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Abstract: The impact of Covid-19 has devastated all aspects of human life. When this pandemic ends, the uncertainty requires all parties to formulate a practical and systematic long-term strategic model against Covid-19. All intervention models have been carried out, but they have not significantly impacted efforts to prevent Covid-19 transmission in the community. Therefore, this article examines the Covid-19 mitigation scenario explicitly based on local wisdom and the optimization of village organization institutions to prevent the spread of Covid-19 in the community. This study was conducted in Pohuwato Regency, Gorontalo Province, Indonesia using the descriptive analysis method. This study found to prevent the spread of Covid-19 at the level of a pluralistic village community and a powerful kinship system, a particular mitigation scenario based on the community's local wisdom is needed. Several mitigation scenarios can be implemented in Pohuwato Regency to prevent the spread of Covid-19 in rural communities, including 1) Communication strategy, 2) Socio-cultural analysis, 3) Public health perspective. This article concludes that local wisdom-based mitigation scenarios are a new approach in controlling the spread of Covid-19 in rural communities that are still closely related. Besides that, to become Resilience a Covid-19 Tangguh Village,

Keyword: village organization, resilience village, covid-19, Pohuwato regency

1. Introduction

1.1. Background

On December 31, 2019, the WHO China Country Office reported pneumonia of unknown etiology in Wuhan City, Hubei Province, China. On January 7, 2020, China identified pneumonia of unknown etiology as a new Coronavirus (novel coronavirus). On February 12, 2020, the WHO officially designated the novel coronavirus disease as Coronavirus Disease (COVID-19) [1]. The coronavirus disease (COVID-19) has spread rapidly worldwide since it was first reported in Wuhan. At the start of
The COVID-19 pandemic has a direct impact on millions of people's physical health, and the virus is thought to pose a substantial mental health threat globally [3]. Covid-19 not only carries a risk of death from infection but also has a substantial psychological impact [4]. Many problems arise and affect human health and life, especially their effect on the individual and collective psychology, such as panic, anxiety, depression, post-traumatic stress disorder, suspicion, infodemia, frenzy, xenophobia, racism. The COVID-19 outbreak has caused a global mental health crisis [5]. Furthermore, the COVID-19 pandemic and its associated control measures - particularly physical distancing and isolation - have devastating consequences for human populations' mental health worldwide.

The COVID-19 pandemic has resulted in more than 4.3 million confirmed cases and more than 290,000 deaths globally. This also sparked fears of an economic crisis and recession. Social restrictions, self-isolation, and travel restrictions have resulted in a reduced labor force in all sectors of the economy and resulted in the loss of many jobs [7]. The Coronavirus that is present amid society grabs attention. The visible impact does not only affect public health but also affects the country's economy. Even today, the world economy is under heavy pressure due to this virus. Seeing the development and influence of the economy is not limited to the scope of the economy itself. The economy can also be affected by culture and health, as evidenced by the Coronavirus spread, which has harmed the world economy [8]. Several critical economic sectors (oil prices, value chains, and travel business) that form the foundation of the global economy have been affected by Covid-19. For example, the cost of oil, where the price and supply of oil are unstable due to uncertain economic policies, affects countries' economies in the world, including Indonesia [9].

The Covid-19 health disaster has the potential to increase its escalation so that all people, regions, or countries must try independently to fight back because almost all areas and countries experience the same disaster. Because all are affected, the basic assumption is the scarcity of carrying capacity from outside the system so that the smallest group of people must have high adaptability or high resilience to survive [10]. In this context, prevention and control of COVID-19 must be considered the utmost priority in all government policies. The development of Covid-19 in Indonesia forced the government to issue guidelines as a strategic step in preventing the spread of the virus. The first step taken is in the form of social distancing advice to avoid large gatherings of people. The transmission of Covid-19 is a droplet or the splash of mucus from the walls of the respiratory tract of a person who is sick when coughing and sneezing; the government recommends that anyone who coughs and suffers from influenza disease use a mask, the goal is to limit the droplet splash from concerned [1,11].

This article aims to create a Covid-19 mitigation scenario to prevent the spread of the pandemic at the community level of the village or village community who are still very thick with local wisdom.
32,292,070 points with a death toll of 986,836 people (CFR 3.02%). Overall, there were 7,501,527 active cases, and 1% of them experienced severe symptoms or were in critical condition. The United States is the country with the highest covid-19 issues globally, which is 7,178,906, then in second place in India with 5,816,103 cases. Indonesia itself ranks 23rd, the second-highest in Southeast Asia after the Philippines, which ranks 21st [12].

The spread of COVID-19 in Indonesia is now increasing and expanding in all regions, accompanied by the number of cases and deaths. This increase also has an impact on political, economic, social, cultural, defense and security aspects, as well as the welfare of the people in Indonesia, so it is necessary to accelerate the handling of COVID-19 with the imposition of large-scale social restrictions (PSBB) to reduce the spread and development of COVID-19 (13 ). Local governments have also implemented a communication strategy with the people in their respective regions to prevent the transmission of Covid-19. Various methods have been used in packaging messages in the form of instructions. Appeals to the community including coercive, informative, canalizing, educative, persuasive, and redundant techniques. However,

Covid-19 nationally has spread in 34 Provinces with a total of 262,022 Covid-19 cases. The death rate was 3.85%, and the cure rate was 73.22% [15]. There are 60,064 active cases, with the number of cases per one million population of 956 cases per one million in Indonesia. DKI Jakarta Province is the province with the highest Covid-19 cases in Indonesia, with 66,731 cases or around 25.5% of national cases. East Java Province is the second-highest province with 42,098 cases or around 16.1% of the national cases [16].

