Comparative Analysis of MySejahtera and SatuSehat Application Use after the COVID-19 Pandemic

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ABSTRACT

Many aspects have been significantly impacted by the Covid-19 epidemic and the new normal conditions that accompany it. Various innovations in public services follow these changes and become new models for adapting to uncertain times. It is hoped that the availability of digital technology platforms will provide a shortcut and ease in accessing public services as well as efforts to overcome the Covid-19 pandemic. One of them is Malaysia and the Indonesian government which use the MySejahtera and PeduliLindungi application systems. In Indonesia and Malaysia, the COVID-19 epidemic has had a significant impact on the adoption of online digital health applications. This research methodology, also referred to as library research, combines qualitative research techniques with a library study approach. SatuSehat in Indonesia continues to operate nationally covering all regions of the country after the pandemic with new features that have been developed from the previous PeduliLindungi. On the other hand, the use of MySejahtera in Malaysia is currently only intended for people who have been verified as positive for Covid-19, which is used to update the quarantine period.

1. Introduction

The COVID-19 pandemic issue has caused a number of adjustments to societal and governmental activity patterns. The formerly unrestricted room for people to walk around was abruptly restricted by the need to adhere to specific health procedures. For instance, the World Health Organization (WHO) has established guidelines that include keeping a one-meter gap, avoiding crowded areas, using a mask, cleaning your hands, and isolating yourself until the illness is verified as being curable. Controlling is the primary objective in order to prevent the spread of Covid-19. Limitations on the movement of people were implemented both domestically and globally through the COVID-19 pandemic as a calculated measure to stop the virus's spread. Human mobility is restricted in many countries worldwide. The best way to restrict population movement will vary depending on the pandemic's stage. Limiting physical distance and human movement (population mobility) is a strategy used in nations where social transmission of pandemics has reached almost exponential growth to slow the spread and establish additional precautions (Romdiati, 2022). The goal of limiting population mobility is to preserve social and physical distance. Some methods of doing this include prohibiting residents from using public transportation, prohibiting short- and long-distance travel, restricting

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public gatherings, and closing public spaces like restaurants and recreation centers.

The ability of the government to offer its citizens high-quality public services is a need. The COVID-19 pandemic looks into and enhances the application of information technology for e-government and public service delivery. The ongoing advancement of information and communication technology fosters an environment where modifications are always being made. One of the actions the government takes to address changes in the delivery of public services to the people is the implementation of e-government. The type of service whose use grows more flexible and whose users—or the community and the government itself—feel it more. The e-government system's services will improve transparency, efficiency, and effectiveness of government operations for businesses and the community. The community will also gain a lot from these services, including reduced waiting times for services and easier access to government information (Lestari, 2021).

There are a minimum of two items that can serve as reflective material. First, people are becoming more and more reliant on technology. prior to the COVID-19 pandemic, a number of human endeavors were enmeshed in the innate desire to be independent of technology. Public services, for instance, can be provided virtually through online channels, but they lose their legality when the paperwork is filed on paper. However, the dire circumstances later shaped the technological human perspective. Second, innovative initiatives in the public sector are aided by key circumstances. A number of nations have started implementing digital health advances in an attempt to maximize public safety and oversight during the pandemic. One of them is Malaysia and the Indonesian government, which use the MySejahtera and PeduliLindungi application systems.

In Indonesia and Malaysia, the COVID-19 epidemic has significantly affected the adoption of online digital health applications. In an effort to aid in the prevention and control of the virus's spread, the governments of these two nations launched digital health applications in response to the global health emergency. The "PeduliLindungi" app was used as a contact tracking and public health monitoring tool in Indonesia. With the help of this application, users can identify possible COVID-19 exposure and get alerts if they come into touch with a confirmed case. In addition, this application offers up-to-date details about COVID-19 test locations and the pandemic. Similar functions are performed in Malaysia via the "MySejahtera" app, which tracks user movements, offers notifications for possible exposure, and makes symptom reporting easier. During the pandemic, these digital health apps witnessed substantial increases in downloads and usage in both nations, demonstrating a shift towards technology as a crucial tool for tackling public health. However, obstacles like privacy worries and unequal access to technology still exist, and the government is working to address these problems to guarantee the efficacy and public acceptance of the usage of digital medical applications.

Understanding user preferences and needs in both countries, as well as the factors that promote or impede app adoption, can also be aided by this kind of research. In order to enhance the future usability, acceptability, and functionality of digital health apps, developers of apps, the government, and other interested parties may find the research findings to be helpful. Overall, comparing SatuSehat and MySejahtera will help us better understand how digital health apps affect public health in the post-pandemic environment. The findings of this research can also be applied to enhance and maximize the future support that these apps will provide for public health.

