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# Social Distancing Practices of Residents in a Philippine Region with Low Risk of COVID-19 Infection

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#### ABSTRACT

While scholars and authorities have come to extol the effectiveness of social distancing practices (SDPs) in curbing the exponential growth of coronavirus disease 2019 (COVID-19) infection, it is interesting to know how people practice them in the real situation. Thus, the overall objective of this paper is to describe the SDPs of residents in a Philippine region with a low risk of COVID-19 infection. Following the descriptive research design, it employed an online survey method and qualitative content analysis. The result showed that the residents generally follow a combination of different SDPs. They practice the recommended distance; express verbal cues to remind others; convey implied signals to motion others; select time to perform errands; choose places to perform errands; exercise metacognitive skills; greet without physical contact; prefer virtual activities; avoid touching objects; use objects of third party; utilize protective items; and stay out of the external environment. It is suggested that the multidimensional impacts of these SDPs should be further explored considering the ongoing COVID-19 crisis.

Keywords: social distancing, low risk, COVID-19, public health

#### INTRODUCTION

The COVID-19 was first reported in Wuhan, China in December 2019. On March 11, 2020, the World Health Organization declared the outbreak a pandemic rapidly spreading across six continents and more than a hundred countries. As each country employ various strategies to contain the COVID-19 crisis, on May 11, 2020, Italy, Spain, Vietnam, Thailand, Iran, and others started to ease their respective quarantine restrictions after a gradual decrease in the COVID-19 cases was observed (Shereen et al., 2020; McLeod, 2020; Secon et al., 2020).

While a vaccine is still under study, behavioral interventions are generally followed in many countries. One of these interventions is social distancing. It is said to have been effectively used in the history of different global diseases (Bell, 2004; Hatchett et al., 2007; Wardrop, 2009). Social distancing is a set of behavioral interventions aimed at slowing down the spread of a communicable disease by observing a physical distance between persons and decreasing their frequencies of physical contact (Harris et al, 2020; Johnson et al., 2020).

In the Philippines, as the country eased its quarantine measures starting May 16, the Department of Health (DOH) strongly advised the public to observe social distancing. This

behavior or measure is encouraged to control the spread of the COVID-19 in the country and slow down its "epidemic peak" (Dela Cruz, 2020). Relative to this, the House of Representatives has filed House Bill No. 6623 to guide people on how to live in a new normal environment, especially observing social distancing strategies (Mercado, 2020; Publico, 2020).

One of the political areas declared by DOH as COVID-19 low risk is the Region XII in Mindanao. It consists of General Santos City, South Cotabato, North Cotabato, Sultan Kudarat, and Sarangani (Kabiling and Geducos, 2020). It is one of the few regions placed under "modified general community quarantine" signaling the gradual resumption of economic activities in the area. The people are still highly encouraged though to practice social distancing measures.

Most recent studies (e.g. Andersen, 2020; Chudik et al., 2020; Koo et al., 2020; Milne and Xie, 2020; Ngonghala et al., 2020) extol the emerging effectiveness of social distancing in combatting COVID-19 infection. The focus of the current paper is not to provide judgment regarding social distancing as a behavioral intervention to decrease the spread of COVID-19 infection. It rather intends to describe how people observe social distancing. While general social distancing guidelines are available, it is important to put into description how people specifically practice them in the real situation. It will be

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significant for people who currently make relevant guidelines to curb COVID-19 infection.

Thus, the overall objective of this paper is to describe the SDPs of residents in a Philippine region with a low risk of COVID-19 infection.

#### **METHODS**

#### **Research Design**

This paper is a descriptive study. Gummesson (1991) stated that the purpose of a descriptive study is to describe the central characteristics of a phenomenon at a given time. This design is appropriate for the study attempting to describe the SDPs in response to the COVID-19 pandemic at a particular period.

#### **Research Sample**

This study involved a sample of 123 out of 146 contacted Filipino residents in Region XII, a region considered low risk when it comes to the number of COVID-19 cases. While such a small sample does not represent the entire population, it is deemed acceptable to demonstrate the qualitative purpose of this paper to saturate all possible SDPs observed by the residents amid the COVID-19 crisis.

