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Empowering Communities through Health Communication Strategies during the Covid-19 Pandemic: A Comparative Study of India and Indonesia

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Abstract: Health communication plays a crucial role in informing and influencing individual and community decisions to promote health. Understanding and studying health communication strategies are essential as health services, technology, regulations, policies, and health problems continue to evolve. This article presents a comparative analysis of health communication strategies for community empowerment in India and Indonesia. The study examines policy and management approaches, creative methods, media utilization, and the impact of health communication on community empowerment. The findings contribute to the existing body of literature on health communication and provide insights for future endeavors in empowering individuals and communities to effectively address public health challenges.

Keywords: Health Communication, Empowerment, India, Indonesia



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1. Introduction

Health communication strategies play a pivotal role in strengthening community capacity and promoting individual empowerment, positioning themselves as fundamental aspects in the realm of global health promotion. Recognized as a fundamental concept with universal significance, community empowerment has been acknowledged by governments worldwide, particularly in the context of disease response initiatives. Integration of community engagement into health communication strategies is deemed of utmost importance. These strategies aim to effectively address public health challenges and empower individuals to take an active role in their own well-being through community participation.

In the collaborative endeavor of health promotion, the objective is to enhance individuals' ability to proactively take measures while simultaneously bolstering the collective capacity of groups, organizations, and communities to shape the determinants of health. Strengthening community capacity for health promotion involves providing practical education, leadership training, and equitable access to resources. Simultaneously, empowering individuals entails offering consistent and reliable opportunities to engage in decision-making processes, along with acquiring essential skills and knowledge that drive transformative change. This process is facilitated by both conventional communication methods and emerging information media platforms. Furthermore, innovative approaches are necessary to harness social, cultural, and spiritual resources, tapping into their potential to advance health promotion objectives (The Jakarta Declaration on health promotion, WHO, 1997).

The concept of health promotion revolves around empowering individuals to enhance their agency in managing their own health, enabling them to exert greater control and improve their overall well-being. Complete physical, mental, and social well-being is achieved when individuals or groups can identify and pursue their aspirations, fulfill their needs, and adapt to or transform their environment accordingly. Health is considered a valuable resource that permeates everyday life, emphasizing the importance of social and personal resources, alongside physical capacities, in promoting health. Thus, health promotion extends beyond the health sector and encompasses the broader notion of well-being, requiring the addressing of social, psychological, and environmental factors that influence health outcomes (The Ottawa Charter for Health Promotion, WHO, 1986).

Health promotion serves as a catalyst for individuals to take charge of their own health, actively participating in managing and improving their well-being. This comprehensive approach encompasses social and environmental initiatives aimed at fostering and safeguarding the overall quality of life and well-being of individuals. Rather than focusing solely on medical interventions and remedies, these endeavors concentrate on addressing and preventing the underlying determinants of poor health. Adopting a holistic perspective, health promotion aims to create an environment that supports healthy choices and empowers individuals to lead fulfilling and healthy lives (WHO, 2016).

Community empowerment, according to the World Health Organization, represents a transformative process that enables communities to exert greater control over their lives.

Achieving this multifaceted endeavor requires the active engagement of community members, mobilization of resources, and cultivation of skills and knowledge. Through community empowerment, self-efficacy is developed, social cohesion is enhanced, and collective action is enabled to improve health outcomes. It plays an instrumental role in creating sustainable change and fostering a sense of ownership and responsibility among community members (WHO, 2016).

One of the strategies to achieve community empowerment in health promotion is community engagement, which involves different forms of involvement and collaboration. This can be categorized into partnering with formal organizations, enabling voluntary and community organizations to take action, and fostering informal engagement through social support mechanisms based on kinship, friendship, and neighborhood networks (Morgan et al., 2010).

The utilization of community engagement in disease response is not a new concept and has been employed in responses to past epidemics, including Ebola virus disease, Zika virus, Middle East respiratory syndrome, severe acute respiratory syndrome, and COVID-19 (Wijesinghe et al., 2023). The COVID-19 pandemic significantly impacted countries like India and Indonesia, with both experiencing high numbers of cases and facing challenges in containing the spread of the virus.

India witnessed a surge in COVID-19 infections, overwhelming the healthcare system and resulting in shortages of medical supplies, hospital beds, and oxygen. The second wave further exacerbated the situation, leading to a substantial number of hospitalizations and fatalities. The government implemented various measures, including lockdowns, travel restrictions, and the promotion of hygiene practices, as well as increasing testing capacity, expanding healthcare infrastructure, and launching vaccination campaigns.

Similarly, Indonesia also faced significant challenges in managing the COVID-19 pandemic. Multiple waves of infections occurred, resulting in a high number of cases and deaths. The healthcare system experienced strain, leading to shortages of hospital beds and medical supplies. The government implemented measures such as regional lockdowns, travel restrictions, and the promotion of health protocols. They also enhanced testing capacity, contact tracing, treatment facilities, and initiated vaccination campaigns.

Both India and Indonesia encountered unique challenges due to factors such as population density, limited healthcare resources, and socioeconomic disparities. Governments in both countries worked to address these challenges and implemented strategies to mitigate the impact of the virus. However, the effectiveness of the response varied, and there were areas for improvement in the management of the pandemic.

