



Safety Behavior of Workers in the New Normal Period

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ABSTRACT

Safety behavior has an important role to support the physical and psychological health of individuals during a pandemic as well as in adapting to a new normal life order. This study aims to identify patterns of safety behavior displayed by the community, especially workers in the new normal. The variable in this study, namely safety behavior with descriptive quantitative research methods. The survey was used as a data collection method with 103 subjects as the research subjects working in normal times. The results showed that safety behavior was in the High and Very High categories where the subject was able to display safety behavior when interacting in public places, workplaces, and in the home environment. Subjects not only demonstrate compliance with safety regulations and procedures, but also participate in encouraging the creation of a safe work environment to avoid the spread of the corona virus when entering the new normal. Workers should maintain safety behavior in their daily life, and the results of this study provide information for industry or companies to determine follow-up plans and strategies for managing occupational safety and health in the new normal.

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BACKGROUND

Covid-19 affects all sectors of life from various parties in all parts of the world. In addition to primarily having an impact on health and safety aspects, the impact of Covid-19 has also had an impact on the economic sector. The Covid-19 pandemic has had a negative impact on the crisis, with 86 percent of the 1,105 companies surveyed reporting a decline in sales and 73 percent firms face a decline in the availability of inputs. Due to falling demand, companies face shortages serious cash flow and liquidity constraints. In general, 9 out of every 10 companies tend to experience a decrease in revenue (Ministry of Manpower, 2021).

Data from the Indonesian Ministry of Manpower also shows that 17.8 percent of companies said they were forced to lay off, 25.6 percent said they had laid off their employees, and 10 percent said they had done both. This has an impact on 2,562,530 people becoming unemployed, and 24,027,576 people experiencing a reduction in working hours due to the COVID-19 pandemic (Ministry of Manpower of the Republic of Indonesia, 2021).

In an effort to minimize the economic impact experienced by the community, the government seeks to ensure that the economy and industry continue to run but also protects the health and safety of the community and ensures control of the spread of the corona virus. For this reason, the government establishes a new normal period as an effort to adapt and adjust to life activities with new habits so that they can live productively and avoid the transmission of COVID-19. The implementation of this new normal is also followed by the establishment of health regulations and protocols (Ministry of Manpower of the Republic of Indonesia, 2020b).

In the economic sector in the world of work, the implementation of this new normal is followed by the determination of

guidelines for preparing business continuity plans in the face of the 2019 *corona virus disease pandemic* (Ministry of Manpower of the Republic of Indonesia, 2020a). This guideline aims to protect business continuity from the impact of the COVID-19 pandemic and prevent the spread of the virus in the company.

One of the stages is planning to mitigate the risk of the COVID-19 pandemic by implementing occupational safety and health (K3) protocols. This OSH protocol regulates the preparation of companies and workers to return to work and carry out work actions or activities (Ministry of Manpower of the Republic of Indonesia, 2020b). The application of this K3 protocol needs to be supported by employee work behavior that focuses on occupational safety and health (*safety behavior*).

In general, *safety behavior* is behavior that focuses on safety or health. Rusyda & Abdul Aziz (2021) describe the definition of safety behavior based on perspectives from clinical psychology, industrial psychology, organizational psychology, and *social learning*. From a *social learning* perspective, safety behavior is explained through the analysis that behavior is formed through learning from the environment and is influenced by fear (Ahn et al., 2013; Golkar et al., 2015). Fear is a condition in which the individual is more aware of the unfavorable consequences and takes possible steps to avoid the condition (Ahn et al., 2013).

From the perspective of clinical psychology, implicitly and explicitly, safety behavior is shaped as an effort to prevent extraordinary outcomes or situations that can cause anxiety or other psychological disorders (Sharpe et al. 2022). From the perspective of industrial psychology, safety behavior relates to compliance with regulations and procedures to prevent accidents and injuries to self and others (Hadi et al., 2017; Toppazzini & Wiener, 2017).

From the perspective of organizational psychology, safety behavior is measured based on the inventory of safe and unsafe in the organization which is a crucial issue and has an impact on the organization (McSween & Moran, 2017; Uehli et al., 2014).

The safety behavior displayed by individuals can include two aspects, namely safety compliance behavior and safety participation behavior (Griffin & Neal, 2000). Compliance behavior related to compliance with safety regulations and procedures can be demonstrated by individual compliance with the OHS protocol rules. In participatory behavior which includes voluntary behavior in supporting safety, individuals can be shown through an active attitude and initiative in reminding others to follow safety rules.