These participants were purposively selected from the online connections of the researcher and based on their availability at the time of the conduct of this study. They were mostly teachers, students, and workers who isolated themselves after the massive closures. They were selected regardless of their age, gender, economic status, educational attainment, and geographical location within the region.

## **Data Collection**

The data were collected using an electronic survey method conducted through Facebook, Twitter, and Instagram from May 25 to May 30, 2020. An electronic survey is designed to support numerous online sites, provide prospects for saving effort in long surveys, and gather both quantitative and qualitative information (Andrews et al., 2003).

The online survey in this study was done by first, asking the consent of the target participants. Upon receiving their consent, a questionnaire was sent to their respective online inboxes. The questionnaire focused on how the participants observe SDPs. The participants mostly returned the questionnaire to the researcher on the same social media site it was sent.

#### **Data Analysis**

The gathered data were treated using content analysis. Content analysis is the thorough inspection of documents generated across an extensive assembly of practices in an array of forms such as written words and images (Jupp, 2006). The process of content analysis in this paper involved stages of exploring the data.

The researcher initially transcribed all the individual responses of the participant in one master transcript. The analysis of the raw data identified the relevant codes which were then listed in a separate file. The researcher constantly reviewed these codes to eventually group them according to

similarities. Based on the groups of similar codes, the broader SDPs categories were developed and structured at the same time to answer the purpose of this research.

#### **RESULT**

This article aimed to describe the SDPs of the participating residents through a content analysis of online responses. The results are presented in **Table 1**.

**SDP 1: Practice the recommended distance.** A majority of the participants reported a conscious practice of the recommended social distance in different situations. For instance, they observe social distance by following the rules in public spaces ("When I ride a public utility vehicle, I keep the distance from another passenger by maintaining one seat apart" -Participant 22) as well as in work ("From time to time, I watch my colleagues if they are near to me so that I can adjust six feet between us." -Participant 70).

SPD 2: Express verbal cues to remind others. The participants also employed verbal cues as an approach to remind others to observe social distancing. This measure happens either towards one person ("When my customer got physically close, I politely asked him to observe social distancing" - Participant 37) or a group ("When I was in a queue and observed that social distancing seemed not followed well, I did request them" - Participant 13).

SDP 3: Convey implied cues to motion others. Moreover, the participants conveyed implied cues to motion others to keep the social distance. They either use facial gestures ("I never talk to people in public. I only make use of my eyes when I communicate to maintain our distance" - Participant 31) or showed in their bodily actions ("I show that I follow the visual marks on the ground upon entering the facility. It makes the person behind me follow it too" - Participant 43).

*SDP 4: Select time to perform errands.* The participants further selected a particular time to perform activities related to essential needs. They find a particular hour ("I usually go out only at 3 PM to 5 PM of the day since, in my observation, it's the time when the market is less crowded" -Participant 8) or a particular instance ("I prefer to wait for a time. I only enter the remittance center when there are 2 or fewer people inside." -Participant 63).

SDP 5: Choose places to perform errands. Aside from the general guideline to leave home only for places related to essential needs, the participants were selective of these places. They avoid public places ("I go to the supermarket in the mall because there seems to be less strict social distancing in the public market" -Participant 30) and go to less crowded places ("If I see that one drug store is crowded, I do not go there. I look for another drug store that is less crowded" -Participant 89).

**SDP 6:** Exercise metacognitive skills. The participants exercised thinking strategies as well to maintain social distance. They condition their minds about the places they go ("I always set my mind and be attentive wherever I go in public spaces" -Participant 39) and the way they treat people ("I treat the person close to me as COVID-19 carrier for me to be reminded of the distance" -Participant 88).