Given the importance of effective health communication strategies in empowering communities, it is crucial to study their implementation during the COVID-19 pandemic in India and Indonesia. This article aims to address the research question: "How do health communication strategies empower communities during the COVID-19 pandemic in India and Indonesia?" The specific objectives of the study are to examine the health communication strategies implemented, identify key components and approaches contributing to community

empowerment, and compare the similarities and differences in strategies between India and Indonesia.

Understanding the effectiveness of health communication strategies and their impact on community empowerment is essential for minimizing the spread and impact of the virus. By exploring and comparing the experiences of India and Indonesia, valuable insights can be gained, leading to improved strategies and management of the pandemic in the future. This research contributes to the body of knowledge on health communication strategies and community empowerment during public health crises, providing practical implications for policy and practice.

2. Literature Review

During the COVID-19 pandemic, effective health communication strategies have been recognized as crucial for disseminating information, promoting behavior change, and empowering individuals and communities to make informed health decisions (Akhter & Dash, 2022). In India, a country with a vast and diverse population, appropriate risk communication strategies are essential. Akhter and Dash (2022) highlight the roles of conventional communication and social media in raising awareness, preparedness, reducing anxiety, and addressing stigma. They also emphasize the need for regulatory measures to counter misinformation. Furthermore, health communication plays a significant role in mainstreaming women's health issues in Indian society, with media influencing information dissemination and awareness promotion (Padhy & Nity, 2017). In addition, Sharma and Nahak (2020) conducted a study on the communication patterns of drug addicts in Punjab, India. Their research explored various aspects, such as lifestyle, family history, the influence of media and the social environment, and verbal communication, within the context of the ongoing pandemic.

Hazra (2017) emphasizes addressing transportation, low literacy levels, and religious constraints to promote healthy behaviors among rural Indian women. Mahmud et al. (2013) propose that ICT-supported health communication in primary care can enhance health literacy, empowerment, and individual control, but stress the need for context-specific evaluations. Mobile health interventions, like the Tika Vaani Intervention in rural Uttar Pradesh, India, effectively reduce health disparities, improve immunization rates, and child health through face-to-face and mobile approaches (Pérez et al., 2020). The COVID-19 pandemic has generated global interest, with social media playing a vital role in rapidly disseminating information and influencing public behavior, given its vast user base (Tang et al., 2021).

In Indonesia, Covid-19 has profoundly impacted politics, business, economy, tourism, education, and religion, necessitating diverse adaptation strategies (Puspitasari & Afifi, 2022; Saraswati & Afifi, 2022; Afifi et al., 2022; Afifi & Harianti, 2021). The government has implemented various health communication strategies to manage the crisis. However, the delayed outbreak in Indonesia can be attributed to a lack of initial awareness and preparedness (Djalante et al., 2020). Insufficient crisis management, challenges in public communication, and inadequate mitigation measures have contributed to the spread of COVID-19 (Djalante et al.,

2020). The government's communication strategy has faced criticism, resulting in confusion and a lack of coordination due to conflicting information (Herman, 2021).

Social relations during the pandemic in Indonesia have had both positive and negative effects, providing support to vulnerable communities but also contributing to non-compliance with health protocols (Tamyis et al., 2022a). The village administration and COVID-19 task force play a crucial role in supporting coping strategies at the community level, although limited resources and declining risk perception affect the sustainability of social support (Tamyis et al., 2022a). Understanding context-specific challenges in India and Indonesia is vital for strengthening community resilience and improving pandemic response (Tamyis et al., 2022a).

Science-based policies are emphasized as important by Roziqin et al. (2021), but coordination challenges arise from policy variations across regions. Digital platforms and mainstream media have played a crucial role in facilitating remote work, education, and healthcare access in Indonesia by disseminating critical information and compensating for the government's slow initial response (Djalante et al., 2020). Community responses, such as practicing hygiene measures and staying at home, were essential in combating the pandemic, but initial skepticism and low-risk perception influenced community attitudes, and cultural and socioeconomic factors complicated response efforts (Tamyis et al., 2022a).

To address these challenges, adopting science-based decision-making and transparent communication is crucial. Involving social influencers and scientists in COVID-19 task forces supports evidence-based responses. The field of health communication recognizes the importance of interactive and integrated advocacy strategies that consider public health as a social construct and emphasize social determinants of health (Servaes & Malikhao, 2010). Advocacy combines social networking, interpersonal communication, negotiation, and media utilization to generate public pressure and support sustainable social change.

Understanding the context-specific challenges in India and Indonesia is crucial for designing effective health communication strategies. Empowering communities through science-based decision-making, transparent communication, and coordinated efforts can enhance responses and mitigate the impact of future health crises. Community-based empowerment initiatives have proven effective in responding to health emergencies and building resilient communities.

3. Method

This research study utilizes a comparative research design to investigate and compare the health communication strategies employed during the Covid-19 pandemic in India and Indonesia. By adopting a comparative approach, the study aims to analyze the similarities and differences in communication measures, taking into consideration the unique socio-cultural contexts and healthcare systems of both countries.