National Gorontalo Province itself ranks 20th with a total of 2,489 cases [16]. Based on the recovery rate and mortality rate, Gorontalo Province is much better than the national average. The cure rate is 88.75% higher than the national average, and the mortality rate is only 2.97% lower than the national average. [17]. The trend of covid-19 cases based on examination dates in Gorontalo Province still tends to fluctuate but not exponentially. The primary reproduction number (Rt) for Gorontalo Province is 0.99, which means that each Covid-19 case is transmitted to one other person, so the number of Covid-19 cases does not increase over time epidemic stabilizes [18].

We can win the battle against Covid-19 only if our actions are better coordinated at the global level [19]. Lockdown, Social Distancing, and Flattening the Curve are the three central interventions used to stop the high risk of transmission of the COVID-19 pandemic. Apart from these three interventions, some necessary daily precautions are also recommended, namely: staying in the hospital when sick; covering the mouth and nose when coughing or sneezing; immediately remove used tissue; avoiding physical contact; frequent hand washing with soap and water, and cleaning frequently touched surfaces [20].

To date, there have been no reports of antiviral drugs or specific Covid-19 vaccines proven to be effective against Covid-19. Almost all countries struggle to slow the transmission of disease or the spread of infection. There are several recommended preventive measures to reduce transmission. The public contact; avoiding crowded public places; avoid unnecessary travel; avoiding shaking hands when greeting others; frequent hand washing; wearing a mask when outdoors; case detection; contact tracing; lockdown either total or partial, and quarantine staying at home. Prevention of transmission to others and monitoring of clinical status with prompt hospitalization if needed.

When a new outbreak with a pandemic potential emerges, non-pharmaceutical interventions, known as "community mitigation strategies," are the most effective interventions to help slow down the community-level transmission of the virus. Community mitigation is a series of actions that people
and communities can take to help slow the spread of respiratory viral infections, including COVID-19. The following is a framework for local governments' actions to recommend at the community level to prepare for and reduce community transmission of COVID-19 in the regions. The selection and implementation of these measures must be complemented by local characteristics, mechanisms of disease transmission, demographic factors, and level of public health and capacity of health workers [1].

When this pandemic ends, this pandemic’s uncertainty requires all parties to formulate a massive and systematic long-term strategic model in the fight against this global pandemic. Several studies have been conducted in several countries related to the mitigation and prevention model of Covid-19 transmission. They still use common pharmaceutical and non-pharmaceutical approaches, such as using drugs, using masks, washing hands, using disinfectants on objects that are touched, quarantine, lockdown, social distancing, physical distancing. We have not found any research that explicitly offers a mitigation model or prevention strategy using a local wisdom approach based on rural communities' lives. This then became the background for this study, where our study is more specific on mitigation or prevention strategies based on the local wisdom of village communities. The strategic model generated from this research will be recommended to all villages in Pohuwato Regency in particular, as an effort to prevent local-based transmission of Covid-19 and to organize the lives of rural communities so that they can survive and be resilient against Covid-19.

The mitigation scenario that resulted from this study is Tangguh Covid-19 Village. This mitigation scenario will later be implemented in several villages in Pohuwato Regency. The village of Tangguh Covid-19 will be a new mitigation scenario, where prevention efforts use the village community's local wisdom approach. The local wisdom approach is carried out because all community activities in cultural spaces are still robust kinship systems such as villages/villages full of social contact. The more frequent social contact occurs between communities, the more difficult it will be to stem the virus's spread in the community. So, there needs to be a specific mitigation scenario to regulate activities in these cultural spaces. In this context, the Tangguh Covid-19 Village offered from this study can be used as a bulwark against and breaking the chain of the spread of Covid-19 in the village/village community (kambungu) in Pohuwato Regency, Gorontalo Province.

On the other hand, general mitigation and prevention strategies currently applied in several countries will be a highly recommended supporter in the implementation of the Covid-19 Tangguh Village. Of course, in its application in the community, it is necessary to involve village organizations' institutional role. The involvement of village organizations in implementing the Covid-19 Tangguh Village is a manifestation of all elements' social responsibility, be it the village government, local institutions, and the village community.

‘Kambungu’ in the context of the Gorontalo community is 'territorial' with the people's social order that is still a robust kinship system. The social interactions of the people are still strong. In communities like this, it is tough to avoid social contact and comply with health protocols such as social distancing, physical distancing, and other protocols. These health protocols are considered to conflict with local wisdom that has been practiced for years. An extraordinary mitigation approach is needed, which is different from the general approach used to organize society in public spaces. Regulate cultural spaces like this, an extraordinary mitigation approach is needed, which is different from the general approach used to organize society in public spaces.

