Disaster Communications for Handling Coronavirus Disease 2019 (COVID-19) in Indonesia

Firdaus Noor; Fitria Ayuningtyas; Witanti Prihatiningsih

Assistant Professor, Faculty of Social and Political Sciences, Universitas Pembangunan Nasional Veteran Jakarta, Indonesia

Abstract

Communication is an important part of handling any disaster, including coronavirus disease 2019 (COVID-19) pandemic that has hit Indonesia and more than 190 other countries. In the context of the COVID-19 pandemic, communication is needed to build public trust and also to prevent mass hysteria. Two first cases of COVID-19 in Indonesia were announced on March 2, 2020. The news was announced directly by President of Republic of Indonesia, Joko Widodo with Minister of Health, Terawan Agus Putranto. This research explained various measures and policies of Indonesian Government in dealing with COVID-19 pandemic, especially in managing the flow of information and keeping a good communication to the public in order to maintain transparency and prevent mass hysteria. This study was a descriptive, exploratory analysis of all cases of COVID-19 diagnosed nationwide in Indonesia. This study contributes that communication during and after a disaster is an important component in response and recovery. Communication can connect patients affected by COVID-19, families, and the community with medical staff, support systems, and other family members. The availability of reliable information and communication systems is also important in disaster management. The government must be able to ensure that people can easily get information about the development of COVID-19. This can help strengthen the resilience of the community in facing disasters and undergo a recovery period afterwards.

Keywords: *Disaster; Communication; COVID-19; Handling; Indonesia*

Introduction

In a pandemic situation, communication is the most important part in dealing with a pandemic threat. Public trust in the Indonesian government in preventing and controlling the spread of COVID-19 needs to be built and maintained. Intensive government communication and a transparent information service system will provide tranquility and increase public confidence in government performance in efforts to prevent the spread of COVID-19.

The role of disaster communication determines the success of the government to provide information for public safety and overcome disasters that occur. This study contributes that optimizing disaster communication in an integrated manner is important in disaster management. A pandemic is a

situation characterized by high levels of uncertainty, not only in epidemiological terms but also rhetorically, that is, related to the effects of communication (Burton-Jeangros, 2016).

In handling disease outbreaks in the world, Anthony de Mello once reminded that the number of victims could be to five times, if there is fear when an outbreak occurs. A thousand people fell victim to illness, while four thousand people fell victim to panic (Anthony de Mello, 2012).

Reflecting on this matter, relating to COVID-19 handling communication refer to efforts focused on health diplomacy, which is a process of involving, motivating and communicating among many parties to develop policies and programs that produce sustainable health (Ratzan, 2013).

The ongoing pandemic of Coronavirus Disease 2019 or called as COVID-19 is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The outbreak was first identified in Wuhan, Hubei, China, in December 2019 and recognized as a pandemic by the World Health Organization (WHO) on March 12, 2020, as the first known pandemic that may be controlled. As of March 16, 2020, over 173,000 cases of COVID-19 have been reported in more than 150 countries and territories, with major outbreaks in mainland China, Europe, Iran and South Korea, among others. More than 6,600 people have died from the disease and over 77,000 have recovered.

The virus primarily spreads between people in a way similar to influenza, via respiratory droplets from coughing or sneezing. The time between exposure and symptom onset is typically five days, but may range from two to fourteen days. Symptoms are most often fever, dry cough and shortness of breath. Complications may include pneumonia and acute respiratory distress syndrome. There is no vaccine or specific antiviral treatment, but research is ongoing. Efforts are aimed at managing symptoms and supportive therapy. Recommended preventive measures include hand washing, covering the mouth when coughing, maintaining distance from other people (particularly those who are unwell), and monitoring and self-isolation for fourteen days for people who suspect they are infected. As a disease that can cause plague and efforts countermeasures, COVID-19 has been determined as a disease potential outbreaks in Indonesia, so steps need to be taken countermeasures including communication aspects of handling.