The data for this study is collected through document analysis and library research, which involves examining official reports, government publications, academic articles, and media sources from India and Indonesia. These sources provide valuable insights into the diverse range of health communication initiatives, campaigns, and interventions implemented by the respective governments and other relevant organizations during the Covid-19 pandemic.

Thematic analysis is employed as the analytical framework to analyze the qualitative data obtained from document analysis and library research. The data is meticulously organized, coded, and categorized into themes and sub-themes that are relevant to health communication strategies, their effectiveness, challenges encountered, and lessons learned. The analysis process follows a systematic and iterative approach, including data immersion, coding, identification of patterns and trends, and interpretation of findings.

By employing this rigorous research methodology, this study aims to provide comprehensive insights into the health communication strategies implemented during the Covid-19 pandemic in India and Indonesia. The findings will contribute to a deeper understanding of the effectiveness of these strategies, the challenges faced, and the valuable lessons that can be learned from these experiences.

4. Results and Discussion

4.1. Comparative Analysis of Health Communication Strategies

India, with a population of approximately 1.4 billion people, faces numerous challenges in addressing health issues such as hygiene, sanitation, and nutrition. The government has adopted two communication models to tackle these challenges: interpersonal communication and mass communication through media (Hazra, 2017).

Interpersonal communication has demonstrated its effectiveness in effectively disseminating health information. Government-appointed health workers play a crucial role in providing doorstep support to villagers, engaging in monitoring, discussions, and education sessions with expectant and pregnant women, aiming to raise awareness about health bulletins. This approach has resulted in notable improvements in institutional deliveries, promoting safe motherhood, and ensuring timely care for both infants and mothers. In order to cater to illiterate individuals, health workers rely on oral communication methods and verbally convey policy-related documents to the community, making the information accessible to those who are unable to read (Hazra, 2017). This interpersonal approach fosters a direct and personalized interaction between health workers and community members, enhancing understanding and facilitating the effective transmission of health-related knowledge.

In addition to the interpersonal communication approach, the utilization of modern media platforms has brought about a revolution in the dissemination of health information in India. The state government health departments and the Ministry of Health and Family Welfare have embraced various digital tools such as websites, Twitter handles, and Facebook pages to effectively share information pertaining to health issues, schemes, and policies. Moreover, traditional forms of mass communication including television, radio, and newspapers play a pivotal role in conveying messages concerning healthcare and other health-related topics (Pérez et al., 2020).

The media plays a critical role in promoting health awareness and disseminating knowledge about diseases, precautions, preventive measures, and healthy habits. Television and radio

programs, public service announcements (PSAs), social media campaigns, and public health messaging contribute to raising public awareness and fostering a sense of civic duty (Hyland-Wood et al., 2021).

Media campaigns have been successful in achieving milestones like the eradication of polio in India. Continuous awareness campaigns through television, radio, and newspapers played a crucial role in this achievement. During the COVID-19 pandemic, the media served as the primary outlet for disseminating information and educating people about symptoms, precautionary measures, and vaccination drives. The media's role in facilitating communication contributed to the successful administration of 1 billion doses of the COVID-19 vaccine in India (Mahmud et al., 2013).

Government-owned media outlets like Doordarshan (TV) and All India Radio, along with regional language channels, regularly broadcast programs dedicated to healthcare and health issues. Numerous news channels in India have health programs that engage health experts in talk shows, enabling direct interaction and dissemination of information (Bhimrao et al., 2017).

To ensure effective communication across diverse linguistic and cultural groups, regional language media and communication initiatives are essential. Providing content in multiple languages helps reach marginalized communities and overcome language barriers (Pérez et al., 2020).

The COVID-19 pandemic highlighted the importance of health communication strategies in India. Accurate and timely information regarding the virus, preventive measures, governmental directives, and healthcare services were disseminated through various media outlets. Public service announcements featuring influential individuals, medical professionals, and specialists improved credibility and public trust. Social media campaigns helped dispel misinformation and promote responsible behavior (Hyland-Wood et al., 2021).

In the context of a pandemic, it is of utmost importance that health promotion campaigns prioritize the effective dissemination of information to reach the widest possible audience. Particularly in India, it is crucial to implement health promotion strategies through conventional mass media channels like television and radio, alongside participatory media platforms, in conjunction with emerging media platforms. This comprehensive approach aims to ensure meaningful engagement with vulnerable communities regarding critical health issues.

In response to the challenges posed by the COVID-19 pandemic, the Indian government has recognized the significance of digital communication media, such as Facebook and Twitter, as primary conduits for health education (Roy et al., 2022). These digital platforms have emerged as essential instruments for the Indian government in effectively communicating health education during the ongoing COVID-19 crisis.

Meanwhile, the Indonesian government has implemented risk communication in its health communication strategy for COVID-19. It aims to provide accurate information for decision-making, educate the public, and promote preventive behaviors. Risk communication ensures continuous education, enhances crisis management, and prioritizes accurate and prompt delivery of information by competent spokespersons. It remains relevant throughout the health

crisis cycle, supporting informed decision-making (Biro Komunikasi dan Pelayanan Masyarakat Kemenkes RI, 2021a).