2. Research Methods

This study was conducted in Pohuwato Regency, Gorontalo Province. The study location was chosen due to several considerations: first, Pohuwato Regency is an area inhabited by a pluralistic society, both ethnic and religious. Gorontalo ethnic is the local ethnicity in this area. Amid ethnic and
religions, the people of Pohuwato Regency live in harmony, where social interactions and contacts between the people are still quite strong. Second, the people in the rural areas of Pohuwato Regency still have a powerful kinship system. The robust kinship system in Pohuwato Regency people envy makes all activities in various sectors full of social contacts, making it difficult to comply with health protocols. In this context, the selection of locations in Pohuwato Regency departs from these considerations.

This article uses a descriptive method. The descriptive method is used to describe the state or condition of the village community's social life in depth. According to some experts, the descriptive method examines group people, an object, a set of conditions, a system of thought, or a class of events in the present. This descriptive research aims to systematically make descriptions, descriptions, or paintings factual and accurate regarding the facts, properties, and relationships between the phenomena investigated [25]. Furthermore, the descriptive method is also fact-finding with proper interpretation [26].

The data in this article are sourced from primary data and secondary data. Primary data is data obtained from field observations. Meanwhile, secondary data comes from literature studies (national and international journals that discuss Covid-19, books, and reports on the results of studies on Covid-19 by the Covid-19 Task Force and the Covid-19 Crisis Center, Gorontalo State University). Also, to add information regarding Covid-19 nationally and locally, news sources are also used in online and print media.

3. Results and Discussion

3.1 Covid-19 Tangguh Village Communication Strategy

The influence of the Covid-19 pandemic that has hit various countries in the world also impacts the lives of Indonesian people. The impact is not only on health but also on economic, social, political, cultural, and including aspects of communication. The most significant danger is when information about the Covid-19 pandemic is distorted, deviates, or even becomes a lie from a communication aspect. This is what worries WHO that they are working not only to fight the pandemic but also to fight infodemics. The imbalance in the spread of false information about Covid-19 compared to the spread of the Covid-19 virus itself can cause anxiety, panic, threaten physical safety, and to some extent cause racism and hatred to certain groups [27].

A chilling example of an infodemic's effect is the spread of Covid-19 news by e-mail in Ukraine. The core of the message stated that there were five Ukrainians infected with Covid-19. The spread of this news sparked protests and sparked violence accompanied by vandalism until it finally subsided after the health authorities and Ukrainian President Volodymyr Zelensky declared the news to be a hoax [28]. The communication aspect has a vital role in handling the Covid-19 pandemic. The functions of communication are social communication or implicitly; this function is closely related to cultural communication. The reciprocal relationship between communication and culture inspired Edward T. Hall and defined "culture is communication" and "communication is culture" [29].

The village is the minor organization in Indonesia's government system that can regulate and manage government affairs and local communities' interests [30]. Based on the village's authority, communication is not limited to organizational communication but also includes interpersonal communication and mass communication. The flow of information about Covid-19 will determine the form of communication. For example, the flow of information on the handling of Covid-19, which is hierarchical, is starting from the central government, local governments (provincial and district/city levels), sub-district governments, and village governments. At this level, information tends to be a policy that needs to be implemented by each level, communication at this level is formal. It is different
when the flow of information is aimed at the community; the communication can be formal or informal. At this level, the position of village government organizations has an important role.

The Public communication of government officials who were counterproductive in the early days of the spread of the Coronavirus in Wuhan, Hubei Province, China, in early 2020 caused the government's communication to be less effective.

O. Hasbiansah [31] stated that the government's public communications regarding the Covid-19 disaster were defensive, underestimating problems, making problems/disasters a joke, and issuing confusing policies. The messages are counterproductive; for example, "masks are only for sick people, Corona will not stand in tropical areas where the temperature is hot, make peace with Corona, not allowed to go home, go home is allowed." This fact leads to public doubts about the dangers of Covid-19. As a result, people become complacent, not alert,

Not to mention the addition of the emergence of foreign terms related to Covid-19, such as "social distancing, physical distancing, herd immunity, local transmission, imported case, suspect, droplet, scanning, flattening the curve or new normal." The academic community can understand this term, but most people live in villages and have diverse cultural, ethnic, and educational characteristics. In response to this, Mario Nurkamiden explained that the use of foreign languages impacts the effectiveness of communication. Language can be spoken by the speaker and must be able to be understood by the listener. Communicative language is reciprocal, not confusing. When the Covid-19 message is responded to, language is not enough to include linguistic elements and must include the socio-historical aspects of society. Nurkamiden gave an example, the term "social distancing," which has been translated into Indonesian into "social distancing," should be translated into regional languages such as "wawalahe" in the Gorontalo language [32]. Thus, there is a cultural approach to using language that is easily understood by the community and can bind them to a socio-historical collectivity regarding daily social activities that tend to gather.