Two first cases of COVID-19 in Indonesia were announced on March 2, 2020. The news was announced directly by President of Republic of Indonesia, Joko Widodo with Minister of Health, Terawan Agus Putranto. The only source of information at that time came from the presidential office and the Indonesian Health Ministry. However, when the number of cases increased in several areas, mayors and governors also issued statements, which often contradicting with the official data held by presidential office and Minister of Health the Republic of Indonesia (Minister of Health, Coronavirus Disease 2019 (COVID-19) Handling, 2020).

President, Jokowi then put together a task force, so that all information related to the COVID-19 pandemic only comes from one source. The formation of this task force is one form of disaster communication management. The presence of the task force also shows government's readiness and seriousness in handling the COVID-19 pandemic. Perception about readiness and seriousness the government needs to be conveyed to the public through an explanation comprehensive and periodic, by explaining what has and will conducted by the government (Minister of Health, Pedoman Penanganan Cepat Medis dan Kesehatan Masyarakat COVID-19 di Indonesia, 2020).

The COVID-19 task force also works as a regulator of information traffic. The task force must be able to ensure that the information received by the public is accurate and reliable. If misinformation or hoaxes appears, the task force must quickly respond. The management of information among various stakeholders in natural and human-induced disasters is fundamental to the mitigation and effective disaster-relieve operations.

Communication during and immediately after a disaster situation is also an important component of response and recovery, that connects affected people, families, and communities with first responders, support systems, and other family members. Reliable and accessible communication and information systems also are key to a community's resilience (Adila, Dewi, & Tamitiadini, 2019).

This research will explain various measures and policies of Indonesian Government in dealing with COVID-19 pandemic, especially in managing the flow of information and keeping a good communication to the public in order to maintain transparency and prevent mass hysteria.

Literature Review
Disaster Communication

Research on disaster communication is researched by Matthew Collins, Karen Neville, William Hynes & Martina Madden (Collins, Neville, Hynes, & Madden, 2016) which provides recommendations that in the face of disasters, crisis communication must be informative, honest, and not cause panic. The role of institutions and the media is expected to provide information for the best decision making for communities affected by disasters. The role of communication in times of crisis will determine the effort to save and reduce disaster risk. This study refers to the theory of crisis communication from Sellnow Timothy L & Matthew W. Seeger (Sellnow & Seeger, 2013) which says that crisis communication is an ongoing process to create shared meaning among groups, communities, individuals and institutions, in the ecological context of the crisis, for the purpose of preparing, reducing, limiting, responding to threats, and endangering (Lestari, Ritonga, Ruliana, & Barus, 2020).

One of a crucial challenge in responding to natural and man-made disasters is communication. Communication during and in the aftermath of disaster is a vital aspect of response and recovery initiatives. Through communication disaster victims connect with first responders, support systems and other family members. As such, having a dependable and accessible communication and information systems also are vital to a community's resilience (The Associated Press-NORC Center for Public Affairs Research, 2013). This importance was clearly highlighted in disasters such as Hurricane Katrina and the 9/11 terrorist attacks (Dwyer, 2006; Lueck 2005; Thompson 2005) (Moorthy, Benny, & Gill, 2018).

Coronavirus Disease 2019 (COVID-19)

The outbreak of Coronavirus Disease 2019, called as COVID 19 was first identified in Wuhan, Hubei, China, in December 2019 and recognized as a pandemic by the World Health Organization (WHO) on March 12, 2020, as the first known pandemic that may be controlled (Minister of Health, Coronavirus Disease 2019 (COVID-19) Handling, 2020).

Methodology
Study Design

This study was a descriptive, exploratory analysis of all cases of COVID-19 diagnosed nationwide in **Indonesia**. Study designs are not administratively feasible, because they would be too expensive or take too long to execute. Throughout the book, therefore, we'll deal with workable compromises (Babbie, 2011). A cross-sectional study involves observations of a sample, or cross section, of a population or phenomenon that are made at one point in time. Exploratory and descriptive studies are often cross-sectional (Babbie, 2011).

Exploratory studies are most typically done for three purposes: (1) to satisfy the researcher's curiosity and desire for better understanding, (2) to test the feasibility of undertaking a more extensive study, and (3) to develop the methods to be employed in any subsequent study (Babbie, 2011).

