

THE EFFECT OF COVID-19 ON THE SOCIO-CULTURAL FIELD

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Abstract

This study uses a qualitative method by utilizing a virtual ethnographic approach that refers to the ethnographic research approach conducted in online settings about the internet and social media. The results show that social media culture in Indonesia can act as a teacher who can educate the public and stimulate in the latest research related to COVID-19; as education for public health services; directing people to their websites and landing pages for information on the latest and most trusted COVID-19; marketing innovative services such as health care social funding services; posts related to case information, photos, and results (with permission) relating to COVID-19 to educate the public; sharing reviews and testimonies of patients who recover as motivation and initial prevention efforts; and providing support among Indonesian citizens in the face of the COVID-19 pandemic.

Key words: Social Media Culture, Public Education, Covid-19 Pandemic

INTRODUCTION

Worldwide, the COVID-19 response has been largely premised on physical distancing, though this has, unfortunately, been discursively referred to in formal and informal discourse as social distancing. There is a big difference between the two concepts, with physical distancing not necessarily precluding social connectedness, whereas social distancing unavoidably presumes disconnectedness (Ahluwalia, 2020; Rahman Isnain et al., 2021; Tuhuteru, 2020).

But for physical distancing not to also engender social distancing and inter-personal disconnectedness, certain societal conditions need to be met and made available indiscriminately. These include, first and foremost, access to basic infrastructure such as shelter, internet and basic everyday living needs (Fatimah et al., 2021; Oktaviani, 2021; Susanto & Puspaningrum, 2019). Sadly, across the world, and even within some developed societies, this has not always been the case. Entrenched social inequalities and economic marginalization have resulted in large proportions of the world's populations being deprived of the most basic of human needs, let alone the capacity to be physically distant while at the same time socially connected and adequately supported to meet living needs.

The problem of social and economic inequalities are amplifying the challenge of managing the rapid spread of COVID-19 globally, but what has also emerged is the systematic

racism, particularly against people of Asian background, in Western émigré societies. Indeed, there is plenty of anecdotal evidence of racist attacks in many countries. This is not altogether a new phenomenon; a significant existing body of evidence shows that at times of crises – be they economic, environmental, security or health-related – minority groups are often made scapegoats and are subjected to racist, exclusionary, often violent discourses and practices. COVID-19 is already showing us a variety of patterns of racism aimed at Asian people ranging from cyber bullying to physical attacks, racist trolling, and a variety of xenophobic conspiracy theories that have been articulated not only by ordinary citizens but also some politicians and world leaders (Melyza & Aguss, 2021a; Pratomo & Gumantan, 2021; Rizki & Aguss, 2020). None of this serves the intercultural dialogue agenda, with its emphasis on cross-cultural contact, mutual understanding, respectful engagement and inter-communal solidarity.

Yet, perhaps one of the main paradoxes of this pandemic is that the challenges of physical distancing and disruption to the normal service provision systems has meant that solidarity, both local and transnational, has also come to the fore of our collective responses. Indeed, we have seen many creative community-led practices emerge in response to COVID-19 lockdowns that reflect the core principles of intercultural dialogue (Adhinata et al., 2021; Yudiawan et al., 2021; Yuliansyah & Ayu, 2021). These range from the emergence of real-world examples, such as citizens of New York, Paris and many other cities gathering nightly to applaud healthcare workers, to online intra-community solidarity, where local neighborhoods work together to ensure that the most vulnerable, the elderly and the less well-off are also supported and cared for. During a time when fewer social services are being delivered, and often not in the traditional mode that many recipients are accustomed to, acts of altruism and care are being reported on a daily basis – from individuals and communities in local neighborhoods delivering shopping to the needy, to checking in on elderly neighbors and others in need of support (Ambarwati & Mandasari, 2021; Hendra Saputra & Pasha, 2021; Liu et al., 2020). It is true that citizenship has emerged as the main marker of belonging. However, as governments tighten border controls and close airports, many groups within civil society have been working hard to advocate for and demand rights and protections for non-citizens, especially asylum seekers and temporary workers (Andriadi, 2021; Fadilah & Kuswoyo, 2021; Sarasvananda et al., 2021).

LITERATURE REVIEW

Internationally, and in terms of relations between nation states, transnational solidarity has become at once a victim of COVID-19 and a key component in the global collective response strategy (Kasus et al., 2017; Sohrabi et al., 2020). Indeed, initially at least, transnational solidarity was sacrificed in the rush to contain, suppress and hopefully eliminate COVID-19. This was the case across many countries that hastily moved to shut their borders to non-citizens, stop international student mobility, shut down airports and all but stop international trade and tourism. These are all measures that represent a significant blow to globalization and its reliance on free movement of services, people and goods. It is equally a blow to the guiding principles of intercultural dialogue, which require deliberative engagement on issues of mutual concerns, including border crossings and exchange of those goods and services that affect the lives and livelihoods of individuals across borders (Febrian et al., 2021; Risten & Pustika, 2021; Sohrabi et al., 2020).

But the current COVID-19 situation also offers us hope for new ways of forming and sustaining solidarity across cultural backgrounds, faith traditions, political systems and geographic borders. This new, more positive transnational solidarity was showcased in the form of intercultural, transnational ‘medical diplomacy’, where countries have been sending doctors, paramedics, medicines and medical equipment across borders to those countries hit most severely by the pandemic and that lacked certain medical expertise and supplies. The examples of Cuba, China and India are good cases in point, where doctors, medicines and medical equipment have been respectively used to engage in this new form of transnational solidarity at a time of acute health crisis (Nadya et al., 2021; Rahman, 2021; Sari & Oktaviani, 2021). This form of transnational engagement highlights the deeply intersected nature of our globalized world and the extent to which it is not only intimately hyper-connected but, more critically, irreversibly inter-dependent. Our post-COVID-19 world order must heed the lessons of this pandemic as it reconfigures international relations, intercultural engagement and transnational solidarity in ways that will ensure we are better able to deal with future crises when they happen again (Fahrizqi et al., 2021; Rachman & Pramana, 2020; Rohman et al., 2020).