2. Literature Review
MySejahtera

MySejahtera is a Malaysian-developed mobile application that was originally launched in 2019 as a one-stop centre for Malaysians to access healthcare

information and services. However, it gained widespread prominence and international recognition during the COVID-19 pandemic as it was adopted by the Malaysian government as the official national COVID-19 tracing and vaccination app. Features of MySejahtera: COVID-19 tracking and vaccination: MySejahtera allows users to register for COVID-19 tests and vaccinations, track their vaccination status, and view their COVID-19 exposure risk based on their contacts with positive cases. Health appointments: Users can book appointments with healthcare providers at government hospitals and clinics through the app. Telehealth consultations: MySejahtera also facilitates telehealth consultations with doctors and other healthcare professionals. Medical records: Users can store their medical records, including prescriptions and lab results, in the app. Health information: MySejahtera provides access to a wealth of health information, including articles, videos, and tips on how to stay healthy.

SatuSehat

SatuSehat is a newer initiative launched by the Indonesian government in 2022 with the aim of creating a national digital health platform. It is still under development, but the vision is to provide Indonesians with a similar range of features as MySejahtera, such as COVID-19 tracking and vaccination: SatuSehat will eventually allow users to register for COVID-19 tests and vaccinations, track their vaccination status, and view their COVID-19 exposure risk. Health appointments: The platform will enable users to book appointments with healthcare providers at government hospitals and clinics. Telehealth consultations: SatuSehat also plans to integrate telehealth consultations into the platform. Medical records: Users will be able to store their medical records in the app. Health information: SatuSehat will provide access to health information in Bahasa Indonesia.

Benefits of online digital health applications

There are many potential benefits to using online digital health applications like MySejahtera and SatuSehat. These include improved access to healthcare: By making it easier for people to access healthcare information and services, these apps can help improve overall health outcomes. Early detection and prevention of disease: The COVID-19 tracking features of these apps can help to identify and isolate cases early, preventing the spread of the virus. More convenient and efficient healthcare: Online appointments and telehealth consultations can save people time and money by eliminating the need to travel to a doctor's office. Empowerment of patients: These apps can give patients more control over their own health by providing them with access to their medical records and health information.

Challenges of online digital health applications

There are also some challenges associated with online digital health applications, such as Privacy concerns: Some people may be concerned about the privacy of their health data when using these apps. Digital divide: Not everyone has access to a smartphone or the internet, which can exclude them from using these apps. Technical challenges: Ensuring that these apps are reliable and user-friendly can be a challenge. Overall, online digital health applications like MySejahtera and SatuSehat have the potential to revolutionize the way healthcare is delivered. However, it is important to address the challenges associated with these apps to ensure that everyone can benefit from them.

3. Methods

This research methodology, also referred to as library research, combines qualitative research techniques with a library study approach. The two types of books the author uses as data sources are printed books and electronic books. In addition to books, research reports, journals, laws, and websites

are additional data sources. Used Mendeley, Google Scholar, and Google Search to collect data for her qualitative research project using the library study methodology. Using content analysis to examine the data. A set of procedures was used in content analysis, which is a research methodology for deriving reliable conclusions from books or documents. To analyze the data, the first step is to read books, journals, or other reading materials. After reading, then summarize the most important information derived from the assigned source and use that narrative text to form their analytical conclusions. Have read carefully.

4. Results and Discussion

In 2020, COVID-19 is changing in every corner of the earth, having a huge impact on people, governments, especially mortality, and the global economy. Among the nations impacted by the COVID-19 pandemic is Indonesia. Researchers then take part in tracking the development of fast-growing viral mutations among the world's peoples. Governments and the health sector do their best to deal with cases that are dynamically increasing. Following the WHO's official declaration in March 2020, COVID-19 was officially deemed a global outbreak in Indonesia. When the government said that the virus had infected Indonesia, people became alarmed, while some locals at the time opted to remain unconcerned. The government promptly began the process of closing the area to the public in an effort to stop the spread of COVID-19 and minimize transmission. One effect of the viral outbreak was a shift in community behavior that led to the need for health precautions such as masks, sanitary napkins, and keeping a safe distance.

While the PeduliLindungi application is the first step in tracking down the connections of COVID-19 victims, PeduliLindungi is an application that depends on citizens sharing their location via digital devices (smartphones) in order for it to function as intended. Subsequently, the ability to keep electronic vaccination certificates was refined, and it is now