Data Source

By categorizing COVID-19 as a Class B notifiable disease, the authors received many information. Entry of each case into the system was performed by local epidemiologists and public health workers who investigated and collected information on possible exposures. All case records contain national identification numbers, and therefore, all cases have records in the system and no records are duplicated. All data contained in all COVID-19 case records in the Infectious Disease Information System through the end of March 16, 2020 were extracted from the system as a single dataset and were then stripped of all personal identifying information. No sampling was done to achieve a predetermined study size and no eligibility criteria were used—all cases were included. Mostly valid information about COVID-19 we received from covid19.go.id, this website updated every day.

Data Analysis

Data analysis as per Patton is processing to arrange about data sequence, organize to some pattern, category and the discussion unit basic as stated by Moleong (2004) (Ayuningtyas & Uljanatunnisa, 2019). Data analysis process started with all existing data from various sources, such as in-depth interview, field observation, and literature study. In the qualitative method, data can be collected from various sources by using various data collection technique (triangulation data). Miles and Huberman (1984) stated that activity to data analysis there are three steps namely data reduction, data display and conclusion in Sugiyono (2008) (Ayuningtyas & Uljanatunnisa, 2019).
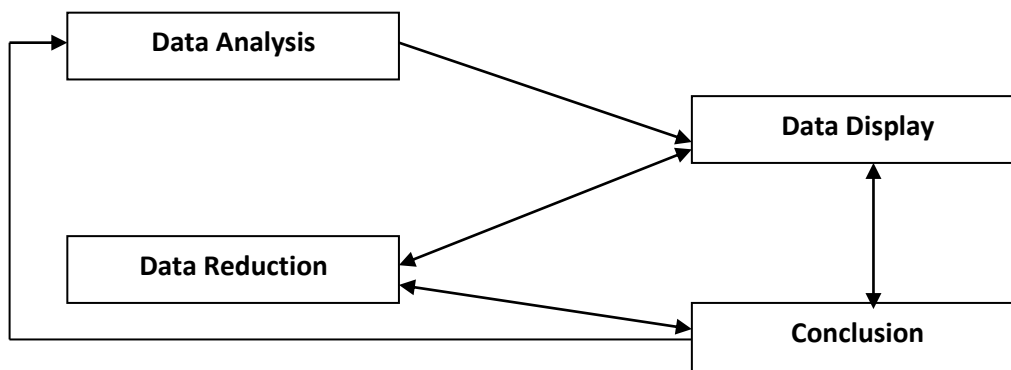

Figure 1 Triangulation Data
Source: (Ayuningtyas & Uljanatunnisa, 2019)

Data Validity

The data validity method is used to test whether a research result is valid or not and the data obtained and reported by the researcher with what is happening in the field. The data validity method used by researchers is as follows:

1. Perseverance of Observation

This method is to investigate characteristics and elements in the situation that are very relevant to problems or issues investigated.

2. Adequacy of References

This method is to collect as complete as possible data, excluding written data, such as video recordings, sounds, photo, etc.

3. Member Checking

This method is to recheck the analysis results of the researchers with other parties involving in this research, such as informants or research subjects, or persons who helped in the research process.

Results

Indonesian government policy continues to race to prevent the spread of COVID-19. Laws and public policies regarding COVID-19 were made and put into effect, including the establishment of the COVID-19 service center and the national task force for COVID-19.

The Government of Indonesia established the Task Force for the Acceleration of COVID-19 handling on March 13, 2020 based on Presidential Decree (KEPPRES) No. 7 of 2020. The Task Force was formed two days after the World Health Organization (WHO) declared COVID-19 as a pandemic, and 11 days after Indonesia confirmed two prime cases of COVID-19 infection. At the end of March 2020, almost a month after the first two cases of COVID-19 in Indonesia were discovered, the government issued Presidential Decree (KEPPRES) No. 11 of 2020 concerning Determination of COVID-19 Public Health Emergency. At the same time, Government Regulation No. 21 of 2020 concerning Large-scale Social Limits (PSBB) was issued in the framework of the Acceleration of COVID-19 Handling.