Moreover, the people of Gorontalo have strong kinship relations known as “ngala’a” (bath family) and “ungala’a” (extended family). Related to this kinship relationship will be explained further in the following section. The term "social distancing," which has been translated into Indonesian into "social distancing," should be translated into regional languages such as "wawalahe" in the Gorontalo language [32]. Thus, there is a cultural approach to using language that is easily understood by the community and can bind them to a socio-historical collectivity regarding daily social activities that tend to gather. Moreover, the people of Gorontalo have strong kinship relations known as “ngala’a” (bath family) and “ungala’a” (extended family). Related to this kinship relationship will be explained further in the following section. The term "social distancing," which has been translated into Indonesian into "social distancing" should be translated into regional languages such as "wawalahe" in the Gorontalo language [32]. Thus, there is a cultural approach to using language that is easily understood by the community and can bind them to a socio-historical collectivity regarding daily social activities that tend to gather. Moreover, the people of Gorontalo have strong kinship relations known as “ngala’a” (bath family) and “ungala’a” (extended family). Related to this kinship relationship will be explained further in the following section. There is a cultural approach to using language that is easily understood by the community and can bind them to a socio-historical collectivity regarding daily social activities that tend to gather. Moreover, the people of Gorontalo have robust kinship ties known as “ngala’a” (bath family) and “ungala’a” (extended family). Related to this kinship relationship will be explained further in the following section. There is a cultural approach to using language that is easily understood by the community and can bind them to a socio-historical collectivity regarding daily social activities that tend to gather. Moreover, the people of Gorontalo have robust kinship relations known as "ngala’a"
(batih family) and "u'ngala'a" (extended family). Related to this kinship relationship will be explained further in the following section.

The uncertainty from the end of the Covid-19 pandemic has prompted the government to issue—regulations related to handling Covid-19 from a health economic perspective in the form of laws. The communication strategy implemented for the resilience of Covid-19 Village in Pohuwato Regency adapts the Covid-19 case is reporting coordination flow model contained in [33] regarding Guidelines for the Prevention and Control of Corona Virus Disease (Covid-19). In this model, three government organizations are responsible for reporting and controlling Covid-19 cases in each region. The three organizations include the Health Office, the Community Health Center (Puskesmas), and the Village/Hamlet Task Force (Task Force).

In this context, it is necessary to transform government communication in the current pandemic era into public sector risk communication oriented towards public involvement [34]. In building public involvement, it can be started from the smallest community scope, namely the village. Here the role of the Covid-19 Task Force in the village is very strategic. They can be the key in preventing and controlling Covid-19 in an area, especially in Pohuwato Regency, which has various community characteristics. The data shows from an education perspective that primary school graduates (39.3%) are higher than other education levels. The status of being a housewife is the dominant occupation of the community. While the level of public knowledge about Covid-19 is relatively high (54.8%) obtained through mass media (55.4%),

Even though the data above describes a reasonably good condition, implementing a communication strategy based on public involvement in the village will further optimize the prevention and control of Covid-19. The communication strategy for the harsh Covid-19 village that was built refers to national regulations and solutions to communication problems during the handling of the pandemic in Indonesia. As shown in Figure 1, the communication model applied includes organizational communication (up and down), direct communication by individuals or social actors, and mediated or indirect communication utilizing mass media with various media.

Organizational communication cannot be denied because the Covid-19 prevention and control system in Indonesia is carried out in stages. Up and down communication shows the direction the information flows. Upward and downward communication based on the organizational structure, the flow of information moves formally from a person or government institution with higher authority to other people or institutions with lower authority, and vice versa [35]. At this level, the message content is formally related to government regulations and policies in dealing with Covid-19. Especially at the

Figure 1. Covid-19 Reliance Village Communication Strategy
village level, the Covid-19 Task Force plays an important role. The village Covid-19 Task Force can apply two forms of communication: direct communication and mediated or indirect communication.

The communication involves village officials, health educators, traditional leaders, religious leaders, and community leaders. These actors are individuals who have a strategic role in social interaction. They become messengers (about Covid-19) personally, and the delivery pattern more informal. The network of relationships and mutual trust between actors and their communities can optimize village organizations’ institutional role in organizing community behavior related to Covid-19. Adjustment and influence on people's behavior encourage the formation of social norms related to the prevention and control of Covid-19. In the end, a village community social system was built that was ready and resilient to face the Covid-19 pandemic.

The use of mass media places on non-broadcast communication media. Because the central and local governments have carried out the use of television and radio broadcasting media, the medium used here uses billboards, posters, flyers, applications/websites, and social media. Each medium certainly has a different range and segmentation. However, its use aims to rebuild public awareness of the impact caused by the Coronavirus and to cause someone to become infected with Covid-19. The communication medium used in the village is classified as more varied than that used in the Puskesmas and the Health Office. This is because social interaction in the village is relatively high compared to social interaction at the Puskesmas and the Health Office.