Indonesia faced challenges in responding effectively to the COVID-19 pandemic, including a lack of preparedness and underestimation of the virus's impact (Mulyana et al., 2021). Institutional changes, social distancing measures, and vaccination efforts were implemented, but concerns about health protocols and economic prioritization emerged, affecting public trust (Arifin, 2022; Rudianto & Hendra, 2021).

Formulating effective policies for COVID-19 management requires comprehensive ideas, supportive institutions, and consideration of interests (Roziqin et al., 2021). Effective government communication is essential in delivering information and promoting public participation. Valid information and shared visions between the state and community actors are necessary for better understanding and acceptance.

In Indonesia, pandemic health communication strategies rely on five pillars: sustainable structure, partnerships, reinforced public communication, community engagement, and active listening. These pillars ensure a well-structured and sustainable approach, promoting resource sharing, raising media awareness, and addressing public concerns. Communication strategies for managing the COVID-19 pandemic involve stages like situation analysis, objective setting, target audience identification, message design, media channel selection, communicator choice, tactic implementation, and monitoring and evaluation. Effective health communication during the pandemic requires strategies such as public outreach, media relations, stakeholder and community engagement, and crisis management. Alignment with main narratives and utilization of digital platforms are crucial (Biro Komunikasi dan Pelayanan Masyarakat, Kementerian Kesehatan RI, 2021b).

The process of formulating communication strategies begins with a situational analysis that includes media monitoring, public perception surveys, and monitoring of online voices. The results of the situational analysis guide the formulation of goals, strategies, messages, and channel/media selection for effective communication. Target groups are categorized into primary, secondary, and tertiary groups, and specific communication approaches are tailored to each group (Biro Komunikasi dan Pelayanan Masyarakat, Kementerian Kesehatan RI, 2021b).

Various media and communication channels have been identified for different communication purposes, including broadcasting media, print media, online media, digital platforms, and direct communication channels (Biro Komunikasi dan Pelayanan Masyarakat, Kementerian Kesehatan RI, 2021b). This includes the utilization of various conventional media, such as television, which has undergone significant changes in business models and adaptations during times of disruption (Setiadi et al., 2021). The preparation and training of communicators are crucial elements in health communication strategies during the pandemic. Their training and capacity building ensure the effective delivery of key messages and enhance public trust (Biro Komunikasi dan Pelayanan Masyarakat, Kementerian Kesehatan RI, 2021b). This is related to the anticipation of information-seeking behavior patterns regarding Covid-19 in Indonesia, which is implemented in the formulation of government-designed public communication strategies (Rianto et al., 2023).

To support the implementation of health communication strategies, various communication activities and products have been generated, including media monitoring, communication guidelines, media coaching, press conferences, social media engagement, paid media placements, owned media platforms, and cooperation with digital media platforms and fact-checking organizations (Biro Komunikasi dan Pelayanan Masyarakat, Kementerian Kesehatan RI, 2021b).

In response to dynamic issues, the agenda-setting process plays a crucial role in effective communication. It involves identifying potential topics and issues, developing narratives and key messages, creating communication products, and amplifying them through various channels and media. This process ensures that communication efforts remain relevant, timely, and responsive to emerging needs (Biro Komunikasi dan Pelayanan Masyarakat, Kementerian Kesehatan RI, 2021b).

To address the challenges posed by misinformation and lack of public awareness, the Indonesian government established the Task Force for the Acceleration of COVID-19 Handling (Satgas COVID-19) and launched campaigns emphasizing behavior change and promoting public compliance with health protocols. However, inconsistent messaging and transparency issues related to data collection and reporting undermined these efforts (Mulyana et al., 2021).

The coordination between the central and local governments in Indonesia posed a significant challenge in implementing effective pandemic control measures, contributing to public dissatisfaction with the government's handling of the pandemic (Mulyana et al., 2021). The failure of government communication during the COVID-19 pandemic in Indonesia has had significant consequences, including the rise of populist anti-scientism, religious conservatism, religio-political polarization, corruption, and clientelism. Therefore, there is a clear need for improved communication strategies, transparency in data sharing, and effective coordination between the central and local governments to regain public trust and enhance response efforts (Mulyana et al., 2021).

Social media has emerged as the primary source of information on COVID-19 and vaccines in Indonesia, but conflicting messages and the spread of misinformation pose challenges in providing accurate and reliable information. Efforts have been made to counter misinformation through platforms such as the government's hoax buster website and engagement of social media influencers and public figures in raising awareness (Djalante et al., 2020). In Indonesia, the Indonesian government has similarly embraced digital communication media as a means to educate the public about the management of COVID-19. These include various platforms such as the official website (@covid19.go.id), Facebook (@lawancovid19indonesia), Instagram (@ lawancovid19_id), Twitter (@lawancovid19_id), and the United Against COVID-19 application available on Playstore. These digital channels serve as vital tools through which the government disseminates crucial information and promotes awareness regarding COVID-19.

