



ISSN Print: 2394-7500
ISSN Online: 2394-5869
Impact Factor: 5.2
IJAR 2020; 6(10): 272-274
www.allresearchjournal.com
Received: 10-08-2020
Accepted: 14-09-2020

Dr. Mohammad Shameer
Potti Sreeramulu Telugu
University, Hyderabad,
Telangana, India

Health communication during COVID-19 in India

Dr. Mohammad Shameer

Abstract

The outbreak of pandemic created panic among public. No one knows how to tackle the pandemic. Government used popular words like Mahammar (Pandemic), folded hands, Laxmanrekha, Social distance, pandemic warrior, Lockdown 1.0 and unlock down 1.0 while dealing with the crisis. Initially, Government of India imposed lockdown for 21 days and later extended. Red zone, orange and green zone words coined to curb pandemic. The term infodemic has been coined to outline the perils of misinformation phenomena during the management of virus outbreaks, since it could even speed up the epidemic process by influencing and fragmenting social response.

Keywords: Health communication, popular words, health strategy, pandemic, lockdown

Introduction

The unprecedented global outburst of the COVID-19 (CV) pandemic has created a terrifying situation of panic all over the world. As the disease has spread in India, these communication principles appear to have fallen by the wayside. Since January, when COVID-19 was first recognised as a global threat, the Indian government has communicated with the public in two ways. Two televised addresses Prime Minister Narendra Modi made to the nation towards the end of March, when case numbers were hiking and it was flattering increasingly evident that India was facing a potential outburst in case numbers. In his first address on 19 March 2020, Modi called for a 14 h 'Janata' or people's curfew from 7 am to 9 pm when people were asked to stay at home, and all forms of transportation were shut down, as were shops. Prime Minister Modi had asked people to come out on their balconies and clap loudly with whatever objects were at hand to show appreciation for health care workers. A theory that the real reason for clapping at 5 pm was to release sound energy that would destroy the virus also circulated widely on social media. But from a public health perspective, it was a failed attempt at social distancing. This one-day curfew was followed up three days later on 24 March 2020 with a televised address at 8 pm announcing a 21-day nationwide lockdown that was to commence at midnight, four hours later (Thomas 2020) ^[13]. On 5th April Modi appealed to people to turn off all the lights and lit diyas, stand for common purpose to fight against corona and experience superpower of light.

Objective

To study the health communication dissemination during covid-19 and to find out effectiveness of health communication in India in generating awareness during pandemic.

Methodology

Data for the present review paper were drawn from original articles available on various National Newspapers and 'Google'/'Google scholar' search engine using keywords such as "Health communication, Pandemic controlling strategy in India".

Communication strategy followed during pandemic outbreak

It was started with risk perception and communication methods to utilisation to highlight issue. The trust and credibility in the message should be the top priority. Analysed the responses of beginning of an outbreak like this never anticipated. Work delegation and determining the roles and responsibilities of entrusted persons who were authorised to monitor and disseminate information about pandemic. Generating awareness about prevalent situation. solidify the communication strategy. Effective messaging during outbreak

Corresponding Author:
Dr. Mohammad Shameer
Potti Sreeramulu Telugu
University, Hyderabad,
Telangana, India

responses. The ways to working with new media control. Avoided communication that may complicate situation. First level we experienced lockdown. we all know that how India behaved on the first day of Janata curfew. The lockdown was preferred when the number of confirmed positive coronavirus cases in India was approximately 500. Observers stated that the lockdown had slowed the growth rate of the pandemic by 6 April to a rate of doubling every six days, and by 18 April, to a rate of doubling every eight days (Sandhya & Gupta) [1]. There was no alternative rather than to impose complete lockdown. Measure attitude during first lockdown, third and fourth.

As the end of the first lockdown phase loom, state governments and other advisory committees suggested extending the lockdown. The governments of Odisha and Punjab extended the state lockdowns to 1 May (India Today) and Maharashtra, Karnataka, West Bengal and Telangana followed the same (Times of India). On 14 April, Prime Minister Narendra Modi extended the nationwide lockdown up to 3 May, with a provisional relaxation after 20 April for the regions where the spread of virus was minimal. (Live Mint). On 1 May, nationwide lockdown further extended by two weeks until 17 May. Based on the spread of the virus, the Government divided all the districts into three zones—green (No cases), red (More cases) and orange (Less cases) — with relaxations applied accordingly. On May, unlock down 1.0 lifted restrictions but lockdown extended till 30 June for the containment zones. The second phase of unlock, Unlock 2.0, was declared for the period of 1 to 31 July, with more easiness in restrictions.

Trust and credibility

Audiences including journalists will perceive a messenger as a trusted one. Mr. Lav Agarwal, Joint Secretary, Ministry of Health and Family Welfare, daily brief about COVID-19 status in India to journalists and try to remove misconception and misinformation on COVID-19. Due to fear, frustration, panic, anger, confusion. Empathy has taken centre stage to understand the COVID-affected patients. Our way of life has been impacted in ways we never anticipated or imagined. Media messages applied to demonstrate empathy in each and every encounter — for our patients, our co-workers and ourselves. Dedication, commitment of Doctors, health workers was praised.

