

MAKING SENSE OF COVID-19 PANDEMIC'S SOCIAL DISTANCING AND THE EMERGENCE OF VILLAGE BASED DISEASE SURVEILLANCE IN THE KELABIT HIGHLANDS OF SARAWAK

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Abstract: The introduction of social distancing as a measure to slow the spread of disease related to COVID-19 has led to ongoing debate about its disruptive effects around the world. There is a wide variation in the response and the use of the measures to counter the pandemic. Drawing on cultural analysis, this paper aims to explicate the socio-cultural reasons for these differences. To this end, this paper throws light on a rural village in Sarawak to provide insight how local perspectives and interpretations have shaped community response to national mechanisms to curtail the spread of COVID-19 disease. This is by examining playful and colourful texts of local dialogues, narratives and anecdotes encountered via *WhatsApp* chats as the villagers negotiate to make sense of Malaysia's movement control order (MCO). It argues that as social distancing measures begun to intersect with their perceptions of home and reorient their daily activities and cultural practices, the community tap into their village narratives and shared experiences in order to reconstruct a sense of meaning and order. Out of this, they formulate a village-based disease surveillance protocols, strategies and framework. The finding affirms growing calls for greater integration of socio-cultural approaches to health care strategies.

Keywords: Movement control order, COVID-19, social distancing, Kelabit Highlands, sense-making analysis.

Introduction

The aim of this paper is twofold. One is to contribute to the ongoing debates associated with the fierce enforcement of globalised coronavirus lockdowns. These measures have been considered to be highly disruptive to society; hence they are those who questioned their efficacies. For instance, the accounts by Stith (2020), Suppawittaya, Yiemphat and Yasri (2020) and also by Marroquin, Vine and Morgan (2020). Throwing light on different scenarios, they provide an overview of effects of the lockdowns, stay home policies and social distancing behaviour on society at large. Second is to explore the claim that the effectiveness of the measures largely depends on the population willingness to adhere to them (Milne & Xie, 2020, p.1). That is, rapid changes in population behaviour, specifically how people are adjusting and responding are crucial to the success of these protective measures. As highlighted by Kwok

K., Li *et al.* (2020, p.1575): "The behaviors of the public are important for outbreak management, particularly during the early phase when no treatment or vaccination is available and nonpharmaceutical interventions are the only options. The efficacy of nonpharmaceutical interventions depends on persons' degree of engagement and compliance in precautionary behaviors, such as face-mask wearing, hand hygiene, and self-isolation."

Yet at the same time, the public may face different variations of the protective measures. A good example of this has been provided by Nyers Williams. He says, "Different countries have different minimum distances which they advise their citizens to maintain. This varies from 1m as advised by the World Health Organization (WHO), Singapore and Hong Kong, to 1.5m in Australia. The USA advises 1.8 m (the equivalent of six feet) and the UK, Ireland and New Zealand favour 2 m." He