In the context of the new normal, safety behavior can be formed through learning about information and data regarding the rapid and widespread spread of the corona virus, causing high cases of death and causing feelings of anxiety and fear en masse in the community. This behavior can also be formed as a preventive measure from the negative consequences or impacts of COVID-19 that can be accepted by oneself, others and also the organization.

Referring to the situation of the new normal which is still accompanied by the presence of the corona virus and the impact of its spread which is psychologically detrimental because it still causes fear and anxiety, every individual should display safety behavior (Sharpe et al. 2022). This behavior has an important role in supporting physical and psychological health as well as the safety and sustainability of individual life during the pandemic and adaptation period to the new normal life order.

In the context of the world of work, the corona virus that still exists can have the potential to cause work-related diseases so that it disrupts work processes and

organizational goals (Ministry of Health, 2020). Therefore, in an effort to adapt to the habits of the new normal order and avoid the spread of covid-19 which can cause new clusters of spread, it is important for workers to behave in safety. In addition, to support the sustainability of industrial and organizational businesses in the new normal, the optimization of the performance of human resources who have healthy and safe physical and psychological conditions should be based on displaying safety behavior.

Therefore, the correct, precise and orderly implementation of safety behavior should be able to support the control and reduction of the number of confirmed cases of COVID-19. However, at the beginning of 2022 there was an increase in the number of confirmed cases of Covid-19 and PPKM or the determination of restrictions on community activities was implemented. Based on the Minister of Health's regulation, one of the indicators for implementing PPKM is the number of confirmed cases of COVID-19 (Kemenkes RI, 2021). The implementation of this PPKM has an impact in the form of restrictions on socio-economic activities that can have a major impact on the survival of individuals and industrial businesses.

The determination of the PPKM in early 2022 was followed by restrictions on social and economic activities, including in the industrial sector for workers to return to work at home (work from home) or apply a maximum capacity of 50 percent, socio-economic activities in the retail sector, supermarkets, people's markets, malls. and shopping centers are also limited to a maximum capacity of 50 percent (Saubani, 2022; Evandio, 2022).

The increase in Covid-19 cases that have an impact on the implementation of the PPKM, one of which can be caused by the public not displaying safety behavior.

This is also supported by the results of random observations made by researchers from September 2021 to January 2022 on several socio-economic activities in the retail, mall, minimarket, restaurant and worship sectors. The results of the observation show that there are some people who display behavior that does not follow the health protocol. In general, the behaviors displayed include not wearing a mask, not keeping a distance, and crowding. In addition, there is also behavior that allows and seems unconcerned when seeing or knowing that there are other people who do not comply with health protocols.

Based on the above, it shows that the safety behavior displayed by individuals can be one of the causes of the increasing number of COVID-19 cases and the determination of PPKM. Therefore, the importance of safety behavior is the basis of this research with the aim of identifying the patterns of safety behavior displayed by the community, especially workers in the new normal.

This is based on the consideration that workers are the majority status owned by the Indonesian people and are the parties affected by COVID-19. It is hoped that this research can provide benefits for workers in the form of information about their safety behavior patterns so that they can support awareness of the importance of safety behavior. For industry or companies, it is hoped that this research can also provide information about the patterns of safety behavior possessed by workers so that it can be used as reference data in determining follow-up plans or strategies for managing occupational safety and health in the new normal.

RESEARCH METHOD

Research Design

This research is descriptive quantitative research to get a description of worker safety behavior during the new

normal. The variable in this study is safety behavior.

The main subjects are workers with the criteria of being active workers who work during the new normal period of the COVID-19 pandemic (or returning to work after June 2020) as many as 103 people. The data collection method used in this study was a Safety Behavior Scale measurement instrument which was adapted from Griffin & Neal (2000).

Research Procedure

The research flow begins with research preparation and continues with identifying problems and compiling literature and making scales. Then the data collection was carried out by giving the Work Safety Scale to the subject via Google Form. The next step is to perform data processing and analysis which can then be determined conclusions and suggestions for further researchers.

Data Analysis Techniques

This study uses a descriptive statistical test data analysis technique where the researcher uses the mean and standard deviation to calculate the frequency distribution of the data. After that, the researchers grouped them into the categories of Very High, High, Medium, Low and Very Low. The data that has been grouped is then presented in tabular form.

