Abstract

Vaccination in Cirapuhan Village, Selaawi District, Garut Regency is still not evenly distributed so it can hinder the realization of herd immunity in the context of the Covid-19 pandemic. In this study, researchers used a qualitative method with a descriptive approach with secondary and primary data sources. The results showed the implementation of the Garut Regent's Decree No. 443.2/KEP.1103.DINKES/202. The village task force always coordinated through the group social media, socialized, and mobilized the community of the Cirapuhan Village Covid-19 task force. However, the implementation of Garut Regent Decree No. 443.2/KEP.1103.DINKES/202 to achieve herd immunity has not been realized optimally because some people refuse to be vaccinated for fear of side effects and there is an assumption that people do not need vaccination. Based on the results, it can be concluded that the implementation of the Garut Regent's Decree Number 443.2/KEP.1103.DINKES/202 in Cirapuhan Village is still not optimal for the realization of Herd Immunity because the vaccination target in Cirapuhan Village is still many people who refuse to be vaccinated.

Key words: Implementation; Policy; Vaccines.

1. Introduction

Coronavirus Disease 2019 (Covid-19) is a virus that can cause tract infections such as lung infections. The Coronavirus has spread to 118 countries, including Indonesia, the Director General of the World Health Organization declared it a global pandemic on March 11, 2020 (Utomo, 2020). The Indonesian government and other countries are working to create and offer Covid-19 vaccines and to organize the immunization of their citizens to stop the spread of the virus. (Sehatnegriku Kemkes, 2021).

A vaccine is a microorganism antigen, a drug that disables or weakens the Covid-19 virus used in vaccines to create immunity against disease and reduce the likelihood of severe symptoms when the disease attacks. Vaccines are usually injected into the bodies of healthy individuals, and the vaccine has undergone several demanding tests throughout the production and distribution process of vaccines. (Sehatnegriku Kemkes, 2021). Covid-19 vaccination is given gradually starting January 13, 2021, at the state palace (Kemkes, 2021). To be able to take advantage of the vaccination, which has been campaigned for in Indonesia and has been declared legal by MUI (Sehatnegriku. Kemkes, 2021), in public health, the government has mandated citizens be
vaccinated to organize a uniformly improved immunity and build immunity against Covid-19 infectious diseases. The government has provided vaccines in every region. (Biofarma, 2021).

Following the provisions of Act No. 4 of 1984 on the outbreak of infectious diseases, the Government and the Ministers of Health are empowered and obliged to protect the population from the plague of disease outbreaks according to the regulations of the legislation. Based on this, the government issued a policy known as the Presidential Decree of the Republic of Indonesia No. 20/2021 on providing vaccines in the context of treating the COVID-19 pandemic. In enforcement of the presidential regulations, Menkes issued a Decree of the Minister of Health No. HK.01.07/MENKES/4638/2021 on the technical guidelines for the implementation of vaccination in the context of the treatment of the COVID-19 pandemic. The Government of Garut District issued Decision No. 443.2/KEP.1103.DINKES/2021 on setting targets for achieving Covid-19 vaccination to realize herd immunity based on the decree of the Minister of Health and presidential regulations. The provisions of this policy regulate how the vaccination program is carried out in Garut District.

In the implementation of vaccination in the Garut district, dose 1 reaches as much as 84% to 85%, which means dose 1 has met the target, but dose 2 in the Garut New district has reached 42% (Lufti, 2022). Selaawi district is one of 42 districts in Garut district, Selaawi district consists of 7 villages, namely Putrajawa, Cigawir, Selawi, Cirapuhan, Pelitaasih, Samida, and Mekarsari. Covid-19 vaccines are being implemented in every village. (Puskesmas Selaawi, 2021). The implementation of vaccination in Cirapuhan village of Selaawi district of Garut on April 21, 2022, will be shown in the following table.

