (86%) and male students (14%).

Table 1. Respondent Demographic Data

	Frequency	**Precentage**
Sex		
Female	86	86%
Male	14	14%
Major		
Nursing	25	25%

Nutrition	25	25%
Physiotherapy	25	25%
Public Health	25	25%
Semester		
1	20	20%
3	58	58%
5	20	20%
7	2	2%

One hundred participating respondents were asked to fill out a questionnaire consisting of 13 statements and divided into three main aspects, namely learning effectiveness, lecturer competence, and infrastructure. The research data can be seen in Table 2.

Table 2. Student Perspective On Face-to-face Learning Plans

Question	SA	A	N	D	SD
1	20	48	27	5	0
2	9	38	39	14	0
3	22	48	26	4	0
4	23	50	21	6	0
5	17	46	29	7	1
6	15	52	27	6	0
7	33	42	23	2	0
8	19	63	17	1	0
9	16	41	36	6	1
10	34	46	17	3	0
11	31	48	20	1	0
12	40	46	14	0	0
13	44	45	10	1	0

Based on table 2, it can be seen that the results of the data obtained will be calculated using a Likert Scale calculation to measure the interval number used as a reference for interpreting the results that will be used to measure the level of student expectations, namely the Very High, High, Low, and Very Low categories. The results obtained after performing the calculations can be seen by assessing the data for each main aspect and then accumulating all the data to find the actual results. The results can be seen in the table below.

Table 3. Learning Effectiveness

Category	Freqeuncy	Percentage
Very High	25	25%
High	57	57%
Low	18	18%

Very Low	0	0%

Based on the data given in Table 3, it can be seen that based on the learning effectiveness aspect, 25 respondents had very high expectations, 57 respondents had high expectations, 18 respondents had low expectations, and 0 respondents had very low expectations. So from the data it can be accumulated that the majority of respondents as many as 82 (82%) respondents have positive expectations of aspects of learning effectiveness.

Table 4. Lecturer Competence

Category	Frequency	Percentage
Very High	16	16%
High	66	66%
Low	18	18%
Very Low	0	0%

Based on the data provided in Table 4, it shows that when viewed from the aspect of lecturer competence, 16 respondents had very high expectations, 66 respondents had high expectations, 18 respondents had low expectations, and 0 respondents had very low expectations. So from this data, if accumulated, the majority of respondents as many as 82 (82%) respondents have positive expectations of aspects of lecturer competence.

Table 5. Infrastructure

Category	Frequency	Percentage
Very High	48	48%
High	43	43%
Low	9	9%
Very Low	0	0%

Based on the data given in table 5 shows that when viewed from the aspect of infrastructure as many as 48 respondents have very high expectations, 43 respondents have high expectations, 9 respondents have low expectations, and 0 respondents have very low expectations. So if the data is accumulated, it can be seen that as many as 91 (91%) respondents have positive expectations of the aspects of facilities and infrastructure. Based on the calculation of the three main aspects, if accumulated, the data will be obtained as in table 6 below

Table 6. Student Perspectives on Readiness of Face-to-face Learning in Implementing Health Protocols

Category	Frequency	Percentage
Very High	38	38%
High	53	53%

Low	9	9%
Very Low	0	0%

Based on the data in table 6, it can be interpreted that of the one hundred respondents who were included in this study, 38 respondents had very high expectations, 53 respondents had high expectations, 9 respondents had low expectations, and 0 respondents had very low expectations. So if it is accumulated, it will get the majority of respondents as many as 91 (91%) respondents have positive expectations of the preparation for the implementation of face-to-face learning at the Muhammadiyah University of Surakarta in the 2021/2022 academic year in implementing health protocols.

This The results of data analysis on aspects of learning effectiveness show that the majority of respondents have positive expectations. In this aspect, the thing that is assessed is whether learning will run effectively even though it is side by side with the application of health protocols where the application of health protocols results in limiting lecture time so that it also has an impact on students' understanding of the material provided. In addition, the level of student consistency in carrying out health protocols will also affect the effectiveness of face-to-face learning later. In the aspect of lecturer competence, it shows that the majority of respondents have positive expectations. In this aspect, things that are assessed include the ability of lecturers to maximize learning even though the duration of learning is shortened due to the impact of implementing health protocols. Lecturers must also be able to convey the goals and directions of learning so that students are able to understand the direction and objectives of learning. In addition, lecturers are also expected to be able to balance between material delivery sessions and discussion sessions in order to maximize students' understanding of the material provided. In terms of facilities and infrastructure, it shows that the majority of respondents have positive expectations. In this aspect, what is assessed is how the campus provides facilities to prevent the transmission of Covid-19 which can occur if face-to-face learning is applied. The facilities assessed as part of the implementation of health protocols include providing access to hand washing with even soap, checking body temperature regularly, implementing social distancing by providing a distance to study chairs in each classroom. Based on the assessment on these main aspects, the majority of respondents gave positive expectations of campus readiness to maximize the effectiveness of face-to-face learning even though it must coexist with the application of strict health protocols to prevent the transmission of Covid-19 at universities.

4. Conclusion

The Covid-19 pandemic has had a major impact on various sectors of people's lives, one of which is the education sector, where at the beginning of the Covid-19 pandemic the education sector had to switch from offline learning to network-based or online learning. Over time, because online learning is considered less effective and cases of Covid-19 transmission are starting to be controlled, face-to-face learning can begin to be carried out with various considerations, one of which is the application of strict health protocols. One of the educational institutions that will carry out a plan for implementing face-to-face learning is the

Muhammadiyah University of Surakarta, which in terms of implementing health protocols in the campus area, according to the majority of students from the faculty of health sciences as learning actors, they are considered ready and able to carry out face-to-face learning effectively.

Acknowledgements

This study only uses respondents' personal assessments and is limited to students of the health sciences faculty in assessing the preparation of face-to-face learning at universities so that further research is needed on the effectiveness of face-to-face learning at Muhammadiyah University of Surakarta during the Covid-19 pandemic..

Conflict of Interest

All Authors declare no conflict of interest and agree with the content of the manuscript.

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