In terms of content, each medium has different information. Its main goal is to build public knowledge and awareness. Information that is important to know includes information about the Corona and Covid-19 viruses, health protocols, and reporting procedures for people Covid-19 indicates. Specifically, the information conveyed through billboards, posters and flyers use regional languages other than Indonesian. This is due to the difficulty of the community in understanding messages related to Covid-19. Moreover, terms used in foreign languages (English) or terms have only emerged since the Covid-19 pandemic hit Indonesia. For example, social distancing, physical distancing, isolation, PSBB (Large-Scale Social Restrictions), ODP (People Under Supervision), PDP (Patients Under Supervision),

Deddy Mulyana mentioned the research results by Hywel Coleman (2020), which found that the respondents he interviewed had not heard some of the terms mentioned or had heard of them but did not understand their meaning [35]. According to Acep Iwan Saidi, the terms isolation, ODP, and PDP sound creepy because previously, these terms had negative connotations and were related to crime [37]. Although Mulyana and Saidi see the problem from different perspectives, their goals are almost the same. The keyword is how the public quickly understands the message about Covid-19. More specifically, Mulyana suggested that one of the communication strategies is to use regional languages to communicate effectively, as Coleman found in Cameroon, Central Africa, on a health campaign against the cholera epidemic. In the context of the village in Pohuwato Regency, the regional language used is adjusted to the ethnicity that inhabits the area, including ethnic Gorontalo, Bajo, Balinese, Javanese, Kaili, Sangir.

3.2 Analysis

Socio-Cultural

Pohuwato Regency is an area that has a pluralistic society. Based on data cited from Pohuwato Regency in Figures in 2020, the population of adheres to Islam by 95.27%, Protestant by 3.69%, Catholic by 0.14%, Hindu by 0.89%, and Buddhist by 0.01%. Pohuwato Regency has 257 mosques, 100 prayer rooms, 42 Protestant churches, 6 Catholic churches, and 14 temples [38] for places of worship. Apart from religious plurality, the people of Pohuwato Regency are also a multi-ethnic
society. Data (Podes 2011) identifies several major ethnic groups in Pohuwato Regency, including Bajo, Bali, Gorontalo, Java (East Java and Central Java), Kaili, Sangir, Tomini. Meanwhile, the Bugis, Balinese, DKI, Sundanese, NTB, Minahasa, Chinese, Arabic, and several other ethnic groups constitute minority ethnic groups.

The data above illustrates that Pohuwato Regency has a diverse community composition. The plurality of people in Pohuwato Regency is the principal capital in building this regional civilization because the cooperation between communities and between actors of different identities (both ethnic and religious) can boost the progress of Pohuwato's development. Over the years, it has been proven that diversity has become part of the spirit of regional development.

History records the ideas and the struggle for forming the Pohuwato Regency were spearheaded by actors who came from different ethnic and religious backgrounds [40]. On the other hand, if we refer to the reality of a pluralistic society in several regions in Indonesia (such as in Ambon, Poso, Kalimantan, Papua, and other areas), we will find that Indonesia has a dark history that is often labeled with ethnic and religious conflicts. This conflict was triggered by several things, including politics, economy, society, and culture. The pluralism of Indonesian society, which should have been the principal capital in building this nation, was even damaged by divisions that led to social conflicts, which resulted in many casualties [41-47].

In this context, it cannot be denied that political, economic, social, and cultural problems trigger social conflicts in a pluralistic society. It is different from the reality of the plural society of Pohuwato Regency, where since the arrival of transmigrants, there has been no social conflict, as has happened in several regions in Indonesia [48]. The Pohuwato is a miniature of Indonesia, with its strong social relationships and interactions.

This small town is the center for meeting ethnic and religious groups in various daily activities. The Pohuwato people have practiced a pluralistic life in moderate, tolerant, and respectful ways. The harmony of the pluralistic community life is the main asset in building mutual awareness to protect and respect differences. Currently, society’s social harmonization is being tested. The test is not conflict but a global pandemic that requires all communities not to carry out activities that involve many people so that social contact does not occur. All activities in a pluralistic society in the rural areas require many people because the kinship system in the community is still robust, both among ethnic groups and different ethnicities. The recommended health protocol is very contradictory to the local wisdom of the people treated for a long time. Besides that, the plural society in Pohuwato Regency still adheres to their respective ethnic traditions, which have a solid socio-cultural dimension, one of which is activities in the agricultural sector. Gotong royong is where this activity involves many people, making it difficult to avoid social contact between communities.

For Gorontalo ethnic, the culture of cooperation is known as "huyula". Huyula is a collective activity to help the work of family members and community members in a village. For example, helping to ease the workload on agricultural land (rice fields, gardens, fields) from planting to harvesting; on activities such as building houses, building tents in the event of a death, helping with weddings work.; and jobs related to cleaning the village or village. All work is done reciprocally without expecting a reward. The Huyula tradition has been practiced from generation to generation by people in rural Gorontalo.

Several studies explain the Huyula for the people of Gorontalo is a system of mutual help (reciprocity) in a job, which is carried out jointly by community members or family members, to reduce the workload in meeting daily needs and interests based on social solidarity. For example, building houses, places of worship, cultivating agricultural land, dealing with grief events, and other jobs that require help from others. Gotong royong activities do involve not only one batih family (ngala'a) or
extended family (u'ngala'a) but also a wider group of people in this area [49-52].

Apart from Huyula's activities, several habits of people in rural Gorontalo require social interaction and contact. The activities in places that are used as centers for village community for gatherings, example at dego-dego (hangout places); beleda'a (big house) or parents' house which is the gathering point for all families both ngala'a (batih family) and u'ngala'a (extended family). At certain moments such as during Eid al-Fitr, Eid al-Adha, sorrow and prayers of spirits, and other moments. Social contact in these places is difficult to avoid.