Table 1. Sample codes and SDPs categories

| Sample code   | SDPs category              |
|---|----------------------------|
| When I ride a public utility vehicle, I keep the distance from another passenger by maintaining one seat apart              | Practice the               |
| From time to time, I watch my work colleagues if they are near to me so that I can adjust six feet between us.              | recommended distance       |
| When my customer got physically close, I politely asked him to observe social distancing.                                   | Express verbal cues to     |
| When I was in a queue and observed that social distancing seemed not followed well, I did request them.                     | remind others              |
| I never talk to people in public. I only make use of my eyes when I communicate to maintain our distance.                   | Convey implied cues to     |
| I show that I follow the visual marks on the ground to make the person behind me follow it too.                             | motion others              |
| I usually go out only from 3 PM to 5 PM of the day since, in my observation, it's the time when the market is less crowded. | Select time to perform     |
| I prefer to wait for a time. I only enter the remittance center when there are 2 or fewer people inside.                    | errands                    |
| I go to the supermarket in the mall because there seems to be less strict social distancing in the public market.           | Choose places to           |
| If I see that one drug store is crowded, I do not go there. I look for another drug store that is less crowded.             | perform errands            |
| I always set my mind and be attentive wherever I go in public spaces.   | Exercise metacognitive     |
| I treat the person close to me as COVID-19 carrier for me to be reminded of the distance                                    | skills                     |
| I avoid handshaking. I just greet with a smile and say hi or hello.   | Greet without physical     |
| Sometimes I meet people I know. I just smile or wave from afar as my gesture of greetings.                                  | contact                    |
| I prefer to talk to my friends in Zoom app or videocall in Messenger  | Prefer virtual activities  |
| I now pay bills or buy load thru online like Gcash or Paymaya.  |                            |
| I refrain from touching things like grills, metal sheets, and poles in a public utility vehicle.                            | Avoid touching objects     |
| I do not touch anything especially the ones that the virus can stick for how many hours.                                    |                            |
| I put my money in plastic baskets or containers every time I pay to avoid physical contact.                                 | Use objects of third party |
| I always bring with me my pen. I use it to write my payment information instead of using the commonly provided pen.         |                            |
| I always bring 70 percent alcohol in my pocket or bag whenever I go out.  | Utilize protective items   |
| I do always cover my mouth and nose with a face mask when around with others.   |                            |
| Staying home is the best social distancing practice everybody should follow.  | Stay out of external       |
| I have been staying at home all the time. I refrain from going out by all means.  | environment                |

SDP 7: Greet without physical contact. Furthermore, a change in the custom of greeting acquaintances, which used to involve physical contact, was also observed by the participants. They just use gestures ("Sometimes I meet people I know. I just smile or wave from afar as my gesture of greetings" -Participant 83) and simple verbal expressions without physical contact ("I avoid handshaking. I just greet with a smile and say hi or hello" -Participant 48).

*SDP 8: Prefer virtual activities.* There was likewise a notable change noted by the participants in the modalities of performing some of their tasks. They express a preference to communicate online ("I prefer to talk to my friends in Zoom app or videocall in Messenger" -Participant 74) and perform business transactions online ("I now pay bills or buy load through online like Gcash or Paymaya" -Participant 52).

*SDP 9:* Avoid touching objects. The avoidance of touching objects was also observed by the participants. These objects are perceived to host the virus and usually touched by people in the public ("I refrain from touching things like grills, metal sheets, and poles in a public utility vehicle" -Participant 46) and for example, in a vehicle ("I refrain from touching things like grills, metal sheets, and poles in a public utility vehicle" -Participant 46).

SDP 10: Use objects of third party. Besides, the participants used objects of the third party to lessen their contact with other people or objects. They either use provided objects ("I put my money in plastic baskets or containers every time I pay to avoid physical contact" -Participant 19) or provide their own ("I always bring with me my pen. I use it to write my payment information instead of using the commonly provided pen" -Participant 97).

**SDP 11: Utilize protective items.** It was further disclosed that, in social distancing, the participants used protective items. They bring sanitizer ("I always bring 70 percent alcohol

in my pocket or bag whenever I go out" -Participant 27) and wear protective accessories ("I do always cover my mouth and nose with a face mask and eyeglasses when around with others" -Participant 34).

