

# Communication in Times of National Crisis: The Role of Governments and Other Actors

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## Public Health Crisis as Disaster

The International Federation of the Red Cross [defines](#) disaster as:

A sudden, calamitous event that seriously disrupts the functioning of a community or society and causes human, material, and economic or environmental losses that exceed the community's or society's ability to cope using its own resources.

Such [disasters may be caused by](#) natural or technological hazards, mass population movements and infectious and contagious diseases. According to the [United Nations](#), the consequences may be widespread and long-lasting, and addressing the disaster may require external assistance, involving neighbouring, national and international jurisdictions.

Undoubtedly, COVID-19—the most severe global public health crisis in recent decades—has massively disrupted life and caused significant losses. However, with [such a long history of similar crises](#), few infectious disease experts were surprised by the emergence of another global pandemic in a world where people and cities are more connected than ever before. The COVID-19 crisis continues to shape human history and is unlikely to be the last of its kind.

One of the most critical issues that have emerged from this pandemic is that of communication—how best to inform the public and disseminate accurate information to ensure the best public health outcomes? What have we learned so far from the response to this pandemic about the roles of governments (and other actors) regarding communication during times of crisis, disaster management and recovery?

## Quarantine Practices

For centuries, [governments](#) and even religions such as Christianity (Leviticus 13:4–5) and [Islam](#) have recommended and implemented quarantine as a critical public health measure to combat the spread of infectious diseases and reduce mortality rates. Resistance to forced quarantine has an equally long history, with [reports](#) during the 17th-century [Great Plague](#) of those in isolation being ‘unruly’ and requiring containment. Recently, the USA has seen [mass demonstrations](#) against the COVID-19 shutdown measures; similar [smaller protests](#) have also occurred across Australia.

There are many ethical and practical issues surrounding quarantine implementation as a response to a natural disaster. Practices differ around the world and have demonstrated varying levels of success; successful quarantine may be dependent on communication involving effective messaging, managing misinformation, risk perception and vulnerabilities.

## Effective Government Health Messaging

Public health messaging intended to ‘[flatten the curve](#)’—mitigate the negative effects and [reduce the spread](#)—through social distancing and self-isolation has been variously successful in limiting virus transmission and [minimising its impacts on health services](#). Governments in Australia, New Zealand and Canada, all relatively swift to act on scientific advice, have [managed the spread of the virus effectively](#). Conversely, governments in [Sweden](#) and the [USA](#), who were slow to respond or provided mixed public health messaging, have been less successful.

[Marketing communication strategy](#) often makes use of celebrities and well-known opinion leaders over experts to influence others. The rise of social media has increased the attractiveness of this approach and may serve public health messaging well in the time of COVID-19. Indeed, much social media use has reinforced public health messaging, such as [celebrity messages](#), [videos](#), [songs](#) and [donations](#).

However, the extensive use of social media has also moved public health messaging from government hands into the largely uncontrolled and unregulated space of the online public, resulting in the circulation of misinformation. One [study](#) by *BMJ Global Health* examined the most widely viewed COVID-19 videos uploaded to YouTube as of March 2020, finding that 19 of 69 (28%) included misinformation.

## Misinformation

Positive public health outcomes require [managing this misinformation](#). While social networks quickly removed the so-called ‘Pandemic’ documentary-style conspiracy video that circulated in early May, a June [study](#) reported that up to 25% of people surveyed in the US are open to the truth of conspiracy theories suggesting the COVID-19 outbreak was deliberately planned.

In the future, [as many COVID-19 treatments are trialled](#), consumers will be presented with both tested drugs and untested offers, some potentially harmful, to treat and prevent COVID-19. The *BMJ Global Health* [study](#) recommends that governments collaborate with entertainment and news sources and social media influencers to produce appealing, factual content. However, as [celebrity views are not always welcome](#), except when drawing attention to heroes, governments may need to navigate negative public sentiment regarding the use of celebrities.

## Risk-Related Implications

Managing public health-related outcomes also involves managing the perception of risk, such as people’s experiences of a related disaster. During the 2009 Australian swine flu crisis, [compliance with self-isolation regulations](#) lessened after the situation was deemed a pandemic because the virus became associated with the common flu. Further, [compliance during the swine flu pandemic varied between social groups](#)—younger, less-educated and socially disadvantaged groups were less likely to comply. If perceived as another seasonal influenza, people may underestimate the dangers of COVID-19; similarly, young people may underestimate their vulnerability compared to elderly or immune-compromised populations.

In their [study](#), Professor David Rand and research scientist Frez Yoeli identified three ways to frame effective messages that people will follow, based on the role of reputation and social enforcement, which suggests that people are motivated to impress peers and comply with peer pressure. These are to communicate the benefit to the community; make the request unambiguous, categorical and concise; and, generate the impression that other people expect compliance.

[Research](#) suggests that government public health messages are more effectively received when audiences are engaged in two-way dialogue rather than one-way or broadcast messages. Social media that permits such dialogue may be critical for engaging with young people. However, [not all platforms are equal](#)—Instagram, Snapchat, YouTube, Twitch or TikTok may offer more success with youth than Facebook, Twitter and LinkedIn.

## Vulnerabilities

Ensuring positive public health outcomes also involves managing vulnerabilities. The COVID-19 pandemic has [redefined](#) vulnerability in Australia, it has affected pre-existing [socio-economic](#), [health and wellbeing](#) and [housing](#) vulnerabilities and created new vulnerabilities.

During the COVID-19 crisis, culturally and linguistically diverse communities have been particularly vulnerable to inaccessible information and misleading or dangerous rumours about the virus, as demonstrated by [the lockdown of nine public housing towers](#) in Flemington and North Melbourne. Home to over 260 language groups and many new arrivals, it was challenging for Melbourne to persuade its residents to follow public health protocols. Critically, the lockdown had some extremely negative psychological effects on vulnerable residents, including [anxiety](#), [panic attacks and trauma-related flashbacks](#).

A [study](#) led by Dr Abby Wild, involving 12 leaders of Victoria's multicultural communities at the time of COVID-19, demonstrated that effective communication is more complicated than language translation alone. It requires [a comprehensive approach](#): tailoring messages to community values, using trusted messengers (e.g., religious leaders, nurses, doctors or teachers) and utilising different social media platforms that can be accessed by different audiences.

The COVID-19 crisis has already generated much information regarding communication in the implementation of quarantine measures, involving effective messaging, managing misinformation, risk perception and vulnerabilities. A combination of successes and failures have highlighted the need to learn more from this pandemic to tackle future crises effectively.



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