The operational definition of safety behavior is behavior that focuses on safety or health as indicated by behavior in compliance with regulations and participatory behavior in support of safety or health as indicated by the score obtained by the subject via a Likert scale. The aspects of safety behavior that are measured in this study are compliance behavior and participatory behavior. Each aspect consists of 26 items of compliance behavior and 31 items of participatory behavior. The discriminant power of items on the safety

behavior scale ranged from 0.384 to 0.791. The reliability value using Cronbach's Alpha is 0.971.

The way of grouping the scaled data will be done with the following formula:

Table 1. Total Score Categorization

Categorization	Formula
Very high	$X > (M + 1,8 \text{ SD})$
High	$(M + 0,6 \text{ SD}) < X \leq (M + 1,8 \text{ SD})$
Average	$(M - 0,6 \text{ SD}) < X \leq (M + 0,6 \text{ SD})$
Low	$(M - 1,8 \text{ SD}) < X \leq (M - 0,6 \text{ SD})$
Very Low	$X \leq (M - 1,8 \text{ SD})$

*X = Score obtained by the subjects

RESEARCH RESULT

This research was conducted in Indonesia and was carried out in the range of November-December 2021. Researchers distributed questionnaires in the form of online google forms through various social media of researchers. The criteria for the subjects of this study were industrial

workers in the new normal. There were 103 subjects who participated in this study consisting of subjects with male and female gender, working in the manufacturing and service industry sectors, as well as workers in small to large scale industries. The results of data analysis and categorization based on the safety behavior scale can be seen in the following table:

Table 2. Categorization of Subject Safety Behavior Total Score

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	38	37%
High	$154 < X \leq 187$	49	48%
Average	$121 < X \leq 154$	14	14%
Low	$88 < X \leq 121$	2	2%
Very Low	$X \leq 88$	0	0%
Total		103	100%

The data shows that the safety behavior of the subjects is mostly in the high category. Based on this self-assessment, it is known that most of the subjects feel that they show good safety behavior. Subjects comply with regulations and implement health protocols set by the government both in public places, workplaces, and in the home environment. Subjects also remind

and share information with others about health regulations and protocols and reprimand in case of violations.

In order to understand individual strengths in each aspect, the table below describes the subject categorization scores based on aspects of safety behavior, namely safety compliance and safety participation:

Table 2. Safety Compliance Aspect Score Categorization

Categorization	Value Limit	Frequency	%
Very high	$X > 82$	55	52%
High	$67 < X \leq 82$	42	41%
Average	$53 < X \leq 67$	5	5%
Low	$38 < X \leq 53$	1	1%

Very Low	$X \leq 38$	0	0%
Total		103	100%

The table above shows that the safety compliance aspect shown by the majority of the subjects is in the very high category. This shows that the subject has excellent

compliance with safety regulations and follows the prescribed health procedures or protocols in an orderly manner.

Table 4. Categorization of Safety Participation Aspect Scores

Categorization	Value Limit	Frequency	%
Very high	$X > 105$	32	31%
High	$87 < X \leq 105$	41	40%
Average	$68 < X \leq 87$	26	25%
Low	$50 < X \leq 68$	4	4%
Very Low	$X \leq 50$	0	0%
Total		103	100%

The safety participation aspect is dominated by subjects who are in the high category. These results can be interpreted that the subject has been able to participate in supporting the implementation of safety behavior in their environment. Subjects show initiative in demonstrating safety behavior, participate in efforts to improve security and safety, and actively participate in promoting health and safety programs.

This study identifies worker safety behavior through three main activities of

workers with reference to the K3 protocol rules returning to work, namely activities in the home environment before leaving and returning home, activities in public places related to traveling to work, and activities at work, namely before and after work. while working (Kemenaker, 2020b). The results of data analysis and categorization are in table 5 as follows:

Table 5. Categorization of Safety Behavior Scores in the Home Environment

Categorization	Value Limit	Frequency	%
Very high	$X > 51$	55	53%
High	$42 < X \leq 51$	36	35%
Average	$33 < X \leq 42$	11	11%
Low	$24 < X \leq 33$	1	1%
Very Low	$X \leq 24$	0	0%
Total		103	100%

Based on the data in the table above, it can be seen that the safety behavior in the home environment is dominated by the very high category. This shows that the subjects performed safety behaviors very well, such as cleaning themselves and personal equipment, changing masks and clothes

after activities outside the home. Subjects also exercise in an effort to maintain endurance. In addition, the subjects also reminded family members at home to apply health protocols and maintain personal hygiene.