**SDP 12: Stay out of the external environment.** Lastly, there were also participants who almost completely stayed at home and out of the external environment. They believed that it is the best practice ("Staying home is the best social distancing practice everybody should follow" -Participant 14), so they tried not to go out at all ("I have been staying at home all the time. I refrain from going out by all means" -Participant 28).

As a whole, most of the participants generally comply with the recommended social distance in combination with other different practices. It should be further noted that none of the participants expressed that they do not follow nor articulated cynicism on SDPs as an intervention to decrease the growth of the COVID-19 cases. However, some participants indirectly mentioned instances in their responses about other people who do not observe the social distancing rules. Nonetheless, this work presents an indication of SDPs that are observed by a segment of residents from a particular region in a given COVID-19 period.

#### **DISCUSSION**

The result of this study is generally parallel to the conceptual definition of the Centers for Disease Control and Prevention (2020) on social distancing. Three dimensions seemed to form the conceptual definition of social distancing. These are: "stay at least six feet from other people", "do not gather in groups", and "stay out of crowded places". The specific SDPs in this paper either fall to one of these general SDPs.

A prevalent response to SDPs is the practice of recommended social distance. However, Abel and McQueen (2020) proposed the use of the phrase "spatial distancing" in this measure. They explained that drawing from the epidemiological basis, spatial distance indicates the physical extent and the collective obligation of each individual in this measure rather promotes social closeness.

Moreover, in the article by Lee (2020), he offered specific strategies on how to practice social distancing. He advised readers to think that social distancing is not just about one person, realize that everyone is involved in this practice, not presume that persons without symptoms are not infectious, use other media to communicate with others remotely, and take all necessary precautions as much as possible. These strategies are also observed in the result of this study.

These SDPs should be further understood within the concept of situational awareness. Qazi et al. (2020) attempted to examine "situational awareness through public opinion to predict adoption of social distancing" amidst the current global COVID-19 outbreak. They found out a direct significant relationship between situational awareness using formal information sources and the propensity towards social distancing practices. This result implies that awareness is an important factor in the practice of certain protective behaviors such as social distancing practices.

On the other hand, evidence should be further sought to probe if these SDPs directly contribute to the low risk status of COVID-19 infection of the region. Some emerging empirical studies recently conducted (e.g. Andersen, 2020; Chudik et al., 2020; Koo et al., 2020; Milne and Xie, 2020; Ngonghala et al., 2020) have shown indications of the effectiveness of social distancing in decreasing the growth of infection cases in the absence of a vaccine.

Specifically, in the study of Milne and Xie (2020), the adoption of social distancing measures such as school closure, workplace suspension, increased case isolation, and reduced social contact were found to be highly effective. It leveled off the curve, reduced the infection rate, and slowed down the outbreak. Even as schools around the world recently began to reopen, Cahapay (2020) uncovered that social distancing practices such as physical partitions, spaced out desks, staggered attendance, and reduced student number are mostly employed and will likely remain.

### **CONCLUSION**

The overall objective of this paper is to describe the SDPs of residents in a Philippine region with a low risk of COVID-19 infection. It can be concluded that, as far as the involved participants of this study are concerned, the majority of them observe different practices. They practice the recommended distance; express verbal cues to remind others; convey implied signals to motion others; select time to perform errands; choose places to perform errands; exercise metacognitive skills; greet without physical contact; prefer virtual activities; avoid touching objects; use objects of third party; utilize protective items; and stay out of the external environment.

The sample of this study consisted only of a small segment of residents with internet access in a single region. However, as noted earlier, while such a sample does not represent the entire population, it is considered adequate to demonstrate the qualitative purpose of this research to saturate all possible SDPs observed by the residents in a region amid the COVID-19 crisis. Thus, this work fairly provides a piece of evidence of SDPs as practiced by a select group of people from a particular context in a given COVID-19 period. It can be used as input in formulating relevant policies and strategies to reduce the spread of the virus disease. As this inquiry also specifically focused on SDPs, it is suggested that the multidimensional impacts of these practices should be further explored considering the ongoing COVID-19 crisis.

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