Gotong royong activities in the Javanese community, especially the southern part of Central Java (Kebumen, Karanganyar), are referred to as "sambatan". The term sambatan comes from the word sambat, meaning "ask for help". In Geertz's study, it is explained that, in Javanese society, the term gotong royong is first seen in written form, in essays on customary law and also in essays on the social aspects of agriculture. In various regions, Javanese society has specific terms that differ from one another in referring to the term "Gotong Royong" [53]. Furthermore, in the Bugis ethnic group, cooperation can build a house (mappatettong Bola). For the Bugis ethnic group, gotong royong is a strategy in a joint lifestyle that eases each other's work burden. This cooperation is proof of the existence of harmony between people, especially in rural communities. Gotong royong is a form of social solidarity formed because of group interests to form a unity to help each other, share, and give each other [54].

In the Minahasa ethnic culture, there is something called Mapalus (cooperation). In dealing with important matters such as death with a series of mourning and consolation ceremonies, weddings, and other celebrations, as well as in carrying out various agricultural work and household and community interests, there appears to be a symptom of solidarity in the form of assisting and cooperation, mainly based on principles. reciprocity [55]. In Balinese society, the gotong royong (To help work together) system is called the Nguopin term. It includes fields of activity in rice fields (planting, weeding, harvesting), around households (repairing house roofs, house walls, digging wells), in celebration - celebrations or ceremonies held by a family, or events of accidents and deaths [56].

The diversity of terms of cooperation in the traditions of each ethnic group in rural areas has substantially the same goal, namely to help one another. Also, an implementation of Indonesia's diversity has been maintained to this day. Suppose in other areas cooperation activities are only carried out by ethnic peers. In that case, this is different from the context of the pluralistic community of Pohuwato Regency, where cooperation activities are carried out to help the work of other ethnic groups and apply to help other ethnic activities in the village. It is these inter-ethnic kinship activities that make it difficult for people to follow the recommended health protocols.

Gotong royong can only be found in rural communities that are still robust kinship systems. However, on the other hand, during a pandemic time, cooperation can facilitate the transmission of Covid-19 in the community. The activity requires many people's involvement, so it is full of physical contact. In the health protocol, physical contact is strictly prohibited because the virus will spread more quickly through physical contact. In a community with a high community spirit, the obstacles are felt when faced with several interventions such as social distancing and physical distancing. They are contrary to the daily behavior of rural communities. In this context,

After reading and understanding the pattern of the spread of the Covid-19 pandemic, this study found that the spread of Covid-19 was extreme in community spaces where interaction and kinship systems were very thick, compared to administrative and private spaces, where community interactions are broken. In this context, mitigation scenarios must be formulated using several socio-cultural based approaches (Figure 2.), including:

1. Actor Approach
The approach of actors or figures as a strategy is critical because, in Gorontalo ethnic culture, the term "lo ‘iyalo ta’uwa, ta’uwalo lo’iya” (the character’s words must be followed) is important to provide understanding to the community. At the systematic sub level, the character is a person and has a "value," which becomes the cohesion of the ngala’a. Characters must be "moodelo" (can carry exemplary values in carrying out their roles).

Figure 2. Covid-19 Mitigation Scenarios with a Socio-Cultural Approach

The actor's approach referred to in this article is the involvement of influential figures in the community in implementing the Covid-19 Tangguh Village in several villages in the Pohuwato Regency. These figures are community leaders, religious leaders, traditional leaders based on religion, ethnicity, and age. Ethnic and religious approaches are carried out because Pohuwato Regency's people are very diverse, so it is essential to involve figures from each ethnicity and religion. The policies taken in managing the lives of the people in the Pohuwato Regency cover a plural society's socio-cultural basis. Furthermore, for the age base, the characters are at the age of 45 years and over. Especially for the people of Gorontalo, the approach of local figures such as "Imamu" (Imam Masjid), "ti Guru" (Guru), "Sara'a Da'a and Baa'te" (customary leaders) who have an average age of 45 years and over are highly respected and listened to. In this context, the figures referred to in this article must be included in any preparation of community-based socio-cultural strategies that will be implemented through the Covid-19 resilience Village.

2. Space Approach

Currently, intervention models such as PSBB, social distancing, physical distancing, and other interventions only regulate interactions in the public sphere. However, they do not regulate interactions in rural or village community spaces (kambungu-kambungu). The Spaces cannot be regulated using standard protocols (keep your distance, wash your hands, wear a mask). Without having local actors or figures provide an understanding of the importance of preventing the spread of Covid-19 because these protocols can be considered unethical and incompatible with limited literacy about Covid-19 in people's culture. The Health Protocol must be regulated based on the socio-cultural space of the community. The approach to dealing with a pandemic must be changed.

3. Literacy Approach (Language and Communication Patterns)
The literacy approach includes several essential things that are more specific, including:

a) Psycholinguistics.