<table>
<thead>
<tr>
<th>No</th>
<th>Nomor RW</th>
<th>Target</th>
<th>Total Vaccinated Covid-19</th>
<th>Total Vaccinated Covid-19</th>
<th>Target Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Age 12-59 years old)</td>
<td>(Age ≥ 60 years old)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Vaccinated</td>
<td>Dose 1</td>
<td>Dose 2</td>
</tr>
<tr>
<td>1</td>
<td>RW 01</td>
<td>672</td>
<td>4</td>
<td>162</td>
<td>440</td>
</tr>
<tr>
<td>2</td>
<td>RW 02</td>
<td>573</td>
<td>102</td>
<td>396</td>
<td>125</td>
</tr>
<tr>
<td>3</td>
<td>RW 03</td>
<td>399</td>
<td>142</td>
<td>212</td>
<td>37</td>
</tr>
<tr>
<td>4</td>
<td>RW 04</td>
<td>574</td>
<td>98</td>
<td>418</td>
<td>78</td>
</tr>
<tr>
<td>5</td>
<td>RW 05</td>
<td>541</td>
<td>96</td>
<td>384</td>
<td>64</td>
</tr>
<tr>
<td>6</td>
<td>RW 06</td>
<td>478</td>
<td>171</td>
<td>257</td>
<td>64</td>
</tr>
<tr>
<td>7</td>
<td>RW 07</td>
<td>649</td>
<td>251</td>
<td>317</td>
<td>81</td>
</tr>
<tr>
<td>8</td>
<td>RW 08</td>
<td>507</td>
<td>129</td>
<td>313</td>
<td>110</td>
</tr>
<tr>
<td>9</td>
<td>RW 09</td>
<td>683</td>
<td>180</td>
<td>421</td>
<td>110</td>
</tr>
<tr>
<td>10</td>
<td>RW 10</td>
<td>760</td>
<td>280</td>
<td>403</td>
<td>74</td>
</tr>
<tr>
<td>11</td>
<td>RW 11</td>
<td>430</td>
<td>139</td>
<td>248</td>
<td>49</td>
</tr>
<tr>
<td>12</td>
<td>RW 12</td>
<td>495</td>
<td>111</td>
<td>335</td>
<td>85</td>
</tr>
<tr>
<td>Total</td>
<td>6.761</td>
<td>1.861</td>
<td>4.144</td>
<td>1.029</td>
<td>348</td>
</tr>
</tbody>
</table>

*Source: Cirapuhan Village Data (2022).*

It can be seen that the implementation of vaccination in the village of Cirapuhan district of Selaawi district, Garut is still not complete, which can hinder the existence of Herd Immunity to combat the Covid-19 pandemic. The researchers chose the location of the research in Cirapuhan village of Selaawi district of Garut, because of the number of targets for vaccination in the village of Cirapuhan village, Selaawi district of Garut, many communities are not vaccinated, as well as a
large number of communities that refuse to get a second dose of the vaccine because the public felt enough of the first dose. In addition, the Cirapuhan village of the Selaawi district of Garut is vulnerable to social and economic aspects due to the inclusion of shopping centers in Selaawi districts, where most of the population works and is active in shopping centers. It’s going to potentially spread Covid-19 as it happens in the crowd.

Concerning the implementation of the policy of vaccination implementation, Edward III is of the view that there are four variables in the success of policy implementation: resources, disposal, communication, and bureaucratic structure. Based on the results of initial observations of researchers in the Cirapuhan village of Selaawi district of Garut there are several problems as follows.
1. People don't know and understand clearly about vaccines.
2. Implementors RT and RW as Covid-19 officers at the village level cannot clearly explain vaccination to the public because of the restrictions on vaccination.

Covid-19 Satgas Cirapuhan village in the Selaawi district of Garut has always made efforts to implement vaccines to realize herd immunity. One of the efforts carried out in the implementation of the Covid-19 vaccine is in the village of Cirapuhan every Tuesday from 8:30 to 1:00 p.m. In addition, Covid-19 police coordinate with RT and RW, who are surrounded by the village via WhatsApp, as well as work with public figures and religious figures to mobilize people to get vaccinated. Unfortunately, the limitations of insight from RW and RT affect public doubts about vaccination.

Thus, starting from these issues, researchers are interested in conducting research with the aim of 1) implementing the policy of Decision No. 443.2/KEP.1103.DINKES/2021 and 2) identifying obstacles to the implementation of Decision No. 443.2/KEP.1103.DINKES/2021 in Cirapuhan Village, Selaawi district of Garut.