The Task Force for the Acceleration of Handling COVID-19 involved many government institutions and institutions, with Chairman of the National Disaster Management Agency (BNPB), Doni Monardo as the chief executive. BNPB is the leading agency because the COVID-19 outbreak in Indonesia is classified as a national disaster. Not only at the national level, the COVID-19 task force was also formed at the provincial and district / city levels. For the provincial and district / city level, the selection of task force personnel is determined solely by the relevant local government. The task force at the regional level also has the authority to determine its own policies around the handling of COVID-19, although it must remain in line with the task force at the national level.

The government has also appointed a spokesman for Achmad Yurianto who informed the progress of the spread of COVID-19 through one door regularly and periodically twice a day.

The establishment of this task force is aimed at making the direction and how to deal with the COVID-19 outbreak clearer, more focused, and well informed to the public. Coordination handling of COVID-19 between ministries, institutions, as well as central and regional governments has also become more focused. Directly responsible to the president, the task force at the national and regional level functions to coordinate and synergize the steps of all relevant institutions in dealing with the COVID-19 issue. Another function of the task force is to convey a variety of information related to COVID-19 to the public, such as data on the number of infections, deaths, and patients who have been declared cured. The task force also provided educational information aimed at raising public awareness about the COVID-19 threat.

The development of daily information about COVID-19 was conveyed by the spokesperson for the Task Force for the Acceleration of Handling of COVID-19, Ahmad Yurianto through a press conference broadcast in conventional and online media. Aside from going through press conferences, the task force also presents a variety of information and data written on the website covid19.go.id. For regional task forces, the information submitted is specific to the area coverage only. Covid19.go.id is a special website for the government as an online container that can be accessed by all people of the country. This site presents seven main channels, namely News, Distribution, Protocol, Education, Questions and Answers, Agenda and Hoax Buster. The "News" channel presents selected news about COVID-19 from a number of sources, notably BNPB and the presidentri.go.id site. While the "Distribution" channel provides detailed information about the distribution of COVID-19 in Indonesia, complete with data on the number of cases, deaths and patients recovered for each province. This data is updated every day.

"**Protocol**" conveys information on what legal products have been made by the central and regional governments regarding the handling of COVID-19. These legal products include KEPPRES, Governor Decrees, Ministerial Regulations, Circular Letters, and others. While the "**Education**" channel contains a variety of educational materials to raise awareness and awareness of citizens in facing the dangers of COVID-19. This channel is one of the government's efforts to educate the public that COVID-19 is a serious problem that requires cooperation from all elements of the nation. Similar to "Education," the "**Question and Answer**" channel also provides educational information about general questions that may be asked by the public. This channel is not interactive, but only presents a row of answers about COVID-19.

"Agenda" is a channel intended for media crews. This channel contains information about the time and place of the agenda for COVID-19, such as a press conference regarding the delivery of personal protective equipment (PPE) assistance.

Of all the channels, "Hoax Buster" is more highlighted with a red column. As the name implies, this channel presents clarification of the government about hoax news circulating in the community. This channel aims to ensure that the public is not fooled by the circulation of many false news about COVID-19 that has the potential to cause a number of adverse effects in the war against the COVID-19 pandemic. So in general this portal contains at least three important things that must be known to the public, namely how to reduce the risk of transmission, the right and right way when sick, and statistical data on the number of positive cases of COVID-19 that are updated in real time. In this portal there are also Hoax Buster canals. This channel can be used as a reference to find out the truth of information.

Figure 2 Information of COVID-19 in Indonesia (Data per April 21, 2020)
Source: (https://www.covid19.go.id/)

In a study of epidemics risk communication, Claudine found that Pandemic is unpredictable and prone to deliver surprises (Burton-Jeangros, 2016). The outbreak of the COVID-19 outbreak has caused anxiety and panic, including in Indonesia. There was also noise because the incompetent helped enliven the virtual universe. Instead of getting credible explanations and suggestions from experts, the public is exposed to a variety of misleading information. The statements of officials who are confused create the impression of lack of seriousness (Ihsanuddin, 2020), poor empathy, and a sense of crisis, which is actually counterproductive to efforts to stop the spread of the virus.