Overall, effective communication strategies are crucial for managing public health emergencies like the COVID-19 pandemic in both India and Indonesia. Key elements of successful health communication include accurate and timely information, empathy, trustworthiness, transparency, and the use of appropriate communication channels. The strategies should be tailored to the target audience and continuously evaluated and improved based on feedback and changing needs. Collaboration between different stakeholders, including governments, media, and communities, is essential for effective communication and response efforts.

4.2. Community Engagement Initiatives during Covid-19

India has implemented the concept of community empowerment in health communication as part of its commitment to achieving "health for all" (Mukhopadhyay & Gupta, 2010). The Khoj project, a non-governmental initiative operating in remote rural areas, aims to uplift the socioeconomic and health status of communities through their involvement in managing development efforts and obtaining local resources (Mukhopadhyay & Gupta, 2010).

The Khoj project adopts a holistic approach by integrating the social, economic, cultural, and political dynamics of the community to improve health and well-being (Mukhopadhyay & Gupta, 2010). This community-centric sustainable strategy has shown positive impacts on the overall well-being of the population in challenging settings (Mukhopadhyay & Gupta, 2010).

Community empowerment is a crucial aspect of health communication, enabling communities to have greater control over decisions that affect their lives (Popay, 2010). Terms such as community development, community participation, and community engagement are used in this context to improve population health and reduce health inequalities (Popay, 2010).

Health communication plays a significant role in addressing health issues such as malnutrition, particularly among women, in India (Padhy & Nity, 2017). The media plays a crucial role in disseminating health-related information, raising awareness, and motivating individuals to take action (Padhy & Nity, 2017). During the COVID-19 pandemic in India, effective communication strategies have been crucial (Akhter & Dash, 2022). The study emphasizes the importance of government regulation and reframing of communication strategies based on social and political factors to amplify or attenuate the risks associated with the pandemic (Akhter & Dash, 2022).

In Indonesia, health communication strategies place a strong emphasis on community engagement to promote behavior change and involve communities in decision-making and policy-making activities (Bureau of Communication and Public Service, Ministry of Health, Indonesia, 2021). This approach emphasizes two-way communication and active participation to achieve behavioral changes and reduce the negative impacts of health crises.

Community engagement is particularly crucial in vaccination communication, especially during the COVID-19 pandemic (Direktorat Promosi Kesehatan dan Pemberdayaan Masyarakat, 2020). By involving communities in the vaccination program, tailored and responsive vaccination services can address the specific needs and challenges of target groups. Community empowerment activities play a vital role in fostering social norms, individual acceptance of vaccines, collective responses, and preventing transmission at the community level.

Effective health emergency responses require risk communication and community engagement as integral components (IFRC, WHO, UNICEF, 2020). Strengthening risk communication, community engagement, and community empowerment can break the chains of transmission and mitigate the impacts of the COVID-19 pandemic. Active participation and empowerment of affected communities are crucial for ensuring an informed and people-centered

response. Without community engagement, there is a risk of misinformation, confusion, and mistrust undermining the effectiveness of pandemic response efforts.

Engaging communities is essential in addressing the politicization of the pandemic response (IFRC, WHO, UNICEF, 2020). Political opportunism and conflicting messages can create confusion and hinder the uptake of public health recommendations. Therefore, addressing community questions and concerns with scientifically-grounded and politically-neutral information is important. Providing accessible, culturally relevant, and trusted information through preferred channels and from trusted sources can build trust, enhance community participation, and mitigate the negative impacts of the pandemic.

To achieve these goals, the community empowerment process should be community-led, data-driven, and promote collaboration (IFRC, WHO, UNICEF, 2020). Communities should be empowered to assess their own needs and actively participate in the analysis, planning, design, implementation, monitoring, and evaluation of local responses to COVID-19. Utilizing disaggregated data about the community's context and capacities is critical for informed decision-making. Building the capacity of local actors and institutions, as well as promoting coordination at various levels, is essential for effective community engagement and pandemic response.

The Indonesian government has taken proactive measures to promote a healthy paradigm aligned with the Health Law, including the launch of the Healthy Living Community Movement (GERMAS) (Fibriana et al., 2021). GERMAS aims to prevent and promote health through a cross-sectoral approach involving multiple ministries and institutions. In response to the COVID-19 pandemic, the Ministry of Health developed guidelines for community empowerment in COVID-19 prevention, emphasizing hygiene, healthy living habits, nutrition, and education. This highlights the significance of community empowerment in addressing the pandemic.

Efforts to prevent COVID-19 transmission and improve community behavior require the development of community capacity and active participation (Fibriana et al., 2021). Community empowerment and health promotion play essential roles in dealing with the pandemic. Compliance with health protocols, such as wearing masks and maintaining social distancing, is crucial for reducing cases and deaths. However, compliance rates vary, underscoring the need to increase community participation and adherence to protocols. Empowering individuals by involving them in decision-making and responsibilities fosters independence in thinking, acting, and controlling their actions. Preventive efforts during the New Normal period include wearing masks, practicing hand hygiene, maintaining social distancing, and avoiding unnecessary travel, especially in high-risk areas. By empowering the community and promoting health, it is possible to break the chain of COVID-19 transmission and achieve a healthy state.