2. Literature Review

Public policy can be defined as rules made by the government that influence the public and regulate the everyday lives of all citizens (Taufiqurakhman, 2014). According to Eston, public policy is an attempt to distribute the value of power to all societies whose existence is inevitable. In this situation, a society can only be influenced by a government that allocates funds from the government to society. (Solong & Asriadi, 2021). The critical phase of the public policy process is implementation, so in order for a policy or program to affect the desired outcome, it has to be practiced the effectiveness of the policy is ultimately determined at the level of implementation (Sandfort & Moulton, 2014).

Policy Implementation Success Factors

According to Edward III (in Tangkilisan, 2003) states that four variables can determine the success of implementation resources, communication, disposal, and bureaucratic structure. The four variables are related to each other and will be displayed as follows.
1. Communication, refers to the process by which policymakers inform those who implement policies. Three indicators to measure communication success are:
   1) Transmission, which is intended to provide information not only to the implementer of the program but to the relevant parties or target groups.
2) Transparency, which is intended to make information easy to understand and clear to prevent misleading policymakers, target groups, and other stakeholders.
3) Consistency, that is to say, expecting that the information delivered should be consistent and not conspicuous so as not to raise concerns for the policymakers, targets, or stakeholders.

2. Resource, i.e. the implementation of a policy is communicated clearly and consistently, but if the execution does not have the means to implement it the policy may be ineffective. Four indicators to be considered in the source are as follows.
1) Staff, employees, or staff are the primary resources in implementing the policy.
2) Information, there are two ways in which information policy can be implemented namely, first, policy enforcement requires knowledge about the best way to implement policy to meet policy objectives, and the second source of information is data information about government regulations.
3) Authority, legitimacy, or authority to carry out a politically elected policy is known as authority.
4) Facilities, are an important component of policy implementation.

3. Disposition, refers to the mentality or attitude of the executive. Executors must not only be aware of what needs to be done and have the necessary skills but also be willing to do so for the policy to be implemented successfully. Two indicators in the disposal are as follows.
1) Staffing bureaucracy, which determines the importance of policymakers forming or appointing staff who are willing to implement policies or have a high commitment to planned policies.
2) Incentives can affect how executives behave, and some expenditures may serve as a driving factor for good policy implementation. For example, when successful in implementing a policy of rewards or rewards obtained by the policymakers.

4. The bureaucratic structure. Implementation of policies can be hindered by weaknesses in bureaucratic structures, even when there are sufficient resources available and executives know what to do, but when bureaucratic structures are inadequate then implementation will not go well. In the bureaucratic structure, there are two indicators, as follows.
1) SOP, in policy implementation can hinder and can also improve performance to implement policy.
2) Fragmentation, that is, the spread of policy responsibilities into organizational units requiring coordination.

**Vaccination Policy**
In order to carry out vaccinations in the Garut district. Bupati Garut established Bupati Bupat Garut No. 443.2/KEP.1103-DINKES/2021, which contains instructions on the implementation of vaccination in the Garut district and is organized in every district and village that is in the Garut district. This decision contains the following.
1. The public health center's network and health care system facilitate regular immunizations.
2. Weekly vaccinations are carried out at the district level and in villages or other places.
3. Healthcare is the leading sector of the organization.
4. The health service prepares and proposes the logistical needs of vacancy implementation to the Ministry of Health.
5. The entire component/stakeholder has a duty to contribute to the efforts for Covid-19 vaccination.
6. A local facility and institutions in the Garut district to facilitate the assistance of vaccination organizers.
7. Covid-19 cases at the district, county, village, and fertility levels play a role in mobilizing target communities for the implementation of routine vaccination at healthcare facilities and mass vaccination in places already provided by the COVID-19 case at the fertility level.

The decision requires that vaccination be done on a routine basis at every public health center in the district and counts the number of communities that have received it using the daily public health center vaccination rate per capita. Each village is also vaccinated weekly, and the Covid-19 team is tasked with moving the community to be vaccinated at the facilities offered. Based on the theoretical study above, the researchers describe the framework of thinking as shown in Figure 1 below:

![Figure 1. Research Framework](image)

3. Methodology of Research

This research uses qualitative descriptive research methods. In general, qualitative descriptive research does not involve calculation or can be described as research that emphasizes the qualities inherent in the data source and seeks to address problems through the use of the information collected.

The main data sources of this research include the results of interviews with the parties involved in this research such as the target community of the vaccine, Covid-19, and the parties from Puskesmas Selaawi district of Garut. The secondary data obtained in this research is an official document of an institution or entity associated with this research and scientific journals relevant to the topic of this research.
The instrument in this research is the researcher himself because the researcher is the primary data collector. Another tool used is the interview guidelines that will be displayed in the following table.