In Indonesia, the frequency of hoaxes related to COVID-19 continued to increase from January to March 2020. In January there were 40 cases of hoax, February 98 cases of hoax, and March jumped to 246 cases of hoax (Yuniarto, Upaya Melawan Hoaks COVID-19, 2020).

In response, one of the instructions given by President Joko Widodo was that the government was serious, the government was ready and the government was able to handle this outbreak. According to a compass research and development survey, President Joko Widodo is the most quoted newsmaker in six national newspapers related to COVID-19 (Yuniarto, COVID-19 dalam Bingkai Surat Kabar, 2020).

The government also implemented a number of protocols adopted from WHO, such as establishing call centers at BNPB (117), Ministry of Health (119 ext 9), and other information channels (for example, DKI 112, *Gojek-Halodoc* telemedicine, etc.) (Minister of Health, Pedoman Penanganan Cepat Medis dan Kesehatan Masyarakat COVID-19 di Indonesia, 2020). The main narratives in communicating communications by the Central Government and Regional Governments to the public are: "Serious Government, Ready and Able to Handle COVID-19", "Communities Remain Calm and Vigilant", "COVID-19 Can Be Healed", # LAWANCOVID19.

Wrong One important point of concern regarding communication in the COVID-19 disaster was the issue of uncertainty. According to Frank Dance (Littlejohn & Foss, 2009), one important aspect in communication is the concept of reducing uncertainty. Communication itself arises because of the need to reduce uncertainty. If you look back at the long history of epidemics in the world, believing in speculation and narrative is a setback in the way humans deal with phenomena. The public on social media has been observed to be busy debating about the existence of the figures behind the efforts to contain COVID-19 rather than the technical steps of health mitigation that need to be done.

The importance of information for the community about disasters was also stated by Coppola and Malone (Moorthy, Benny, & Gill, 2018). According to the concept, the ultimate goal of disaster

management is early warning for the community. Early warning makes the public more alert and the availability of official information to then take appropriate action. Messages about early warning are built to transmit messages to all parties wherever and whenever. By using various systems, and collaboration between the communities, the government, non-government organizations, the private sector will improve the ability of the communication system to achieve the target audience.

It can be recommended in this study several things regarding disaster communication in response to the COVID-19 phenomenon in Indonesia. First, communication plays a role in reducing the uncertainty that characterizes a disaster. Second, communication becomes the main activity that influences disaster mitigation for early warning and education for the community and is able to create a calm and understanding community in what they need to do in their immediate environment.

Finally, the success of disaster mitigation is influenced by communication systems in collaboration between the community, non-governmental government institutions, and the private sector. Public perception that the state is present and responsive in controlling the crisis situation that occurs.

This result similar with research on disaster communication which provides recommendations that in the face of disasters, crisis communication must be informative, honest, and not cause panic (Lestari, Ritonga, Ruliana, & Barus, 2020). Communication during and after a disaster is an important component in response and recovery. Communication can connect patients affected by COVID-19, families, and the community with medical staff, support systems, and other family members. The availability of reliable information and communication systems is also important in disaster management. The government must be able to ensure that people can easily get information about the development of COVID-19. This can help strengthen the resilience of the community in facing disasters and undergo a recovery period afterwards.
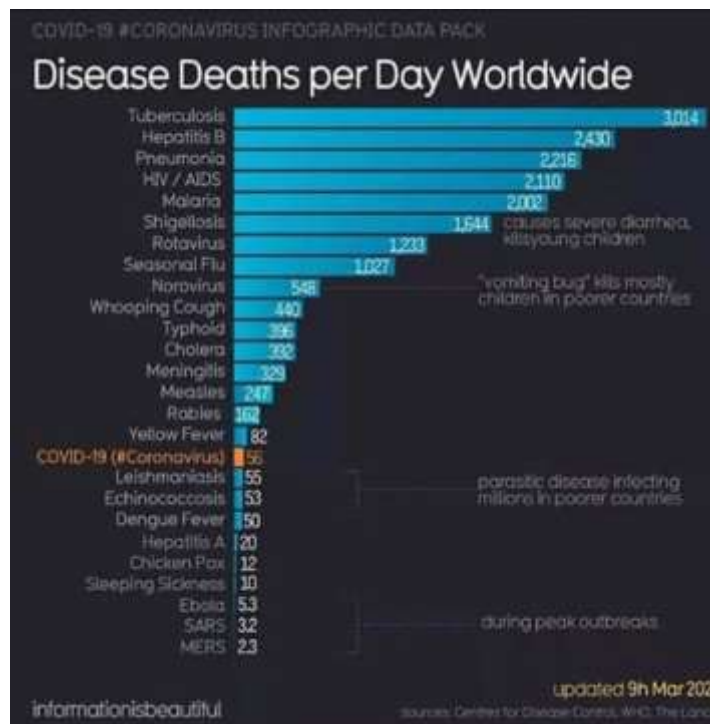