Table 6. Categorization of Safety Behavior Scores in the Workplace

Categorization	Value Limit	Frequency	%
Very high	$X > 82$	34	33%
High	$67 < X \leq 82$	46	45%
Average	$53 < X \leq 67$	21	20%
Low	$38 < X \leq 53$	2	2%
Very Low	$X \leq 26$	0	0%
Total		103	100%

From table 6 it is found that the safety behavior shown by the subjects is in the very high category. This means that the subjects also follow all health and safety protocols and procedures in the workplace. Subjects also socialized, educated and even reprimanded colleagues regarding health

protocols that need to be adhered to in the context of preventing Covid-19. Participation in campaigning for healthy living is also carried out. They also provide input to the leadership regarding health protocol guidelines in the office.

Table 7. Categorization of Safety Behavior Scores in Public Places

Categorization	Value Limit	Frequency	%
Very high	$X > 54$	41	40%
High	$45 < X \leq 54$	46	45%
Average	$35 < X \leq 45$	13	13%
Low	$26 < X \leq 35$	3	3%
Very Low	$X \leq 26$	0	0%
Total		103	100%

Based on the data above, it is known that when in public places, the subject shows high safety behavior. This is related to the proper implementation of health protocols and is shown through behaviors such as keeping a distance, using masks, hand sanitizer, and washing hands regularly, including using non-cash in the transaction process. Subjects also reminded and shared information with others to remain obedient and implement health protocols.

Based on gender data, it is known that both men and women have positive attitudes regarding safety behavior. This is indicated by the majority of male subjects and female subjects being in the very high and high categories. This means that both male and female subjects show obedient behavior towards safety and are also active in supporting safety in their environment. Categorization by gender is described in tables 8 and 9 below:

Table 8. Categorization of Safety Behavior Scores Based on Male Gender

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	15	38%
High	$154 < X \leq 187$	14	36%
Average	$121 < X \leq 154$	8	21%
Low	$88 < X \leq 121$	2	5%
Very Low	$X \leq 88$	0	0%
Total		39	100%

Table 9. Categorization of Safety Behavior Scores by Female Gender

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	23	36%
High	$154 < X \leq 187$	35	55%
Average	$121 < X \leq 154$	6	9%
Low	$88 < X \leq 121$	0	0%
Very Low	$X \leq 88$	0	0%
Total		64	100%

In table 10 below, it can be seen that if it is based on the type of service industry, the subject shows thoughts about safety behavior which are in the high category. This means that subjects who work in the type of

service industry participate in implementing work safety protocols and procedures and are actively participating in realizing safety behavior in daily work processes.

Table 10. Categorization of Safety Behavior Scores by Type of Service Industry

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	32	38%
High	$154 < X \leq 187$	40	47%
Average	$121 < X \leq 154$	12	14%
Low	$88 < X \leq 121$	1	1%
Very Low	$X \leq 88$	0	0%
Total		85	100%

Subjects in the type of manufacturing industry as shown in table 11 below, the majority showed a high category of safety behavior. That is, the subject has a relatively good awareness in applying the existing

safety and health procedures in their daily work. The subjects also participated in the dissemination of information and socialization and even reminded colleagues about the application of safety behavior.

Table 11. Categorization of Safety Behavior Scores by Type of Manufacturing Industry

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	6	33%
High	$154 < X \leq 187$	9	50%
Average	$121 < X \leq 154$	2	11%
Low	$88 < X \leq 121$	1	6%
Very Low	$X \leq 88$	0	0%
Total		18	100%

Based on the industrial scale, it appears that the safety behavior of the subjects in the three industrial scales is dominated by high and very high categories. This can be interpreted that the subjects in the industry with small, medium and large scale businesses have a positive attitude about

safety behavior. Subjects from all three industrial scales demonstrated compliance with safety regulations and a willingness to participate in supporting safety in their work environment. Categorization based on industrial scale is depicted in the following tables 12, 13, and 14:

Table 12. Categorization of Safety Behavior Scores by Small-Scale Industry

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	5	33%
High	$154 < X \leq 187$	5	33%
Average	$121 < X \leq 154$	4	27%
Low	$88 < X \leq 121$	1	7%
Very Low	$X \leq 88$	0	0%
Total		15	100%

In the table above, workers who work in small-scale industries have a perception of safety behavior that is classified as High-Very High. They demonstrate compliance with

occupational safety and health regulations and take the initiative to carry out these procedures within the scope of their daily duties.