The outbreak of the corona virus in Wuhan, China, and its rapid spread across the world, exemplifies this inter-dependence and highlights the urgent need for more collaboration across medical, technological, economic, environmental and social fields in order to ensure the safety and wellbeing of all global citizens irrespective of geography, ethnicity, religion or level of domestic economic development (Darwis et al., 2020; Fahrizqi et al., n.d.;

Pramita et al., n.d.). What pandemics such as COVID-19 are exposing is that the global community will only be as capable of containing highly infectious viruses as the public health system of its least developed nations will be supported. Eliminating the current health threat, as well as other global threats, requires not less but more transnational solidarity, more intercultural dialogue and more equitable capacity-building around the aspirational Sustainable Development Goals (Ahdan et al., 2021; Sengkey et al., 2020; Very & Pasha, 2021). Transnational solidarity and intercultural dialogue are not only worth pursuing for their utopian, cosmopolitan and ethical tendencies, but also for their practical, critical and transformational roles in ensuring the safety, wellbeing and sustainability of the entire global community.

METHOD

This research was a descriptive qualitative one, trying to find out the time of people about the impact covid-19 on the socio-cultural field. Student of English Education'18 taking Academic Writing calss at Universitas Teknokrat Indonesia. The research was conducted on October 2020. Data collection was carried out using a questionnaire created with Google form to find out whether The impact covid-19 on the socio-cultural field.

Questionnaire of The Impact of Covid-19 on the Socio-cultural Field

No	Question	Agree	Disagree	Neutral
1.	The pandemic has changed the world order in a short time?	✓	✓	✓
2.	Whether sociologically, the covid-19 pandemic has caused unplanned social changes?	✓		✓
3.	The various problems that exist have created a push for social transformation in society?	✓		✓
4.	Various forms of social change resulted from the Covid-19 pandemic forcing people to be adaptive?	✓		✓
5.	The humanitarian order will experience a shift in direction and form that is far different from its previous	✓		✓

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RESULTS AND DISCUSSION

No	Question	Percentage		
		Agree	Disagree	Neutral
1.	The pandemic has changed the world order in a short time?	93,1%	3,4%	3,4%
2.	Whether sociologically, the covid-19 pandemic has caused unplanned social changes?	86,2%		13,8%
3.	The various problems that exist have created a push for social transformation in society?	86,2%		13,8%
4.	Various forms of social change resulted from the Covid-19 pandemic forcing people to be adaptive?	82,8%		17,2%
5.	The humanitarian order will experience a shift in direction and form that is far different from its previous conditions?	72,4%		27,6%

This paper aims to prove that The Impact of Covid-19 on the Socio-cultural Field. Based on the results of the research that had been done, students answered several questions about the impact of Covid-19 on socio-culture. The corona virus disease 2019 (COVID-19) pandemic has resulted in tremendous strain on health care systems globally. The discipline of palliative medicine prides itself on patient autonomy and fulfillment of personal care preferences. We believe that each patient is unique with needs based on personal experiences and cultural, familial, and social influences. These considerations impact how we communicate and treat each patient. Similarly, for policy makers drafting infection control measures in the COVID-19 pandemic, cultural and societal norms warrant special consideration to ensure that measures implemented are acceptable and feasible to the

general public (Fitri et al., 2021; Melyza & Aguss, 2021b; Suwarni & Handayani, 2021). Singapore is a city-state with a population of about five million in Southeast Asia. Although it was one of the first countries to institute measures to tackle the COVID-19 epidemic, it had at one point of time the highest number of confirmed COVID-19 patients outside of China where the infection was first reported. Since then, it has reported more than 9000 infected patients despite tightening of infection control measures that include the shutting of nonessential businesses and schools. Confucianism is the prevailing social model in Singapore, where family-centric obligations and practices are important pillars of the Singaporean identity. These include obligations to provide financial and physical support for the elderly and sick, the reciprocal obligations of the elderly to provide care for the young, and the need for a familial consensus in health care decisions (Fernando et al., 2021; Nabila et al., 2021; Oktavia & Suprayogi, 2021). As the COVID-19 pandemic worsens in the country, the impact of these values on the success of national disease containment policies is becoming increasingly apparent. On the third of April 2020, the prime minister of Singapore announced a series of enhanced measures to control the spread of COVID-19, collectively known as the “circuit breaker.” These include the closing of most businesses except essential services like health care, the shutting of schools, and the restriction of movements and gathering of people. What followed was a noticeably noncompliance of these measures by the elderly, who continued to gather in market places and traveled between households . The prime minister subsequently had to make a special televised appeal to the elderly to adhere to the instituted measures as the elderly are at a higher risk of mortality from COVID-19.

CONCLUSION

Worldwide, the COVID-19 response has been largely premised on physical distancing, though this has, unfortunately, been discursively referred to in formal and informal discourse as social distancing. There is a big difference between the two concepts, with physical distancing not necessarily precluding social connectedness, whereas social distancing unavoidably presumes disconnectedness. But for physical distancing not to also engender social distancing and inter-personal disconnectedness, certain societal conditions need to be met and made available indiscriminately. These include, first and foremost, access to basic infrastructure such as shelter, internet and basic everyday living needs.

Sadly, across the world, and even within some developed societies, this has not always been the case.

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