

# Change Behavior of Health Workers in the Digital Era

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## Abstract

In the era after the Covid-19 pandemic occurred shift style significant life specifically in utilization digital technology. Utilization digital technology does not only limited on means information and communication just but also penetrate on service health. There's that Lots type service previous health only Can given by power medical Now taken switch by digital device, start from inspection pressure blood, examination pulse pulse, even until on inspection rate sugar, cholesterol, and level sour tendon . Massive use the digital device slow gradually potential give rise to change behavior of the staff medical. If change behavior That positive so matter the show that digitalization in the sector service health walk in accordance hope, will but If changes that occur negative so that become precedent bad for digitalization world health. On the other hand, roles conventional power medical felt Still very vital, moreover again health is side important in handling life still must accompanied by power loaded human with empathy. Use digital devices on a massive scale must still under control power professional so that aspect technical can still followed by non-technical aspects. This study want to reveal change behavior that arises on power medically caused by presence digitalization. This study is study qualitative descriptive with approach bibliography. Data collection was carried out with gather material reading and regulation applicable legislation. Analysis done with use analysis evaluation impact.

**Keywords:** Digital devices, energy medical, digitalization

## 1. INTRODUCTION

Development such digital technology fast penetrate almost to all line life man including health. With help technology this, individual can with easy access information health, do consultation distance far with power medical, managing notes medical electronics, as well monitor condition health in a way independent (Firdaus et al., 2021). Nugroho et al (2023) say that utilization digital technology in service health has give significant impact in increase accessibility, efficiency, and accuracy service health. One of technology important inside service Health is telemedicine and application health for consultation distance far. There's that Lots type previous health support services need help power humans, need facilities service certain, time certain, even tariff certain, now tap done with easy, cheap, and relatively can done home alone. Take example inspection pressure blood. Until period In 2000, Indonesian society still very depend on service nurse health at the Community Health Center or House Sick for know level pressure blood . But now tall or low pressure blood can checked home alone with help tool tensimeter digital based. Likewise with need inspection condition blood. In the pre-digitalization era, information about content rate sugar blood, cholesterol, and sour tendon only possible done through taking sample for furthermore be measured in the laboratory. Results measurement that then studied and translated by a paramedic before finally submitted to si applicant. Whole Suite procedure that of course need cost and time is not short. Suite procedure the Also need deployment power big medical, especially when need test laboratory currently tall. However, the same case with blood pressure monitor, examination blood in a way simple now you can done in a way independent at home with cheap cost and more time economical. Development deep digital world world health in a way slowly truly bring color new even in period long will potential replace role man. Appear one question fundamental, if thereby is of course role man or power medical in world health Still relevant in the era of digitalization ? The answer of course just man still very needed. Although proven give more time short and more costs cheap, will but digital devices have limitations and

limitations that only can overcome with exists intervention role human, deep matter this power medical. Limitations that is attitude empathy. Empathy is variable important in health and very influenced by side just emotions can obtained from man. Because that, role man as power medical still very needed even in the digital era. Real thing need addressed is ensure that power medical can use digitalization for increase his productivity. Digital devices are a must can utilized for performance output from a power medical can more effective, efficient, and friendly environment no on the contrary existence digital devices become pretext on decreasing productivity even on finally reduce function a power medical on the other hand there is group power actual medical reject digitalization with reason that role power medical still nature absolute and no can replaced by digital devices. This group generally make issue the as reason to be able to still being in the comfort zone, that is pattern work conventional and reluctant for switch to use digital devices. Whereas digitalization in this era is a difficult inevitability for avoided. Phenomenon this is what happened base this study. The attitude of the staff medical in respond presence digitalization give rise to development in behavior of the staff medical carry out function service health. Besides that study also want to reveal challenges faced by the staff medical for still produce behavior positive in carry out tasks in the digital era.