<table>
<thead>
<tr>
<th>Purpose Research</th>
<th>Factor</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implementation of vaccination policy in the village of Cirapuhan, Selaawi district of Garut</td>
<td>Communication</td>
<td>a. How is the transmission of vaccination delivered to the public?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b. How clear is the delivery of vaccine-related information to the public?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c. Is the transmission of information consistent and immutability?</td>
</tr>
<tr>
<td>Resources</td>
<td></td>
<td>a. Is the executive staff adequate?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b. Has the implementor been given any information concerning the implementation of the vaccination policy?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c. Is the implementor given sufficient authority in implementing the policy?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>d. Is the facility implementing the vaccination policy adequate?</td>
</tr>
<tr>
<td>Disposition</td>
<td></td>
<td>a. Is the bureaucrat appointed willing to implement the policy?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b. Is there an incentive for policy implementers?</td>
</tr>
<tr>
<td>Bureaucratic Structure</td>
<td></td>
<td>a. Is there any SOP in the enforcement of the vaccination policy?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b. Is there a fragmentation or dispersion of responsibility in implementing vaccination policies?</td>
</tr>
<tr>
<td>Inhibitor factor</td>
<td></td>
<td>a. Lack of public knowledge and clear understanding about vaccines.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b. Lack of human resources in the implementation of vaccination socialization.</td>
</tr>
</tbody>
</table>

Source: processed from primary data

4. Result and Discussion

Implementation of Decision No. 443.2/KEP.1103.DINKES/2021 in Cirapuhan Village, Selaawi district of Garut.

Based on the results of the findings in the village of Cirapuhan district of Selaawi District of Garut carrying out the vaccination is not by the decision of the Garut district No.443.2/KEP.1103.DINKES/2021, where it was found that some citizens were unwilling to be vaccinated because of fear of the side effects of the vaccine, some people were also under control in health such as diseases especially the elderly so they could not be immunized, and there was also the assumption of some people feel healthy do not need a vaccine and some thought they did not need vaccination because they would not travel anywhere.

Satgas has been trying to socialize and move people to be vaccinated, but the socialization given by Satgas is not even only in the study environment so some citizens in RW 7 and RW 6 do not know about the benefits of vaccines and refuse to be divaccinated on grounds of fear of side effects, feeling healthy and the existence of a society affected by the issue of a vaccine. Besides, we can only inform citizens about vaccines as much as the general picture of the vaccine.
Implementation of Decision No. 443.2/KEP.1103.DINKES/202 in the Cirapuhan village of the Selaawi district of Garut is not in line with what was expected to be achieved by Herd Immunity and in the implementation of the program that has been established there is a refusal from the community to be vaccinated so Herd immunity has not been realized to the maximum. Therefore, the researchers will discuss and analyze based on observations and interviews about the policy implementation theory proposed by Edward III, where four measurable variables in implementation success will be discussed as follows.

1. Communication
Communication is a means of disseminating information so that those who have to implement a decision must understand what is going to be done which is the goal and goal, this is aimed at preventing policy implementation deviations such as information provided about vaccines by public health centers and Covid-19 vaccine officers to the public. The communication variable has three indicators that will be discussed with the findings of the researchers on the field related to the implementation of the policy which is as follows.

1) Transmission
The transmission of information about vaccination by Puskesmas to Covid-19 people was carried out through social media such as Instagram and WhatsApp groups. The next COVID-19 people in the village of Cirapuhan, Selaawi district of Garut were given vaccination-related information to the community of Selawi districts through the study of the community routine as well as through the voice speaker of the mosque at the time of the vaccination schedule in Selaawi district, Garut district. Based on the results of the triangulation of data sources using observations and interviews that are considered to have the same point of view to check the truth the informant, stated that the transmission of transmission about vaccination has indeed been done through social media WhatsApp and Instagram to Covid-19 in the village Cirapuhan Selawi district of Garut which is in RW 7 and RW 6 and has been dissocialized also to the public by RW 6 and Rw 7 through citizens' studies but transmission information about the vaccine is not even because not all communities are present in the study.