Table 13. Categorization of Safety Behavior Scores by Medium-Scale Industry

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	25	38%
High	$154 < X \leq 187$	32	49%
Average	$121 < X \leq 154$	7	11%
Low	$88 < X \leq 121$	1	2%
Very Low	$X \leq 88$	0	0%
Total		65	100%

Table 13 illustrates that workers in medium-scale industries have a high level of safety behavior. That is, they are able to

comply with as well as promote work safety behaviors in the scope of their daily lives.

Table 14. Categorization of Safety Behavior Scores by Large-Scale Industry

Categorization	Value Limit	Frequency	%
Very high	$X > 187$	8	35%
High	$154 < X \leq 187$	12	52%
Average	$121 < X \leq 154$	3	13%
Low	$88 < X \leq 121$	0	0%
Very Low	$X \leq 88$	0	0%
Total		23	100%

Workers who are active in large-scale industries show a high level of safety behavior. They have compliance with the established rules and procedures regarding the implementation of work safety, while encouraging the environment to play an active role in implementing it.

community, especially workers in the new normal period. Based on the results of a survey conducted on the subject, it can be seen that most of the subjects view themselves as having good safety behavior. This shows that the majority of research subjects have implemented behaviors that support work safety in the new normal. Workers both in public places, at work, and in the home environment are able to comply with the rules, procedures, and health protocols set to avoid the spread of Covid-19

DISCUSSION

Safety behavior research on workers in the New Normal Period aims to identify patterns of safety behavior displayed by the

as well as an effort to prepare for life in the new normal. The workers' compliance with safety behavior is demonstrated through the use of masks when doing activities, keeping a distance when with other people, diligently washing hands, and exercising in an effort to increase endurance. The workers also showed a high initiative in promoting information on occupational health and safety, for example by socializing health protocols and even reprimanding others if they violated them.

The application of safety behavior is very necessary for workers. The research of Guidetti, Cortini, Fantineli, Fiore, and Galanti (2022) shows that if workers apply safety behavior in the context of safety management, it can encourage the creation of psychological well-being. Individuals who consciously apply various health protocols, carry out work safety rules, and even help others in carrying out safety behaviors will have more happiness, create satisfaction with their lives, and feel psychologically prosperous.

Research from Rifayanti, Putri, Putri, and Yustia (2021) shows that psychological well-being is very necessary for everyone in the new normal because it is closely related to hope and gratitude. When workers are able to have psychological well-being and hope in this new normal, these workers will be more grateful and accept this new normal. The gratitude shown then becomes the capital for workers in the new normal to make their organizations healthier and ready to face various challenges (Di Fabio, Palazzechi, Bucci, 2017).

This research is a study that focuses on the attitudes or behavioral tendencies of the subjects towards occupational safety and health during the new normal period of covid-19. This behavior is based on rational considerations carried out as an effort to protect oneself from the dangers of COVID-19.

If analyzed using the concept of the theory of planned behavior (theory of planned behavior) which is based on the assumption that humans are rational beings and use the information that is possible for them systematically. Where individuals think about the implications of their actions before deciding to do or not to perform certain behaviors (Ajzen, 2020).

In the theory of planned behavior, it is stated that behavior involves actions that are directed at a target, carried out in a certain context, and at a certain point in time (Ajzen, 2020). Where the behavior of the individual arises because of the individual's intention to behave and the individual's intention is caused by several factors related to attitude toward the behavior, subjective norms, and perceptions of behavioral control.

Attitude toward the behavior is an individual's assessment based on beliefs and consideration of the consequences of the behavior taken (Ajzen, 2020). If it is associated with safety behavior, then individuals implement this behavior because of their belief and consideration of the consequences that if this behavior is not implemented, there will be a great potential for contracting the corona virus.

Subjective norms are a person's perception of the beliefs of others that will affect the intention to perform or not perform the behavior under consideration (Ajzen, 2020). In a pandemic situation, the news and information that tells about panic, fear and death due to COVID-19 has formed a global perception of the dangers of the spread of the corona virus. Associated with safety behavior, the intention to implement this behavior is based on a shared belief regarding the dangers of COVID-19.

Behavioral control is an individual skill in sensitivity to reading the situation of oneself and the environment (Ajzen, 2020). In addition, the ability to control and manage behavioral factors according to

situations and conditions to control behavior. If it is related to the news and information distributed by various parties regarding the high spread of the corona virus, the dangers, and impacts caused can be the basis for building sensitivity to the pandemic situation. This individual's sensitivity can be the basis for determining the application of safety behavior.