Cultural sensitivity and religious factors have emerged as significant considerations in health communication, requiring a shift in approaches to health promotion. The incorporation of Islamic values and elements in health communication strategies is proposed as a means to address cultural and religious conflicts and enhance health promotion among Muslims (Ahmad, Harrison, & Davies, 2011). Religious involvement, such as participation in faith-based institutions, has been associated with increased responsiveness to fear-arousing messages and better adherence to health outcomes. Islamic communication strategies rooted in the Islamic social fabric, including the use of Quran and hadith quotations and involvement of Islamic opinion leaders and institutions, have shown promise in promoting health among Muslims (Ahmad, Harrison, & Davies, 2011).

However, more empirical research is needed to evaluate the impact of Islamic communication elements on receivers and to better understand the effectiveness of Islamic persuasion in health promotion. Integrating theory and practice in health communication can harness the potential of culture, including religious culture, to address the cultural needs of communities (Ahmad, Harrison, & Davies, 2011).

Religious organizations in Indonesia have played a dual role in the context of the COVID-19 pandemic. While they have been a source of strength and inspiration, religious gatherings and traditions have also posed challenges when social distancing measures were necessary. Collaboration between the government and religious organizations is essential in addressing the spread of COVID-19. Islamic organizations, such as MUI, Nahdlatul Ulama, and Muhammadiyah, have developed governing structures and possess significant resources that can be mobilized for health promotion and education on COVID-19 (Djalante et al., 2020).

These organizations have issued guidelines, fatwas, and established COVID-19 Command Centers and hospitals to respond to the pandemic. Other religious organizations, such as the Indonesian Council of Churches and Buddhist organizations, have also taken proactive measures to adapt to the pandemic and support the healthcare system (Djalante et al., 2020).

An inclusive and community-based approach is crucial in promoting community health resilience and preparedness, ensuring that vulnerable groups, including people with disabilities, are considered in the COVID-19 response. Collaboration between religious organizations and governments is vital in mitigating the impact of the pandemic and protecting public health (Djalante et al., 2020).

The COVID-19 pandemic has highlighted the importance of effective crisis communication procedures. Recommendations from participating communities include developing strategies to manage information overload, ensuring timely translation of official broadcasts, transparent access to community translations, providing funding for migrant communities, and adopting a multimodal approach to disseminating health information. Implementing these recommendations can improve crisis response and management, ensuring that vital information reaches diverse populations (Karidakis et al., 2022).

In the context of COVID-19 vaccination, community empowerment plays a critical role in achieving vaccination targets. Collaboration with social partners, effective media campaigns, engagement of community health volunteers, and targeted advocacy efforts contribute to empowering the community and facilitating effective communication about the vaccination process. These strategies enhance community participation and support the successful administration of COVID-19 vaccines (Direktorat Promosi Kesehatan dan Pemberdayaan Masyarakat, 2020).

4.3. Lessons Learned to Enhance Community Empowerment in Health Communication for Future Initiatives

The COVID-19 pandemic has emphasized the significance of community empowerment through effective health communication. In this study, which compares India and Indonesia, important lessons have been identified to enhance community empowerment in future health communication endeavors.

These lessons highlight the importance of recognizing and respecting cultural sensitivity when engaging diverse communities. They also emphasize the influence of religious factors and involvement in faith-based institutions on health behavior and the reception of health messages. Integrating theory and practice in health communication is seen as essential to address the specific cultural needs of communities. Additionally, adopting inclusive and multimodal approaches that cater to vulnerable groups and utilize various communication channels is crucial.

Collaboration with community organizations and active volunteer participation are found to play a vital role in empowering communities. Ensuring efficient information management and translation services is necessary to provide non-English speakers with access to accurate health information. Leveraging diverse media and communication channels is also essential to ensure widespread coverage and accessibility of health messages.

By implementing these insights, communities can be empowered, positive behavioral changes can be encouraged, and overall public health outcomes can be improved. Thus, future health communication strategies should prioritize cultural sensitivity, incorporate religious factors, integrate theory and practice, promote inclusivity, foster collaboration, and utilize effective communication channels to empower communities and achieve public health objectives.

5. Conclusion

This comparative analysis examines health communication strategies employed during the COVID-19 pandemic in India and Indonesia, highlighting the significance of effective communication in empowering individuals and promoting behavior change. The study reveals contextual and cultural influences on communication strategies, with India employing a multichannel approach and Indonesia focusing on community-based interventions.

These findings contribute to existing knowledge, providing insights for policymakers, healthcare professionals, and communication experts. Key recommendations for future health communication initiatives include cultural tailoring, collaboration with religious organizations, integration of theory and practice, inclusivity and accessibility, community engagement, effective information management, and diverse communication channels. Continuous evaluation and refinement of strategies, along with long-term impact research, are crucial for better preparedness and response to future health emergencies. By sharing best practices and learning from diverse contexts, countries can strengthen their health communication efforts, safeguarding populations and mitigating future health crises.