required for participation in community events as well as mobility via lodging and transportation (Suryatni, 2022) An app called MySejahtera was created to help the authorities stop the COVID-19 outbreak from spreading throughout Malaysia. Users of the app can evaluate their own health, keep track of their condition, and assist the Malaysian Ministry of Health in promptly administering treatment if necessary. The ownership and operation of the MySejahtera app is obviously Malaysian. With assistance from the National Security Council, it is run by the Malaysian Ministry of Health, in addition to Malaysia's Administrative Modernization and Management Planning Unit. The government ensures that the regulations of the Personal Data Protection Act 2010 (Act 709) are followed when collecting personal data. With features like red area detection and appointment scheduling for vaccinations, MySejahtera has made it easier for the community to ensure safety (Rusli, 2022). Neither the PeduliLindungi nor the MySejahtera applications are paid for; users can get them for free from the Google Play Store or the App Store. Its QR Code feature assists both the government and the community in lowering the risk of transmission. The availability of New Normal, PeduliLindungi, and MySejahtera applications work in concert to provide community members with access to public facilities that reopened following a decline in the number of victims and a gradual improvement in the situation. One feature in the PeduliLindungi and MySejahtera apps that assists with contactless transactions and interactions is the QR Code. The government controls and monitors the density of visitors and related descriptions of the completeness of vaccination as one of the requirements for individuals to be in public areas. This is done in conjunction with the policies related to the obligation to use PeduliLindungi and MySejahtera in public areas where the QR Code is available at the entrance of a location or place in a public area of use. Additionally, having PeduliLindungi and MySejahtera becomes a requirement for everyone

planning a trip, as it allows them to verify the accuracy of their travel documents using the applications.

MySejahtera

Originally designed to assist the government in managing the COVID-19 outbreak in Malaysia, the MySejahtera app lets users monitor their health, conduct self-health assessments, and share information with the Ministry of Health (KKM) so that appropriate action can be taken. The Malaysian Government is the owner and operator of this application. With the transition of the nation from the pandemic to the endemic phase, MySejahtera has become a public health application rather than a tool made expressly to contain the COVID-19 epidemic. Three years after the pandemic, MySejahtera still remains relevant, facilitating the scheduling of appointments and keeping health records, among other things. To this day, my family members still use this app on our mobile phones. Some of my contacts regretted deactivating this app from their phones, failing to realize its potential post-pandemic use. MySejahtera facilitates proactive family health management and monitoring. This allows us to make the best decisions about well-being and will definitely contribute to better health management, which can help prevent long-term illnesses. The application not only offers information on common diseases among Malaysians but also stores important personal health data, including BMI. This information serves as the basis for better self-care and informed decision-making. With information at our fingertips, we can work together towards a healthier and more resilient society. Although helpful, none of the plans to improve the application's use, enable organ donation, or address other health-related issues are consistent with the original intent behind its development. If the proposal to enhance and expand the features of MySejahtera is to be implemented, a review process and a draw are necessary. the government agreed to continue the MySejahtera service after its term expired

on March 31st, 2021; due to the robustness and dynamic capabilities of its technology accordingly, the government continues to cooperate with the company in improving the functionality of the application up to what is currently being used.

The number of reported cases of COVID-19 increased from 6,796 to 12,757 in the 49th Epidemiological Week (ME 49/2023). This is in line with the global trend at the end of each year, and the majority of cases have mild symptoms and do not require hospital treatment. Health director-general Dr Radzi Abu Hassan said despite the sudden increase in the number of reported cases of COVID-19, the situation in Malaysia is still under control, and healthcare facilities are operating at capacity. Hospital admissions and intensive care unit (ICU) bed utilization each increased by 1.4 percent per 100,000 residents compared to the previous week (November 26, 2023, to December 2, 2023) (Suraya, 2023). The Ministry of Health (KKM) is advised to adopt five strategic measures to control the spread of COVID-19 cases in the country, including the reuse of the MySejahtera application. In a joint statement, former Minister of Health Khairy Jamaluddin and former Deputy Minister of Trade, International and Industry (MITI) Ong Kian Ming said the reuse of the application is able to report and monitor the health of COVID-19 patients.

With the increase in COVID-19 cases in Malaysia, the MySejahtera application is being used again only for people who are positive for COVID-19. MySejahtera is used to update the quarantine carried out, which is different from the previous COVID-19 pandemic, where MySejahtera was also used as an application to track the development of Covid cases and was intended for people who had Covid symptoms or were positive for Covid. However, it is also intended for entering areas where there are many gatherings with the aim that the suppression of Covid cases can be well controlled. The Ministry of Health was asked to use five strategic measures to control the spread of

COVID-19 cases, including the reuse of the MySejahtera application. It is anticipated that users would continue to use MySejahtera for other purposes, such as finding information and scheduling appointments with clinics, even when using it to manage contacts and determine vaccination status is not required.

PeduliLindungi/SatuSehat

In line with reducing the level of transmission and cases of COVID-19 in Indonesia, the government has decided to lift the status of Implementing Restrictions on Community Activities (PPKM) at the end of December 2022. The utilization of the PeduliLindungi application as a tool for monitoring community movements and citizen health assessments since 2020 has resulted in maha data (big data) from around 103 million people who downloaded this platform. In its development plan, SATUSEHAT Mobile will gradually add various other personal health support features whose data is sourced and integrated with electronic medical records (RME) through the SATUSEHAT Platform.