Figure 3 Disease deaths per day worldwide
Source: Minister of Health, Coronavirus Disease 2019 (COVID-19) Handling, 2020

Apart from information above, WHO has stated that the risk of spread from someone without symptoms is "*very low*". If someone does have beginning symptoms and a mild cough, there is a risk of transmission. Risk of severe disease is high for those over 60 years old and those with pre-existing conditions such as diabetes and heart disease, as per below figure 3, fatality rate by age of 80+ is 14,8%, a big number compared to another rate by age.
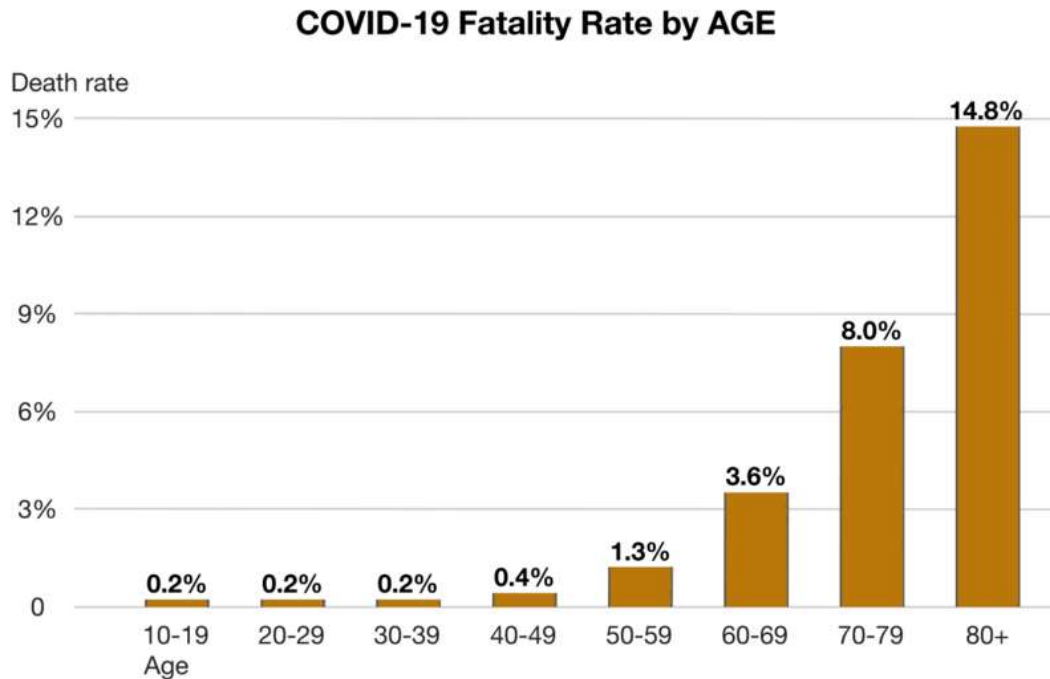

Figure 4 COVID-19 fatality rate by age
Source: (Minister of Health, Coronavirus Disease 2019 (COVID-19) Handling, 2020)

Conclusion

Communication is one of the most important parts in handling any disaster, including the corona virus pandemic (COVID-19) which has hit more than 100 countries including Indonesia. In the context of the COVID-19 pandemic, good communication is needed to build public trust and also prevent panic among the community. The channel of good communication must be intertwined between internal government through a central command, both directly led by President of Republic of Indonesia, Joko Widodo and figures appointed to lead the task force to handle COVID-19. In handling disasters like this, all levels of central and regional governments must move in harmony. Well-organized information management is fundamental in the mitigation and operation of a COVID-19 pandemic.