In conclusion, effective health communication plays a vital role in empowering individuals and promoting behavior change during the pandemic. Lessons learned from the comparative study of India and Indonesia offer valuable insights and recommendations for designing comprehensive strategies. Prioritizing these strategies and ongoing learning will strengthen public health responses and mitigate the impact of future crises.

References

- Afifi, S. & Harianti, P. (2021). The Relationship Marketing Communication Strategy During the Covid-19 Pandemic : A Case Study of Islamic Schools in Yogyakarta. *Proceedings of the 3rd Jogjakarta Communication Conference (JCC 2021)*, 235–240, https://doi.org/10.2991/ assehr.k.211121.056
- Afifi, S., Santoso, H.B., Hasani, L.M. (2022). Investigating students' online self-regulated learning skills and their e-learning experience in a prophetic communication course. Ingénierie des Systèmes d'Information, Vol. 27, No. 3, pp. 387-397. https://doi.org/10.18280/isi.270304
- Ahmad, M.K., Harrison, J., & Davies, C. L. (2011). Cultural Sensitivity in Health Promotion Program: Islamic Persuasive Communication. *Paper Presented at the 6th International Conference* on Communication and Mass Media, 19-22 May 2008, Athens, Greece., 5–8.
- Akhter, M.S., Dash, B. (2022). Covid-19 Communication Strategies in India: An Analysis Using Social Amplification Risk Framework (SARF). In: Singh, A. (eds) International Handbook of Disaster Research. Springer, Singapore. https://doi.org/10.1007/978-981-16-8800-3_79-1
- Arifin, B. (2022). Government Communication Strategies in Time of Pandemic: Comparative Study between South Korea and Indonesia. *Policy & Governance Review*, 6(2), 189. https:// doi.org/10.30589/pgr.v6i2.546
- Biro Komunikasi dan Pelayanan Masyarakat Kemenkes RI (2021a). Pedoman Komunikasi Resiko untuk Penanggulangan Krisis Kesehatan. https://www.kemkes.go.id/downloads/resources/ download/info-terkini/Komunikasi_Risiko_untuk_Penanggulangan_Krisis_Kesehatan.pdf
- Biro Komunikasi dan Pelayanan Masyarakat Kemenkes RI (2021b). Strategi Komunikasi Penanganan Pandemi dan Vaksinasi Covid-19 https://www.kemkes.go.id/folder/view/01/structure-web-content-publikasi-data.html
- Djalante, R., Lassa, J., Setiamarga, D., Sudjatma, A., Indrawan, M., Haryanto, B., Mahfud, C., Sinapoy, M. S., Djalante, S., Rafliana, I., Gunawan, L. A., Surtiari, G. A. K., & Warsilah, H. (2020). Review and analysis of current responses to COVID-19 in Indonesia: Period of January to March 2020. *Progress in Disaster Science*, 6, 100091. https://doi.org/10.1016/j. pdisas.2020.100091
- Fibriana, L. P., Kushayati, N., Aprilin, H., Supriani, A., & Purwanto, N. H. (2021). Community Empowerment through Health Promotion Regarding Prevention of the Spread of COVID-19 in East Java. *Journal for Quality in Public Health*, 4(2), 21–25. https://doi.org/10.30994/jqph. v4i2.189
- Hazra, B. K. (2017). Role of Communication for Improving the Health of Rural Women: Analysis and Implementation Strategies Used. *International Journal of Engineering and Management Research*, 7(6), 232–238. www.ijemr.net