In a pandemic situation as well as in the new normal when the corona virus is still spreading, safety behavior has an important role to play in avoiding the dangers of covid-19. Through compliance behavior shown by following health procedures and protocols, and participatory behavior by actively supporting safety, individuals can protect themselves and others from the corona virus.

The importance of safety behavior is in line with previous studies that have linked safety behavior to work accidents, work injuries, lost time, and near-loss events (Adi et al., 2021; Curcuruto et al., 2015; Kao et al., 2015). al., 2019; Kim et al., 2021; Toppazzini & Wiener, 2017; Vierendeels et al., 2018; Xue et al., 2020). In the context of the COVID-19 pandemic, safety behaviors are associated with dangerous situations and anxiety (Kirk et al., 2019; Knowles & Olatunji, 2021).

In relation to research data regarding aspects of safety behavior, it can be seen that the high and very high categories have the highest percentages. Compliance behavior is 52% and compliance behavior is 40%. These data indicate that the behavior of the subject's attachment is more dominated by behavior that prioritizes compliance with safety procedures and the use of personal protective equipment. In addition, safety behavior is also shown through participatory behavior that can help encourage the emergence of a safe and safe environment from COVID-19.

In the work context, safety behavior is needed to support safety and health in the

workplace. Prior to the COVID-19 pandemic, safety behavior was more related to efforts to support the creation of a safe work environment, and to avoid accidents or harmful work injuries. Generally related to ergonomics and the design of work tools and equipment. However, during the COVID-19 pandemic, safety behavior is more focused on supporting occupational safety and health in order to avoid potential transmission of the corona virus and provide physical and psychological security protection.

For this reason, safety behavior needs to be applied not only in the work context but also in contexts outside the work environment. Therefore, the application of health protocols by workers is not only required in the work environment, but also in the environment outside of work, namely in the home environment and public areas. This is in line with government regulations regarding the OSH protocol for returning to work where the new normal (Ministry of Manpower, 2020b).

Referring to the results of the survey, it was found that the safety behavior displayed by the subjects during their activities during the new normal had a category with a range between high and very high. Where activities in the home environment have a percentage of 53%, activities at work 45%, and activities in public places 45%. This can be interpreted that the subject is able to display safety behavior in various activities so that they are ready to move in the new normal. In addition, according to the perspective of social learning, individual behavior is formed due to the learning process from the environment and is influenced by fear so that it guides the formation of behavior that aims to protect oneself from dangerous situations (Ahn et al., 2013). In this case, the pandemic situation and the potential for the

spread of COVID-19 are driving individuals to raise safety behaviors.

In addition, the anxiety of contracting the corona virus is also the basis for the formation of safety behavior. According to the perspective of clinical psychology, individual behavior is formed as an effort to prevent extraordinary outcomes or situations that can cause anxiety or other psychological disorders (Sharpe et al. 2022). This can also be the basis for the formation of behavior if it is associated with the context of the type and scale of the industry.

Research data related to the results of the industrial type survey show that the highest percentage of safety behavior is in the high category. Where the service industry has 47% and the manufacturing industry is 50%. Likewise if it is associated with industrial scale. The survey results show most of them are in the high category. On the small scale industry, the percentage is 33%, medium industry is 49%, and large industry is 52%.

The same thing is also seen in the results of a survey conducted by gender. Where each gender of the subject shows safety behavior, most of which are in the very high and high categories. The male gender has a percentage of 38%, while the female gender shows a percentage of 55%.

Based on these data, it can be concluded that regardless of gender, type of industry, and the scale of the industry where the individual works, overall the subjects are able to display behaviors that follow safety procedures and also behaviors that play an active role in supporting safety.

In general, the results of this study illustrate the high level of safety behavior perceived by workers in public places, workplaces, and in the home environment. However, there are no studies that specifically discuss the mapping of safety behavior among workers in the new normal or correlate it with various other variables. This is what makes the results of this

research so important as a jumping-off point for various similar research topics in planning follow-up plans and strategies for individuals, communities and industries to maintain and even develop safety behaviors.

CONCLUSION

The results showed that most of the subjects had good safety behavior with a range of assessments in the high and very high categories. This can be interpreted that all subjects are able to display safety behavior when doing activities in a new normal situation. The safety behavior displayed is not only in the form of compliance with safety regulations and procedures, but also participatory behavior that can encourage the creation of a safe work environment and avoid the spread of the corona virus, even though it has entered a new normal period. This behavior is displayed by male and female subjects who work in the service and manufacturing industries, and in small, medium, and large scale industries. In addition, the subject's safety behavior is also displayed in their activities both when they are still in the home environment, in public places, or while at work.