2) Clearness
The information on vaccines provided by RW 7 and RW 6 to citizens is not clear because of the lack of socialization and the delivery of vaccine information is only a general picture of vaccination, such as the use of the vaccine for the body as well as delivery of information about vaccine is not evenly so that the information provided by the vaccination to the public should not be clear.

3) Consistency
Inconsistent information about vaccines and vaccinations, the village of Cirapuhan, Selaawi district of Garut, conducted socialization as well as public movements were consistent in efforts to socialize and mobilize the community to be vaccinated through the voice of the mosque and the study of citizens for vaccination-related socialization.

2. Resources
Resources to execute policies need to be accompanied by adequate resources when implementers lack resources in executing policies, the implementation may not work
optimally. Resources in the implementation of Decision No. 443.2/KEP.1103.DINKES/202 in Cirapuhan village of Selaawi district of Garut is still inadequate, one of them is the resource members of the staff in expertise regarding the knowledge of vaccine implementation that will affect socialization and movement of the community so that the people understand and understand about the vaccine so that they are ready for vaccination. On the resource variable, four indicators will be discussed based on research findings in the field related to the policy implementation process.

1) Staff
In conducting socialization and public movement knowledge about vaccines is very necessary, given that there are still many unvaccinated communities because there is a part of the community that has not been vaccinated on grounds of fear of side effects especially in RW 7 and RW 6 but unfortunately the human resources expertise in the knowledge of the vaccine is insufficient so that the information about a vaccine that is socialized to the society is less than the maximum. This indirectly affects the inadequacy of Covid-19 in conducting socialization as well as mobilizing people to be ready for vaccination.

2) Information
To implement a policy, effective information is required. Policy enforcement requires two types of information, firstly, information on how to implement the policy to meet the policy objectives, and secondly, data information in the form of government regulations. From the point of view of information, the staff of the village of Cirapuhan Kecamatan Selaawi district of Garut already know what will be done, because before carrying out the vaccination in the village Cirapuhan Selaui district Covid-19 district has coordinated with the staff in connection with the vaccine schedules that have been set before, as well as to announce the vaccines schedule to the community to move the target community of vaccine so that it can be achieved the goals of the policy of vaccination.

3) Authority
The authority or power to carry out politically chosen policies is known as authority. This authority is crucial when a situation requires a decision to solve a problem. Therefore, policy implementation requires authority. The authority given by the government to the villages in dealing with people who do not want to be vaccinated is not fully implemented in the sanction of fines to people who refuse vaccination. However, the sanctions imposed were only the cessation of village administration services and the delay of social assistance. This resulted in non-compliance with the sanctions given to the people of the village of Cirapuhan who refused to be vaccinated so that the people who did not need the services of village administration and did not receive social assistance did not get sanctions from the village government, thus resulting in the presumption of the people that refused vaccination feel safe will not get the sanction because has hindered the realization of the herd immunity that has been established by the government.

4) Facilities
Facilities are an important component of policy implementation. Implementation of the policy will fail without the means and means that accompany it. Based on the facilities in implementing the vaccination policy in the Cirapuhan village of the Selaawi district of
Garut have been sufficient as means and means to carry out vaccination already supported. Furthermore, communication facilities, socialization, and announcement of vaccination schedules as well as vaccination facilities and facilities are adequate and already supporting the implementation of the policy.

3. Disposition
Disposition is the implementer's attitude in implementing the policy, if the implementer has a highly educated attitude to implement the policy then the implementation of the policy will work. Therefore, the head of the village council of Cirapuhan District of Selaawi district of Garut should choose members of the council who have high education in the implementation of socialization and movement of the community to the goal of policy. Two indicators in terms of disposition will be discussed as follows.

1) Staffing Bureaucracy
The bureaucratic staffing or recruitment of Covid-19 staff is based on volunteers who are willing to implement the government's decision to become members of the staff. The village government carried out the appointment of staff members based on volunteers to become staff members so that in implementing the vaccination policy staff members are willing to follow the policies made by the government and have a high education to be staff members in the implementation of vaccine policy.

2) Incentive
Policy implementers can be influenced by incentives and some expenditure can be a driving factor for them to implement policies properly. For example, when available and successful in executing a policy the executor gets a reward or reward. The incentive for the successful vaccination in the Cirapuhan village of Selaawi district of Garut is a charter of awards and announced with the most vaccination access in the village of Cirapuhan district Selaawi district Garut.