## 2. METHODOLOGY

This study is qualitative with use approach descriptive. According to Sugiyono (2016) like quoted inside. Utami et al (2021) research qualitative is study for research a object in a way natural whereas researcher act as instrument key. Temporary descriptive is method for disclose results study in form depiction presented in a way systematic. That matter as explained Nazir (2014) in Utami et al (2021) that study descriptive aim for examine the status of humans, objects, conditions, systems thoughts, as well as current events with objective for make descriptive in a way systematic, factual, and accurate about researched facts. Sukmadinata (2011) research descriptive qualitative addressed for describe and describe existing phenomena, good nature natural nor manipulation humans, that's more notice about characteristics, qualities, relationships between activity. Data collection is carried out with interview with energy medical in two facility health, namely at the community health center meureubo and west aceh regional hospital, both is in west aceh regency. Data too taken with use studies bibliography. According to Nazir (2013: 93), study literature is technique data collection with stage studies reviewer to books, literature, notes, and existing reports relationship with problem solved. Besides that also data too collected through internet searches, articles letter news, social media, or research previous. That step aim for get data-secondary data that will become comparison between existing theory with practice in the field.

## 3. RESULTS AND DISCUSSION

### *Behavior of Medical Personnel*

According to Dictionary Large Indonesian (KBBI) response or reaction individual to stimulation or environment. Notoatmodjo (2003) explains that behavior man is all activity or activity humans, whether observed directly, or not can observed by party outside. Roesmono (2007) explains that attitude And behavior somebody influenced by intelligence emotional person alone. Gosal (2022) regularly more Specific explain behavior professional as action taken in accordance with standard competence. In context service health proposed definition by Gosal this refer on ideal behavior should be executed by every power medical. By philosophical that ideal behavior has summarized in oath Hippocrates who had held since a long time ago. Values philosophical that furthermore formulated in a way more detailed in form code ethics with adapt with character the user. So birth code ethics medicine, code ethics nurse, code ethics psychiatrist, and so on. All code ethics that in its implementation codified based on function, time, and expected output. Codification that then become reference in implementation the duties of the workforce medical. Codification that's what is known as Standard Operational Procedures (SOP). By SOP in summary is behavior recorded professional. Staff behavior medical become important for noticed Because matter the become Wrong One indicator quality source Power humans in the field health and because service health is Wrong One service public, then quality behavior power medical become Wrong One indicator quality service public. Behavior in give service health the very influenced by Skills basic must mastered by every power medical. Rahman (2006) like quoted in Roesmono (2007) states that there are 7 competencies basic must owned by every tenaga medical. Seventh competence that namely: Management self Alone; Desire for achievement; Skills connection between man; Skills serve; Skills Technical Professionalism; Skills managerial ; Have outlook think globally.

### Digitalization

Digitalization is referring term in the change process that occurs on technology from analog to technology digital. Temporary in world health digitalization is service process changes from service nature conventional to service digital based. In scheme service conventional, power medical still work with maximizing competence basics you have. Competence base own very heavy dominant for produce quality adequate service. For example just skills serve. In draft service conventional skills serve very compare straight with ability communication. The more Good ability communication so the more the service provided is also good, at least that's what was caught and responded by recipient service. Vice versa, ability poor communication will give birth to image quality bad service although actually every SOP section already fulfilled by a officer medical. In scheme service digital-based things like smooth communication and polite relatively no become center attention. Role like ask information general patient already replaceable by digital system. Likewise interactions direct with contact physique already no needed the same intense with draft service conventional. Restrictions that make digital services produce form more service cheap because free from limitation dimensions room and distance. Conception this become momentary inevitability this middle covering all type service health throughout world.