Based on the results of the research, it can be recommended for workers to continue to implement safety behavior in various activities of daily life wherever they are even though they are currently entering a new normal. It is recommended for the industry or company to be able to maintain and improve worker safety behavior by developing a system or program that supports the health, safety and welfare of workers (occupational wellness) which is internalized into the values and culture of the organization and implemented in activities or work habits. workers daily.

REFERENCES

Adi, E. N., Eliyana, A., & Hamidah. (2021). An

- empirical analysis of safety behaviour: A study in MRO business in Indonesia. *Heliyon*, 7(2), e06122. <https://doi.org/10.1016/j.heliyon.2021.e06122>
- Ahn, S., Lee, S., & Steel, R. P. (2013). Effects of Workers' Social Learning: Focusing on Absence Behavior. *Journal of Construction Engineering and Management*, 139(8), 1015–1025. [https://doi.org/10.1061/\(asce\)co.1943-7862.0000680](https://doi.org/10.1061/(asce)co.1943-7862.0000680)
- Ajzen, I. (2020). The theory of planned behavior: Frequently asked questions. *Human Behavior and Emerging Technologies*, 314-324. DOI: 10.1002/hbe2.195
- Di Fabio, A., Palazzeschi, L., & Bucci, O. (2017). Gratitude in Organizations: A Contribution for Healthy Organizational Contexts. *Frontiers in psychology*, 8, 2025. <https://doi.org/10.3389/fpsyg.2017.02025>
- Curcuruto, M., Conchie, S. M., Mariani, M. G., & Violante, F. S. (2015). The role of prosocial and proactive safety behaviors in predicting safety performance. *Safety Science*, 80, 317–323. <https://doi.org/10.1016/j.ssci.2015.07.032>
- Golkar, A., Castro, V., & Olsson, A. (2015). Social learning of fear and safety is determined by the demonstrator's racial group. *Biology Letters*, 11(1). <https://doi.org/10.1098/rsbl.2014.0817>
- Griffin, M. A., & Neal, A. (2000). Perceptions of safety at work: a framework for linking safety climate to safety performance, knowledge, and motivation. *Journal of Occupational Health Psychology*, 5(3), 347–358. <https://doi.org/10.1037/1076-8998.5.3.347>
- Guidetti, G.; Cortini, M.; Fantinelli, S.; Di Fiore, T.; Galanti, T. Safety Management and Wellbeing during COVID-19: A Pilot Study in the Manufactory Sector. *Int. J. Environ. Res. Public Health* 2022, 19, 3981. <https://doi.org/10.3390/ijerph19073981>
- Hadi, N. A. A., Tamrin, S. B. M., Guan, N. Y., How, V., & Rahman, R. A. (2017). D8-1 Association between Non-Reporting of Accident and Contributing Factors in Malaysia's Construction Industry. *The Japanese Journal of Ergonomics*, 53(Supplement2), S648–S651. <https://doi.org/10.5100/jje.53.s648>
- Kao, K. Y., Spitzmueller, C., Cigularov, K., & Thomas, C. L. (2019). Linking safety knowledge to safety behaviours: a moderated mediation of supervisor and worker safety attitudes. *European Journal of Work and Organizational Psychology*, 28(2), 206–220. <https://doi.org/10.1080/1359432X.2019.1567492>
- Kemenaker RI. (2020a). Keputusan Direktur Jenderal Pembinaan Pengawasan Ketenagakerjaan Dan Keselamatan Dan Kesehatan Kerja Nomor 5/36/Hm.01/IV/2020 Tentang Pedoman Penyusunan Perencanaan Keberlangsungan Usaha Dalam Menghadapi Pandemi Corona Virus Disease 2019 (COVID-19). *Menteri Ketenagakerjaan Republik Indonesia*, 1–52.
- Kemenaker RI. (2020b). Keputusan Direktur Jenderal Pembinaan Pengawasan Ketenagakerjaan Dan Keselamatan Dan Kesehatan Kerja Nomor 5/76/Hm.01/VII/2020 Tentang Protokol Keselamatan Dan Kesehatan Kerja (K3) Kembali Bekerja Dalam Pencegahan Penularan Covid-19. *Menteri Ketenagakerjaan Republik Indonesia*, 1–12.
- Kemenaker RI. (2021). *Ketenagakerjaan*