The level of public understanding of the PSBB regulations and information related to Covid-19 cannot be clearly explained in words, sentences, even derivative discourse. What must be done is the involvement of influential actors in society who come from various identity backgrounds, define the PSBB regulations, and implement the pandemic’s handling.

b) Sociolinguistics.

The lack of public understanding of the rules and information related to Covid-19 has led to a lack of community participation, especially in young rural communities, in preventing the transmission of Covid-19 because they cannot transfer the meaning of the rules contained in the PSBB into their respective languages. Respectively. What must be done is to re-invite communities from various ethnic backgrounds in Pohuwato Regency to socialize the forms of regulations following their respective fields and languages. It is also important to disseminate information through social media by involving influencers in all fields in disseminating these rules.

Social media has many benefits, including as a tool for tracking public health related to Covid-19. Also, several researchers have used social media as an instrument to track and predict the spread of the Covid-19 outbreak. With so much publicly available information on various diseases and other public health issues, there is great potential to use social media as a source of data mining for pandemic response developments. Social media can even be used to track public opinion, for example, regarding the use of disinfectants and other efforts to prevent and handle Covid-19 [57].

c) Morphosemantic

The PSBB rule reviewed all types of studies (from law to epidemiology) linguistically regarding sentences conveyed to the public. The adverse effects such as those psycholinguistically and sociolinguistically above will not happen. Moreover, when translating the rules described in the community, it is appropriate to involve linguists from each ethnicity to translate them into rules that touch Local Wisdom. The meaning of the rules compiled can be understood by the community at the village community level.

d) Interaction Approach (Ritual)

The interaction model approach can be through rituals that develop in society, starting from the process of birth, marriage, to death. Especially for the people of Gorontalo, the birth process usually begins with a molondalo ritual (seven months), then a motutu (giving birth), then mopolihu lo limu (lemon bath for girls), and many other traditions. In this case, it is essential to contextualize health protocols in rituals, but traditional leaders communicate it by considering the community's local wisdom. All activities in the birth process can contact each other because many people attend the ritual.

Likewise, the wedding rituals in Gorontalo society such as tolobalango (peminangan), dutu (traditional marriage property), akaji (marriage)), and several other wedding rituals also require the involvement of many people in each process. In death, too, starting from molobungo (funeral) and spirit prayers for a week, then the 20th, 40th, 100th, and 1000th days must be carried out using hitam belanga (sitting cross-legged and close together) and eating together. By hand. This activity needs to be communicated by religious leaders (imamu). These activities can be regulated following existing traditions in a community and still follow mutually agreed rules regarding preventing Covid-19 transmission.

The above confirms that local actors from various ethnic backgrounds, such as priests or religious leaders, traditional leaders, traditional birth attendants, and other local figures, must be involved in
preparing the Covid-19 protocol in the rituals of birth, marriage, or death. Likewise, non-ritual interactions, which are the daily activities of rural communities such as those often carried out in dego-dego (sitting for relaxing), stalls, workshops, and community gathering points, must be parsed and given a clearer understanding of Covid-19. This is because these places are the centers for village residents to discuss matters related to their respective lives. These places are the favorite hangouts of the villagers while taking a break from their daily activities. In this context,

3.3 Public Health Perspectives

Until now, a suitable vaccine has not been found to prevent Covid-19 infection; the best way is to avoid contracting the virus. The prevent of Covid-19 virus infection is using a mask, covering your face with a cough tissue and sneezing with a tissue or with your elbow, washing your hands regularly with soap, or disinfection with hand sanitizers. That contains at least 60% alcohol (if soap and water are not available), avoid contact with infected people, maintain distance, reduce touching the nose, eyes, mouth, and hands that are not washed[58]. Also, the Ministry of Health issued regulations on health protocols in order to prevent transmission of Covid-19 in public places and workplaces, including forming a special Covid-19 prevention team, requiring wearing masks for both workers and visitors, regulating distances, providing handwashing facilities, arranging air circulation, installing information media in strategic locations[59].

The Covid-19 resilient village model from a health perspective developed is as follows:

Figure 3. Model of resilience Village
1. The Community Role in volunteers Data Reporting
   a. take notes; they have data such as migrants/travelers, vulnerable populations, sick residents / sick migrants, residents in quarantine/isolation, and officers/volunteers serving quarantine/isolation) Moreover, report every day to the RT/RW/Village Task Force Command Post.
   b. The Task Force Command Post in each Village coordinates with the Puskesmas then goes to the District / City Health Office/Covid-19 Handling Task Force.
   c. The task force took follow-up steps, whether taking SWAB sampling, isolation, quarantine, or making referrals according to existing conditions.

2. The role of society in Self Isolation
   a. If independent isolation is carried out (generally for patients confirmed positive without symptoms), the village task force and volunteers are responsible for monitoring compliance in carrying out independent isolation.
   b. The village and volunteers, together with the puskesmas are also responsible for monitoring the patient's condition who is doing independent isolation. If during self-isolation symptoms appear, then quarantine measures will be taken.
   c. Volunteers with the local community are responsible for playing an active role and working together to help patients who are doing independent isolation in fulfilling their basic needs during independent isolation (especially those who are unable) and continue to provide motivation and support.

   a. The Village Task Force, community Health centers, and District/City Health Office and District/City task forces are responsible for continuing to carry out public health literacy, especially about Covid-19. Literacy can be given in various forms and using various media, of course, based on each region's characteristics.
   b. The Village Task Force, Puskesmas, and District/City Health Office and establish health inspectors who are responsible for overseeing the implementation and compliance of health protocols at the institutional, community, and individual levels and reporting to the task force if there is a violation of the protocol. Health prevention of Covid-19.
   c. All institutions/institutions and communities must implement health protocols to form a task force in their respective environment.
   d. If there is no compliance with health protocols, then public health literacy will be increased again in that place.