### Post-Digitalization Behavior Changes

When digitalization service health start applied in happened a long time ago change behavior of the staff medical in give service to patient. Changes that grouped according to competence basis that has been explained previously and can seen on table following :

Competence Base	Behavior
Management self Alone	Discipline personal
Desire For achievement	Ethos Work
Skills connection between man	Communication Effective
Skills serve	Empathy
Skills Technical Professionalism	Skills technical
Skills managerial	Cooperation team
Have outlook think globally	Learner

Displayed behavior by every power medical represent competence basic as it should be they mastered. In service conventional all form behavior the reflected and always become indicator evaluation each power medical the. The more tall quality competence possessed, then the more the behavior displayed is also good. Discipline private, which is form application from competence management self alone reflected from behavior power medical in arrange time and appearance himself. A power strong medical discipline himself always will capable give attractive appearance and sympathetic so that make public or patient feel comfortable at a time valued. In conception service conventional matter this very important for noticed. Ethos work as form desire for achievement owned by the officers medical indeed own awareness for chase performance. Motivation chase performance that can form achievements level more career higher, more income neither, nor appreciation from leader. More than that no seldom also ethos high work leaving from good spiritual awareness so that giving birth to immaterial motifs. Effective communication is very behavior big its influence in service health. Effective communication no only related with correct communication, but also related with good communication. Often misinformation happen because ability poor communication from power medical. Empathy is form that feature only owned by man and no possible replaced by device health digital based. Empathy sourced on emotion and matter this very important in service health as part from recovery. Sensitivity at a time expression of sympathy own great meaning in connection connection between patient with power medical. Besides become indicator quality skills serve, the also become factor the most important differentiator between man with machine so that become affirmation that service health Still very make up existence man as the culprit. Empathy is form proper behavior still owned by every power medical. Mastery material is matter next one too very important. Remember profession power medical is demanding profession skills good tennis, then ready every power medical own proportional ability. This skill also related tightly with competence sixth basis that is outlook global thinking that gives birth behavior keep going study. Second competence this very important owned by a power medical moreover in respond development knowledge very knowledgeable fast especially in the world health. Lastly, competence basic too important is ability managerial which, among other things , is reflected from behavior in cooperate. Ability technical and extensive knowledge no will produce Power high use if limited on individual just. All individual in network service health must can cooperate and produce power optimal use so service health can given in a way good. Before use digitalization especially massively in the era of the Covid-19

pandemic behavior mentioned above own different weights one each other. Difference weight the influenced Still its height intensity contact physique in a way direct And Still limited use system, application, device work digital based. Based on interview with energy medical at the Community Health Center Meureubo and at Home Sick Meulaboh Regional General, obtained weighting as following :

Competence Base	Behavior	Weight ( scale 1-10)
Management self Alone	Discipline personal	9
Desire For achievement	Ethos Work	8
Skills connection between man	Communication Effective	10
Skills serve	Empathy	10
Skills Technical Professionalism	Skills technical	10
Skills managerial	Cooperation team	9
Have outlook think globally	Learner	8

Aspect communication effective, empathetic, and Skills technical each get highest weight. This matter caused by pattern service conventional of course very emphasize on use three competence this base. The workers medical still use analog equipment for check condition patient. Use the analog device practical demand ability strong personal approach. Next is discipline personal And cooperation team. Second indicator this felt important, however its existence can helped by strong team work. In together team weakness every person can covered with excess personnel other. Emphasis on aspect this is on strong SOPs and commitment together for implement SOPs. Aspects that have lowest weight is ethos work and learner. This matter felt more low its weight caused by pattern coaching career and pattern incentives received by power medical still refers on standard staffing by part power medical felt still not enough adequate. This matter cause ethos work and behavior learner not enough so noticed. Like usually employee country on field other work, activities profession positioned only limited routine daily just. Difficult for encourage energy medical for add outlook with motivation personal. A number of power medical already feel already is at in the comfort zone and reluctant for move quadrant. After the Covid-19 pandemic forced it happen acceleration digitalization throughout line including service health, happens change behavior on part big power medical. Change a behavior this happen because exists policy restrictions social (box physical) and Also development technology especially digital ones fast. This condition create energy medical must do adjustment (adaptation) in carry out role function each. Adaptation process this is the end give birth to change behavior of the staff medical. Reviewed from side conception competence basic, every aspect actually no experience change. Change intended behavior is change on weight each aspect after happen digitalization. Change weight each aspect the can seen on table following:

Competence Base	Behavior	Weight ( scale 1-10)
Management self Alone	Discipline personal	10
Desire For achievement	Ethos Work	8
	Creativity	8
Skills connection between man	Communication Effective	9
Skills serve	Empathy	10
Skills Technical Professionalism	Skills technical	10
	IT Skills	9
Skills managerial	Cooperation team	9
Have outlook think globally	Learner	9

Based on table above is known that there are 3 indicators experienced behavior change weight post digitalization. All three is discipline personal, communication effective, and attitude learner. Of the three only communication experienced effectively decline weight, temporary aspect discipline personal and attitude learner experience enhancement weight each by 1 point. Change on three aspect indicator the can explained as following :

Aspect	Weight		Explanation
	Before	After	
Discipline Personal	9	10	Before the digitalization era supervision to aspect discipline personal power medical done manually so supervision felt no maximum. After digitalization done supervision to aspect discipline personal held use system
			direct digital basis impact on application <i>reward and punishment</i> . This is what makes it happen change behavior of the staff medical from side discipline personal improvement
Communication Effective	10	9	After digitalization done there is lots step previous procedural need contact direct between patient with power medical become replaceable by application or system. Besides that restrictions interaction social also make appearance trend new that is man more tend become quiet type while reading, watching or focused on each gadget than each other who? and talk like before digitalization specifically on moment queue service. This matter cause interest of the workforce medical for practice ability communication they become down at a time impact on behavior communication
Learner	8	9	Development technology very informative dynamic make public become very critical. This encourage energy medical for keep going follow development information so as not to wrong in convey service to public. Attitude learner this strengthened again by the very existence of gadgets help grow spirit study .

Besides change weight on third aspect behavior mentioned above, digitalization also produce behavior new from two competence base that is creativity and ability mastery technology information for mastery technology information, become inevitability because of course whole other aspects already bound with system digital based. Because that, lots of energy medical origin from generation Y and even Z during this reject for side by side with digital devices on finally must switch because all aspect behavior including measurement performance already digital based. For aspect creativity, aspect this appear because of the power medical already start used to with use technology information. Exposure diverse information this create energy medical rich with various innovation very new help they in be creative. Weight creativity also tall matter this caused by many emerging breakthrough in dimensions service public post digitalization including in service health. Besides that emerging social media platforms create energy medical competing for create creativity new and share it on social media platforms.

#### 4. CONCLUSION

Based on results discussion above so obtained conclusion study as following : (1) Digitalization proven bring impact to change behavior of the staff medical. Change behavior that based on weighting in a way general move to direction positive that is push enhancement performance; (2) Although thereby exists device and system based digitalization join in influence ability staff communication medical, though ability communication is wrong one competence basic as it should be maintained even improved the quality; (3) Digitalization capable

grow behaviours new positive for power medical like grow power creativity as well as encourage energy medical for control technology digital based. This very important specifically for increase performance in the era of openness information that makes public more critical. The suggestions put forward in research This is : (1) Government as person responsible main service public in the sector health must push and escort digitalization in the sector this is to be precise target And can accessed by all power medical from cross generation. This intended for energy medical staff on site remote and Not yet get access to digital devices and personnel medical from generation Y can still work in accordance with development technology; (2) Need there is strengthening return on aspect communication moreover culture eastern still sticky with part big Indonesian society. Need There is understanding that digitalization just device just, actually communication still is a connection emotion between fellow humans, especially again between power medical with patient; (3) Need done pattern good incentives to encourage behavior new born positive from digitalization can get proper appreciation. This matter important because will push appearance behaviours positive other to front.

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