While communicating with the community, the government must be able to show that all of its staff are serious, ready, and able to handle the COVID-19 pandemic. This readiness and seriousness needs to be shown to the public through a comprehensive and periodic presentation, explaining what the government has and will do in the future. Communication during and after a disaster is an important component in response and recovery. Communication can connect patients affected by COVID-19, families, and the community with medical staff, support systems, and other family members.

The availability of reliable information and communication systems is also important in disaster management. The government must be able to ensure that people can easily get information about the development of COVID-19. This can help strengthen the resilience of the community in facing disasters and undergo a recovery period afterwards.

Acknowledgments

References

Adila, I., Dewi, W. W., & Tamitiadini, D. (2019). Resolving Health Communication Problem On Disaster Risk Through Community Relationship. *Jurnal Kajian, Ruang Sosial-Budaya, 1*(2), 5-23.

Anthony de Mello, S. J. (2012). *Heart of the Enlightened: A Book of Story Meditations.* United States: The Crown Publishing Group.

Ayuningtyas, F., & Uljanatunnisa. (2019). A Study of the House of Raminten as a Modern Style of Angkringan Traditional. *Pertanika Journal Social Sciences and Humaniora, 27*(2), 1325-1337.

Babbie, E. (2011). *The Basics of Social Research, Fifth Edition.* USA: Wadsworth.

Burton-Jeangros, C. (2016). *Epidemics and Risk Communication*. United Kingdom: Taylor & Francis. Retrieved March 30, 2020, from https://www.book2look.com/book/6PwEnGPb1O.

https://www.covid19.go.id/. (2020). Retrieved April 20, 2020 from https://www.covid19.go.id.

Ihsanuddin. (2020, April 02). *Mensesneg Revisi Pernyataan Fadjroel soal Jokowi Bolehkan Mudik*. Retrieved from https://nasional.kompas.com/read/2020/04/02/18563871/mensesneg-revisi-pernyataan-fadjroel-soal-jokowi-bolehkan-mudik.

Lestari, P., Ritonga, R., Ruliana, P., & Barus, C. (2020). Disaster Communication Uses Field Training Exercise Simulation as an. *Jurnal Komunikasi: Malaysia Journal of Communication, 36*(1), 166-186.

Littlejohn, S., & Foss, K. (2009). *Encyclopedia of Communication Theory.* USA: SAGE.

Minister of Health the Republic of Indonesia. (2020). *Coronavirus Disease 2019 (COVID-19) Handling.* Jakarta: Minister of Health, Republic of Indonesia.

Minister of Health the Republic of Indonesia. (2020). *Pedoman Penanganan Cepat Medis dan Kesehatan Masyarakat COVID-19 di Indonesia.* Jakarta: Minister of Health, Republic of Indonesia.

Moorthy, R., Benny, G., & Gill, S. (2018). Disaster Communication in Managing Vulnerabilitie. *Jurnal Komunikasi: Malaysia Journal of Communication, 34*(2), 55-65.

Ratzan, S. C. (2013). "They Say" the Next Big Pandemic Is Near: Are We Prepared? *Journal of Health Communication-International Perspective, 18*(7), 757-759. doi:https://doi.org/10.1080/1081073 0.2013.809300.

Yuniarto, T. (2020, March 20). *COVID-19 dalam Bingkai Surat Kabar*. Retrieved from https://kompas.id/baca/riset/2020/03/20/covid-19-dalam-bingkai-surat-kabar.

Yuniarto, T. (2020, March 31). *Upaya Melawan Hoaks COVID-19*. Retrieved from https://kompas.id/ baca/riset/2020/03/31/upaya-melawan-hoaks-covid-19/.