Efforts to control the Covid-19 pandemic can be made by slowing down and stopping the transmission/transmission rate, providing optimal health services for patients, and minimizing its impact on the health system, social services, economy, and other sectors. [60]. Each region is asked to play an active role in responding and preparing several scenarios to respond to the pandemic, one of which is the issuance of a policy from the Ministry of Villages, Regional Development. Transmigration to form a Covid-19 response village.[61]. The model above is a model developed to prevent Covid 19 control based on strengthening resilient villages.

The resilient village model developed requires public places and facilities, communities, and individuals to implement established Covid-19 preventive health protocols. The transmission of the Covid-19 virus follows people's movement so that every place has a risk of transmission, where people do activities and interact directly or indirectly. Preventive efforts in public places by place managers can be carried out through administrative control and environmental control[62]. Environmental
control aims to ensure infrastructure such as handwashing stations, temperature checkpoints, availability of hand sanitizers. Environmental control aims to reduce the spread of pathogens and contamination of surfaces and inanimate objects. Regulating the number of people in public places is also a scenario to reduce the risk of Covid-19 transmission[63].

Each public place, community, and individual in the family is advised to form a team or task force to oversee and administer health protocols. The research results show that adherence is one of the factors that accelerate disease control[64]. Other studies have shown that non-compliance with social distancing policies is one factor that hinders the prevention and control of Covid-19[65]. In the resilient village model developed, every implementation of health protocols in public places, in communities, families, and individuals is supervised by the Health Protocol Monitoring Team. The supervisory team can become part of the district/city task force or be independent, consisting of health officers and law enforcers. The supervisory team is tasked with monitoring, assessing, and periodically evaluating the implementation of the Covid-19 preventive health protocol in public places, communities and families, and individuals. The research results show that having a supervisor will affect compliance[66]. For public places, communities, families/individuals who have not complied with implementing the Covid-19 preventive health protocol, they will be given public health literacy again.

This model demands the community's active role in preventing the spread of the Covid-19 pandemic, especially in supporting government policies to control people's movement and is considered more effective in preventing transmission of the virus. [67]. Community and community involvement such as wearing masks in public places and every community has been proven to contribute to Covid-19 control by reducing the number of infected saliva emissions and respiratory droplets from individuals with Covid-19.[68]. Other community involvement can be done by becoming village volunteers and establishing posts at each village border. Volunteers can record data related to migrants / travelers, vulnerable populations, sick residents / sick migrants, residents in quarantine / isolation and officers / volunteers serving quarantine/isolation)[60]. The community's role can also be protecting the groups most vulnerable to infection[69]. Daily volunteers coordinate with the task force and the local Puskesmas to support the Covid-19 surveillance system.

Community involvement can also be in the form of supervision of travelers or positive patients who carry out independent isolation. Self-isolation is a home care activity for positive confirmed patients, which is medically possible to carry out independent isolation. Generally, those who carry out independent isolation are travel patients, close contacts, or positive patients who experience mild symptoms. The patient's residence location is also a consideration, for example, isolated areas and health facilities' ability to accommodate patients[60]. Some risk groups or people living in the same house as the risk group is not encouraged to carry out independent isolation. The risk group in question is people who are elderly and have comorbidities such as hypertension, coronary heart disease, type 2 diabetes, and asthma.[70]. Self-quarantine can be carried out in one's own house, family house, or in a particular place prepared by the village government.

Although during independent isolation, patients are required to be proactive in communicating with health workers [60]. However, volunteers and the community, especially in monitoring the patient's health situation every day. Suppose a patient who is self-isolating experiences health problems, or his symptoms worsen. In that case, the volunteer reports to the health officer or the village task force for further quarantine at the health facility. The community must work together to help provide basic needs, especially food logistics, for positive patients as a social responsibility. During self-quarantine, patients cannot carry out activities to meet their daily needs. Gotong royong prioritizes positive values such as helping each other affected by disaster and providing the enthusiasm and moral
support needed for others in trouble[71].

4. Conclusions

This article concludes that, with society's social order, the kinship system, and its social interactions think enough, it will be difficult to avoid social contact between communities. The more frequent social contact occurs, the more the spread of Covid-19 will be difficult to contain because the virus spreads more quickly through society's social fabric, which is still strong in a kinship system. The local wisdom-based mitigation scenario for the resilience Covid-19 Village recommended in this article is a new approach in controlling the spread of Covid-19 in rural communities that are still robust kinship systems. To become a Covid-19 resilience Village, an institutional role for village organizations is needed to implement mitigation scenarios based on local wisdom to prevent and control pandemics in rural communities.

References


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