- Herman, A. (2021). "Indonesian government's public communication management during a pandemic." Problems and Perspectives in Management, 19(1), 244–256. https://doi.org/10.21511/ ppm.19(1).2021.21
- Hyland-Wood, B., Gardner, J., Leask, J., & Ecker, U. K. H. (2021). Toward effective government communication strategies in the era of COVID-19. *Humanities and Social Sciences Communications*, 8(1), 1–11. https://doi.org/10.1057/s41599-020-00701-w
- Karidakis, M., Woodward-Kron, R., Amorati, R., Hu, B., Pym, A., & Hajek, J. (2022). Enhancing COVID-19 public health communication for culturally and linguistically diverse communities: An Australian interview study with community representatives. *Qualitative Health Communication*, 1(1), 61–83. https://doi.org/10.7146/qhc.v1i1.127258
- Mahmud, A. J., Olander, E., Eriksén, S., & Haglund, B. J. (2013). Health communication in primary health care -A case study of ICT development for health promotion. *BMC Medical Informatics and Decision Making*, 13(1), 1–15. https://doi.org/10.1186/1472-6947-13-17
- Morgan, A., Davies, M., & Ziglio, E. (Eds.). (2010). Health Assets in a Global Context. Springer. New York. DOI: https://doi.org/10.1007/978-1-4419-5921-8
- Mukhopadhyay, A., Gupta, A. (2010). Sustainable Community-Based Health and Development Programs in Rural India. In: Morgan, A., Davies, M., Ziglio, E. (eds) Health Assets in a Global Context. Springer, New York, NY. https://doi.org/10.1007/978-1-4419-5921-8_12
- Padhy, M. K, Nity. (2017). Effective Health Communication Strategies in India : an Empirical Study With Special Reference To Women Malnutrition. *IMPACT Journal: International Journal of Research in Humanities, Arts and Literature.* 5(7), 181–196.
- Pérez, M. C., Singh, R., Chandra, D., Ridde, V., Seth, A., & Johri, M. (2020). Development of an mHealth Behavior Change Communication Strategy: A case-study from rural Uttar Pradesh in India. COMPASS 2020 - Proceedings of the 2020 3rd ACM SIGCAS Conference on Computing and Sustainable Societies, 274–278. https://doi.org/10.1145/3378393.3402505
- Popay, J. (2010). Community Empowerment and Health Improvement: The English Experience. In: Morgan, A., Davies, M., Ziglio, E. (eds) Health Assets in a Global Context. Springer, New York, NY. https://doi.org/10.1007/978-1-4419-5921-8_10
- Puspitasari, S.A & Afifi, S. (2022). Analisis Strategi Komunikasi Krisis Klinik Kesehatan Gigi di Masa Pandemi COVID-19. *Jurnal Mahasiswa Komunikasi Cantrik*, 2 (1), 63-80 https://doi.org/10.20885/cantrik.vol2.iss1.art6
- Rianto, P. R., Afifi, S., & Hariyanti, P. (2023). Perilaku Pencarian Informasi Covid 19 dan Implikasinya pada Strategi Komunikasi . *Komunika: Jurnal Ilmu Komunikasi*, 10(1), 28–38. https://doi.org/10.22236/komunika.v10i1.10216
- Roy, D., Das, M., Deshbandhu, A. (2022). Postcolonial pandemic publics: examining social media health promotion in India during the COVID-19 crisis. *Health Promotion International*, 37, 1-16. https://doi.org/10.1093/heapro/daab076

- Roziqin, A., Mas'udi, S. Y. F., & Sihidi, I. T. (2021). An analysis of Indonesian government policies against COVID-19. *Public Administration and Policy*, 24(1), 92–107. https://doi.org/10.1108/PAP-08-2020-0039
- Rudianto, B., & Hendra, Y. (2021). Communication of Covid-19 Pandemic Disaster in Indonesia. *Utopía y Praxis Latinoamericana*, 26(1), 46–54.
- Saraswati, H. D., & Afifi, S. (2022). Strategi Komunikasi Pemasaran Pariwisata di Masa Pandemi Covid-19 . *CoverAge: Journal of Strategic Communication*, 12(2), 138-155. https:// doi.org/10.35814/coverage.v12i2.2743
- Servaes, J., & Malikhao, P. (2010). Advocacy strategies for health communication. *Public Relations Review*, 36(1), 42–49. https://doi.org/10.1016/j.pubrev.2009.08.017
- Setiadi, A. A., Afifi, S., & Suparno, B. A. (2021). Adaptation of Multi-platform Broadcasting Management in the Disruption Era: A Case Study of Private Television in Indonesia. AJMC (Asian Journal of Media and Communication), 5(2). Retrieved from https://journal.uii.ac.id/ AJMC/article/view/21392
- Sharma, N., Nahak, FM. (2020). Drug-Addicts and the Pandemic Covid-19: A Study of The Communication Patterns in Selected De-Addiction Centers of Punjab. *PalArch's Journal of Archaeology of Egypt / Egyptology*, 17(6), 2281 - 2297. Retrieved from https://archives.palarch. nl/index.php/jae/article/view/1119
- Tang Q, Zhang K, Li Y. (2021) The Important Role of Social Media During the COVID-19 Epidemic. Disaster Med Public Health Prep. 2021 Aug;15(4):e3-e4. doi: 10.1017/ dmp.2020.330. Epub 2020 Sep 10. PMID: 32907683; PMCID: PMC7573455.
- Tamyis, A. R., Wikan, H., & Mawardi, M. S. (2022a). Same Storm, Different Ark : Coping Strategies of the Vulnerable Communities During The Covid-19 Pandemic. 2.
- Tamyis, A. R., Wikan, H., & Mawardi, S. (2022b). Examining Issues in Indonesia's Public Communication Strategies During The Covid-19 Pandemic. 1, 1–4.
- WHO (1986). The 1st International Conference on Health Promotion, Ottawa, 1986. World Health Organization. https://www.who.int/teams/health-promotion/enhanced-wellbeing/ first-global-conference, Accessed May 23, 2023.
- WHO (1997). Jakarta declaration on leading health promotion into the 21st century. https:// www.who.int/teams/health-promotion/enhanced-wellbeing/fourth-conference/jakartadeclaration, Accessed May 23, 2023.
- WHO (2016). Health promotion. https://www.who.int/news-room/questions-and-answers/ item/health-promotion, Accessed May 23, 2023.
- Wijesinghe, M. S. D., Gunawardana, B. M. I., Weerasinghe, W. M. P. C., et al. (2023). Empowering communities during the COVID-19 pandemic through mothers' support groups: evidence from a community engagement initiative in Sri Lanka. Global Health Science Practice, 11(2), e2200402. https://doi.org/10.9745/GHSP-D-22-00402