Words used by the leaders

Narendra Modi and other political leaders used Janata curfew, Lakshman Rekha, Human life first. Political leaders appealed the people with folded hands, not to venture outside house. PM Modi appealed to follow seven steps — 1. caring elderly 2. social distance 3. increase immunity 4. download Arogy Setu mobile app 5. help the poor 6. show compassion for colleagues 7. Respect, honour doctors, sanitation workers and police. Usage of words like patience, care for the family and elderly get prominence. The word "atmanirbharata" (self-reliant) resonated and PM appealed industrialist to invest and develop India as well village-based industries, in order to produce international quality, import substitute products (Economic Times, June 8, 2020).

Beginning an outbreak response

The Government of India, first measure was to find out the source of spread. Identifying the population and super spreaders of the virus. It is important to note that religious

teachers and religious gatherings contributed a lot to SSEs (Super Spreader Events) across the world. The religious gatherings must also be stopped when academic institutions are closed. Mobilizing religious leaders should be included as a priority in an epidemic containment plan from early stages. Like Nanded Takht Hazoor Saheb Gathering, Tablik Jamat at Delhi (Sanjiv 2020) [7]. An incident of Dehpali village in Paliganj, Patna, a software engineer in Gurugram infected 79 persons (Time of India 2 July 20). Ahmedabad official revealed that 334 coronavirus super spreader found in Ahmedabad (NDTV, May 10, 20) [8]. A Karnataka KR market incident where 13 super spreaders infected 498 people (Indian Express 20) [9]. The words used in Trace, Test and Treat. Effort was made to control people using the basic principle of communication. Ethos such as strict enforcement of rules, permits, to open shops, curfew enforcement. Pathos such as fear, pleading cajoling and caring—Saath Baton Par dyan-taking care of elderly, wearing masks even if they are asymptomatic.

Determining roles and responsibilities

District authorities and police authorities of state were given freedom to enforce rules that suit their districts. Messages sent through media and social media platforms were monitored. Largely we found single person addressing issues to the media. Enforced strict vigilance. Identified the population that is going to be affected due to lockdown, a large number of daily wages workers, workers belonging to unorganised sectors. Identified the vulnerable or high risk population. Identified behavioural factors that might place a person at risk. Local authorities close down public places like malls, cinema. Through identifying partners who might be able to reach affected people or population. The messages were sent to the grass root level authorities and doctors, anganwadi workers, Asha workers. Identified perception in the community might affect communication. Ensured that messages reach people through media responses.

Source solidifying the communication strategy:

The communication system adopted a two-step model. One opinion leader played an important role in disseminating messages and regional language channels, in carrying COVID-related information. Some of the words like Mahamaari, Nimm Rakshate (Kannada), corona warriors, corona rakshana (Telugu) were more popular. The Centre and State Governments open separate websites to disseminate credible information on COVID-19. Regional channels bombarded with doctors' discussion. Alerted the people about three zones. Development stages of medicine information was disseminated with renowned pharmacist companies personalities (like Santha Bio tech Managing Director, Mr. Varaprasad).

Advertisements, leaflet, do's and don'ts on corona released by respective State Governments. Another major was development of mobile apps and installation which not only highlight the high light infected rate but also locate the infected. Many cinema stars like actor Akshay video on highlighting the importance of mask in our daily life—badalkar apna vyavahaar kare corona par war" (We are going to move on with our lives) and Telugu, Tamil and Kannada actors appeared in special video to fight against corona.

The term infodemic has been coined to outline the perils of misinformation phenomena during the management of virus outbreaks, since it could even speed up the epidemic process by influencing and fragmenting social response (Louis, 2019) [11]. A rumor about the possible lock-down of Lombardy (a region in northern Italy) to prevent. As a result, people overcrowded trains and airports to escape from Lombardy toward the southern regions before the lock-down was in place, disrupting the government initiative aimed to contain the epidemics and potentially increasing contagion. Thousands of migrant labourers assemble outside Mumbai station hoping to reach homes. Thus, an important research challenge is to determine how people seek or avoid information and how those decisions affect their behaviour (Sharot, 2020) [12], particularly when the news cycle – dominated by the disintermediated diffusion of information – alters the way information is consumed and reported on. The case of the COVID-19 epidemic shows the critical impact of this new information environment.

Conclusion

India's status can improve if all sources come together. Modern technocratic approach, coined the phrases Lock down 1.0, 2.0, 3.0 4.0 and unlock 1.0 and 2.0. Misinformation and unreliable information may lead to many consequences. Government authorities use appropriate way to disseminate information when and where required using empathetically coined messages. Face book introduced fact checking method and message circulation is limited five persons at time. It is the communication which enlighten the people about the corona virus threat. The people now, taking preventive measure in order to fight against corona. Unfortunate that the recovered covid patients are being stigmatised by society and denied basic amenities. The Ministry of Health advised against spreading names or identity of those affected or under quarantine or their locality on social media and urge to avoid spreading fear and panic or targeting healthcare, sanitray workers and the police and avoid labelling any community or area for the spread of the virus.

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