- dalam *Data* 2021. https://satudata.kemnaker.go.id/files/2019_BUKU_KETENAGAKERJAAN_DALAM_DATA_1605501203.pdf
- Kemendes RI. (2020). Keputusan Menteri Kesehatan Republik Indonesia Nomor Hk.01.07/Menkes/327/2020 Tentang Penetapan *Corona Virus Disease 2019 (Covid-19)* Akibat Kerja Sebagai Penyakit Akibat Kerja Yang Spesifik Pada Pekerjaan Tertentu. Menteri Kesehatan Republik Indonesia, 1-8.
- Kemendes RI. (2021). Keputusan Menteri Kesehatan Republik Indonesia Nomor Hk.01.07/Menkes/4805/2021 Tentang Indikator Penyesuaian Upaya Kesehatan Masyarakat Dan Pembatasan Sosial Dalam Penanggulangan Pandemi *Coronavirus Disease 2019 (COVID-19)*. Menteri Kesehatan Republik Indonesia, 1-13.
- Kim, S., Kim, P. B., & Lee, G. (2021). Predicting hospitality employees' safety performance behaviors in the COVID-19 pandemic. *International Journal of Hospitality Management*, 93, 102797. <https://doi.org/10.1016/j.ijhm.2020.102797>
- Kirk, A., Meyer, J. M., Whisman, M. A., Deacon, B. J., & Arch, J. J. (2019). Safety behaviors, experiential avoidance, and anxiety: A path analysis approach. *Journal of Anxiety Disorders*, 64(March), 9-15. <https://doi.org/10.1016/j.janxdis.2019.03.002>
- Knowles, K. A., & Olatunji, B. O. (2021). Anxiety and safety behavior usage during the COVID-19 pandemic: The prospective role of contamination fear. *Journal of Anxiety Disorders*, 77, 102323. <https://doi.org/10.1016/j.janxdis.2020.102323>
- McSween, T., & Moran, D. J. (2017). Assessing and Preventing Serious Incidents with Behavioral Science: Enhancing Heinrich's Triangle for the 21st Century. *Journal of Organizational Behavior Management*, 37(3-4), 283-300. <https://doi.org/10.1080/01608061.2017.1340923>
- Rifayanti, R., Putri, E.T., Putri, Y.S.C., Yustia, F.A. (2021). Kesejahteraan psikologis, harapan, dan kebersyukuran di masa new normal. *Psikostudia: Jurnal Psikologi*, 10(2), 175-183. <http://dx.doi.org/10.30872/psikostudia.v10i2.5480>
- Rusyda, H. M., & Abdul Aziz, S. F. (2021). The Development of Safety Behavior: A 30-Year Review. *International Journal of Academic Research in Economics and Management Sciences*, 10(1), 46-71. <https://doi.org/10.6007/ijarems/v10-i1/9212>
- Sharpe, L., Todd, Jemma., Scott, A., Gatzounis, R., Menzies, R. E., Meulders, A. (2022). Safety behaviors of safety precautions? The role of subtle avoidance in anxiety disorders in the context of chronic physical illness. *Clinical Psychology Review*, 92, 102126. <https://doi.org/10.1016/j.cpr.2022.102126>
- Toppazzini, M. A., & Wiener, K. K. K. (2017). Making workplaces safer: The influence of organisational climate and individual differences on safety behaviour. *Heliyon*, 3(6), e00334. <https://doi.org/10.1016/j.heliyon.2017.e00334>
- Uehli, K., Mehta, A. J., Miedinger, D., Hug, K., Schindler, C., Holsboer-Trachsler, E., Leuppi, J. D., & Künzli, N. (2014). Sleep problems and work injuries: A systematic review and meta-analysis. *Sleep Medicine Reviews*, 18(1), 61-73. <https://doi.org/10.1016/j.smr.2013.01.004>
- Vierendeels, G., Reniers, G., van Nunen, K., & Ponnet, K. (2018). An integrative

- conceptual framework for safety culture: The Egg Aggregated Model (TEAM) of safety culture. *Safety Science*, 103(December), 323–339. <https://doi.org/10.1016/j.ssci.2017.12.021>
- Xue, Y., Fan, Y., & Xie, X. (2020). Relation between senior managers' safety leadership and safety behavior in the Chinese petrochemical industry. *Journal of Loss Prevention in the Process Industries*, 65(February), 104142. <https://doi.org/10.1016/j.jlp.2020.104142>