4. Bureaucratic Structure
Implementation of policies may still be hampered by deficiencies in bureaucratic structures. As for the indicators of the bureaucratic structure that can affect the implementation of the policy that will be discussed as follows.

1) SOP
The SOP given by the chief of the village council of Cirapuhan, Selawi district of Garut has supported the success of the implementation of the policy, SOP made by the village chief council is not independent of the SOP provided by the council or the decision of the Garut council. The SOPs made in the organizational structure of the village of Cirapuhan district of Selaawi district Garut are very supportive of socialization and mobilize the community to implement the vaccination policy.

2) Fragmentation
Fragmentation is the spread of policy responsibility into the organizational units of the village of Cirapuhan District of Selaawi district of Garut requiring long coordination. In general, the likelihood of a program decreases as the amount of coordination needed increases. There was no obstacle in the Fragmentation because the coordination was
carried out directly through the WhatsApp group of the Village Cirapuhan District of Selaawi district of Garut.

**Hindering Factor of Implementation of Decision No.443.2/KEP.1103.DINKES/2021 In the village of Cirapuhan**

Based on the results of observations and interviews in Cirapuhan Village, the implementation of the policy of Decision No. 443.2/KEP.1103.DINKES/202 for achieving Herd Immunity has not been realized optimally because some people refuse to be vaccinated for fear of side effects and there is an assumption that people do not need vaccination because they feel healthy and will not go anywhere. Therefore, the implementation of the vaccination policy in the village of Cirapuhan is not optimal for the realization of Herd Immunity.

One of the factors inhibiting the implementation of Decision No. 443.2/KEP.1103.DINKES/202 for achieving Herd Immunity is the socialization of vaccines to the society is not equal because only carried out in the community study environment so there is a part of the society does not understand the vaccine clearly and the information provided by the staff of the village of Cirapuhan District of Selawi district of Garut to the community about a vaccine that is in RW 7 and RW 6 is less optimal because it can not provide clear information to the public such as how to deal with the side effects of a vaccine, this is due to the resources of staff members of the staff of RW 7 and RW 6 have limited knowledge about the vaccination.

Another impediment to the achievement of Herd Immunity is the authority given by the government not to be fully implemented and the sanction of fines to people who refuse to be vaccinated. However, the sanctions imposed were only the cessation of village administration services and the delay of social assistance. This resulted in the non-compliance with the sanctions given to the farmers of the village Cirapuhan District of Selaawi district of Garut who refused to be vaccinated, so the people who did not need the village administration services and did not get social assistance do not get sanctions from the village government, thus resulting in the presumption of the people that refused the vaccination feel safe will not receive sanctions because it has hindered the existence of Herd Immunity that has been established by the government.

**5. Conclusion**

Based on the conclusions above, some suggestions are presented below:  
1. In the implementation of Decision No. 443.2/KEP.1103.DINKES/202 The village staff is always coordinated through the social media group WhatsApp as well as has done Socialization and movement of the community by the Covid-19 village staff Cirapuhan. Socialization is done at the time of the study of community routine and the movement of the community is made the announcement of the vaccination schedule through the loudspeaker of the mosque every Tuesday at 8:00 a.m. However, the implementation of Decision No. 443.2/KEP.1103.DINKES/202 for achieving Herd Immunity has not been realized optimally due to the existence of a community that refuses to be vaccinated for fear of side effects and there is an assumption that the public does not need vaccination because they feel healthy and will not travel anywhere. Therefore, implementation of Decision No. 443.2/KEP.1103.DINKES/202 in the Cirapuhan village of the Selaawi district of Garut is not optimal for the realization of Herd Immunity.
2. Inhibiting Factor of Implementation of Decision No. 443.2/KEP.1103.DINKES/202 in Cirapuhan Village, Selawi district, Garut.

1) Lack of uniformity of socialization carried out by RW 7 and RW 6 so that there are people who do not understand vaccines clearly.
2) The information provided by the village council of Cirapuhan to the public about vaccines that are in RW 7 and RW 6 is less optimal because it cannot provide clear information.
3) Resource staff members of RW 7 and RW 6 have limited knowledge of vaccines.
4) The authority granted by the government is not fully implemented about the sanction of fines to the people who refuse to be vaccinated.

REFERENCES


