

Chapter 5

Health Communication Strategies: Crisis Management and Infodemic During COVID-19

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ABSTRACT

This chapter focuses on the crisis and risk management strategies as parts of health communication processes applied during the COVID-19 era. For the literature part, risk and crisis communication, social media, information disorders, and infodemic are used, and for the analysis, crisis communication strategies of the Ministry of Health in the Republic of Turkey are examined. The findings reveal that the ministry takes several precautions in order to prevent the spread of the virus (like lockdowns, enclosures, strengthening health services, etc.) and to inform the public regularly via conventional and social media.

INTRODUCTION

Health communication is defined as the art and technique of informing, influencing, and motivating people about important health problems at individual, institutional and social levels (İmİK Tanyıldızı, 2020; Avcı & Avşar, 2014). According to another definition, health communication means “the study and use of communication strategies to inform and influence individual and community decisions that enhance health” (European Centre for Disease Prevention and Control [ECDC], 2008). Working in cooperation with disciplines such as communication, sociology, psychology, anthropology, economics, and business (Çınarlı 2008), health communication deals with issues such as medical decision making, health literacy, patient-centered communication, and risk communication (Oh et al., 2013).

The main objectives of health communication include (a) informing the public about diseases and health problems, (b) raising their awareness, (c) preventing diseases, (c) improving health and quality of life at both the individual and community level (Mahmud et al., 2013; Mendi, 2015; Redmond et

DOI: 10.4018/978-1-7998-8674-7.ch005

al., 2010), (d) managing the communication processes among health workers, managers, and patients, (e) ensuring that the public perceives the information given by the health institutions correctly, (f) determining different understandings and beliefs in different cultures regarding health and illness and correcting misunderstandings if there are (Mendi, 2015), (g) creating health campaigns and messages to change behaviour and (h) preparing and implementing the risk communication strategies (ECDC, 2008). To manage these objectives a proper health communication process must be prepared. For this, the messages must be trustable, accessible, and understandable by everyone (Öztürk & Öymen, 2013; Bernhardt, 2004). With the technological advancements in communication, social media is more likely to be used in health communication. Although it offers many advantages such as speed, synchrony, participation, interaction, timelessness, and spacelessness, it also poses a serious disadvantage which is the rapid spread of misinformation or disinformation. To eliminate this disadvantage, the authorities should warn the public against mis/disinformation regularly and raise public awareness about the spread and transmission patterns of the related diseases.

When a new disease spreads worldwide it is called a pandemic (World Health Organisation [WHO], 2010). It has been declared a pandemic many times throughout the history of human civilization. The best known of these include plague (also called as black death), cholera, influenza, H1N1, polio, Zika, and Ebola (Baygül Özpınar & Aydın, 2020; İmik Tanyıldızı, 2020; Chakraborty & Maity, 2020). Today the world is facing a new pandemic threat, called coronavirus. Coronaviruses, namely SARS, MERS-CoV, and SARS-CoV-2, belong to a large diverse family of viruses. The word COVID-19 (the more common name for SARS-CoV-2) was created by combining the abbreviations of the words “corona” (CO), “virus” (VI), and “disease” (D) plus the year of its outbreak (2019) (Chakraborty & Maity, 2020). The first case of the outbreak of COVID-19 was reported in Wuhan, China on December 31, 2019 (Pulido et al., 2020) and within almost three months it spread globally thus on March 11, 2020 the World Health Organization (WHO) declared the outbreak the pandemic COVID-19 (WHO, 2020a).

Since COVID-19 - which shows symptomatic or asymptomatic features - can be easily transmitted through breathing or by contact, many areas of daily life and global public health have been affected severely, many individuals have lost their health or lives and many significant changes have emerged in everyday practices. In this context, (a) many countries have closed their borders, (b) major international flights and transnational transportation activities have been suspended, (c) universities and schools have suspended face to face education, (d) some workplaces have closed, some have suspended their activities and (e) lockdowns have been declared in many countries (Baygül Özpınar & Aydın, 2020; Chakraborty & Maity, 2020). Apart from these; since sectors such as food, agriculture, petroleum, oil, education, media, entertainment, real estate, housing, hospitality, tourism, aviation, and industries such as manufacturing, finance, sports, healthcare, pharmaceutical (Nicola et al., 2020) were adversely affected by the COVID-19, many crises have inevitably occurred in the global economy. Moreover, the measures (like social distancing and lockdowns) to prevent the spread of COVID-19 have triggered panic, anxiety, and uncertainty among individuals (Ataguba & Ataguba, 2020; Özyurt Serim, 2020) and these feelings have led to an increase in domestic violence, including emotional, physical or sexual abuse (Nicola et al., 2020). To compensate for these negativities caused by the pandemic and to prevent the occurrence of greater damages, the authorities need to implement the risk and crisis communication processes efficiently.

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