Indonesia's digital health revolution is about to move into a new stage. PeduliLindungi is now formally known as SATUSEHAT Mobile, a public health application developed by the Ministry of Health (Kemenkes). According to Setiaji, Chief Digital Transformation Office of the Ministry of Health (Kemenkes), nearly all user medical record data would be stored when the PeduliLindung application is transformed into SATUSEHAT. In addition to the services previously offered by PeduliLindungi, such as scanning QR codes at check-in, antigen and PCR test results, and COVID-19 immunization, a new tool dubbed "health diary" that can track and record conditions will be added soon. well-being of both you and your loved ones.

This function allows for the recording of four conditions: blood pressure, blood sugar, heart rate, and body measurements (weight and height).

Following that, a variety of data will show up, including analysis, health curves, and suggestions for additional action. Not only data related to COVID-19 but also medical records for other diseases will be stored. Later, the medical records in the Satu Sehat application will contain various laboratory examination results, vaccination records, and a stabling database (Faq Kemenkes, 2023).

The SatuSehat application offers pretty good user engagement assessment scores, which are consistent with positive overall user experience evaluation results. The study's findings even demonstrate a significant relationship between SatuSehat application user experience and user engagement. There is nothing difficult, tedious, or frustrating about the SatuSehat application. People believe that there are advantages to the SatuSehat program, and they are eager to utilize it as a result.

However, SatuSehat still receives reviews in the form of criticism of the application with problems such as not being able to log in and not being helpful. Not only has it received bad critical reviews, but SatuSehat also has many positive reviews regarding the benefits of the ease of application felt by the public. After the COVID-19 pandemic, the use of the SatuSehat application in Indonesia still has significant potential in supporting public health efforts. These applications can continue to serve as tools that assist individuals in monitoring and maintaining their personal health. Features such as vaccination registration, symptom monitoring, and up-to-date information about the health situation can remain useful for users to maintain awareness of potential infectious diseases.

In addition, SatuSehat can play an important role in the government's efforts to maintain overall public health. This application can be used to track and analyze health data, assisting governments in making data-based decisions to face various health challenges. This application also continues to strive to provide users with accurate and relevant health information, including health guides, disease

symptoms, and preventive measures. These proactive steps are key to increasing public health literacy and reducing the spread of inaccurate information. Overall, SatuSehat's latest developments reflect the application's evolution in supporting public health needs in Indonesia. By continuing to update its functionality and aligning itself with technological developments and public health demands, SatuSehat is expected to remain an effective and powerful tool in managing current and future health challenges.

After the COVID-19 pandemic, the comparison between the use of the SatuSehat application in Indonesia and MySejahtera in Malaysia reflects different strategies and focuses in handling public health. In Indonesia, SatuSehat remains the main tool for monitoring and supporting COVID-19 vaccination efforts, providing the latest information about the vaccination program, and facilitating vaccination registration and monitoring for the public. The app also emphasizes monitoring COVID-19 symptoms and provides quick access to health information resources.

On the other hand, MySejahtera in Malaysia continues to be used as a powerful contact tracing tool and plays an important role in tracking the spread of the virus. The app is also integrated with a travel reporting function, enabling close monitoring of traveling individuals. MySejahtera provides necessary health information and guidance, but its focus is broader to include aspects of tracking and controlling the spread of the virus as a whole. In terms of coverage, SatuSehat in Indonesia continues to operate nationally, covering all regions of the country. In contrast, MySejahtera in Malaysia has the flexibility to adapt to state government policies and to regional variations in situations. This comparison reflects the differences in strategy and focus between the two countries in facing post-pandemic challenges. SatuSehat emphasizes efforts to accelerate vaccination and monitor symptoms, while MySejahtera maintains its role in contact tracing and controlling community mobility. In this context, the

strategy of each application reflects priorities in accordance with national health conditions and policies. The future success of both will depend on their adaptation to the dynamic development of the pandemic and the evolution of public health needs.

5. Conclusion

By considering the use of the SatuSehat application in Indonesia and MySejahtera in Malaysia after the COVID-19 pandemic, it can be concluded that both have a crucial role in forming a new paradigm in public health management. Post-pandemic, SatuSehat, and MySejahtera have proven their usefulness in monitoring and controlling the spread of disease, especially in supporting vaccination programs. The integration of comprehensive functionality, including digital health services and ongoing education, strengthens the application's role as an important tool in empowering people to manage their personal health. Thus, the conclusion that can be drawn is that SatuSehat and MySejahtera, as representatives of digital health technology, have proven to play an important role in helping manage public health. Sustainability in development, adaptation to pandemic developments, and community empowerment through a comprehensive approach will be the key to making these two applications valuable assets in the post-COVID-19 pandemic health journey.

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