

“Indonesian government’s public communication management during a pandemic”

AUTHORS	Achmad Herman  https://orcid.org/0000-0001-5900-8507
ARTICLE INFO	Achmad Herman (2021). Indonesian government’s public communication management during a pandemic. <i>Problems and Perspectives in Management</i> , 19(1), 244-256. doi: 10.21511/ppm.19(1).2021.21
DOI	http://dx.doi.org/10.21511/ppm.19(1).2021.21
RELEASED ON	Wednesday, 03 March 2021
RECEIVED ON	Saturday, 17 October 2020
ACCEPTED ON	Wednesday, 10 February 2021
LICENSE	 This work is licensed under a Creative Commons Attribution 4.0 International License
JOURNAL	"Problems and Perspectives in Management"
ISSN PRINT	1727-7051
ISSN ONLINE	1810-5467
PUBLISHER	LLC “Consulting Publishing Company “Business Perspectives”
FOUNDER	LLC “Consulting Publishing Company “Business Perspectives”



NUMBER OF REFERENCES

61



NUMBER OF FIGURES

1



NUMBER OF TABLES

2

© The author(s) 2024. This publication is an open access article.



BUSINESS PERSPECTIVES



LLC "CPC "Business Perspectives"
Hryhorii Skovoroda lane, 10,
Sumy, 40022, Ukraine
www.businessperspectives.org

Received on: 17th of October, 2020
Accepted on: 10th of February, 2021
Published on: 3rd of March, 2021

© Achmad Herman, 2021

Achmad Herman, Dr., Associate
Professor in Communication Study
Program, Department of Sociology,
Faculty of Social and Political Science,
Tadulako University, Indonesia.



This is an Open Access article,
distributed under the terms of the
[Creative Commons Attribution 4.0
International license](https://creativecommons.org/licenses/by/4.0/), which permits
unrestricted re-use, distribution, and
reproduction in any medium, provided
the original work is properly cited.

Conflict of interest statement:
Author(s) reported no conflict of interest

Achmad Herman (Indonesia)

INDONESIAN GOVERNMENT'S PUBLIC COMMUNICATION MANAGEMENT DURING A PANDEMIC

Abstract

The COVID-19 pandemic has triggered a health emergency as a vaccine for it has not been found yet requiring the government to seriously manage it. Therefore, the government needs to effectively implement non-pharmaceutical measures. One of the measures to suppress the spread of the virus is public communication. The government's public communication in dealing with COVID-19 has faced problems resulted in low public discipline and awareness thus far. This study used a quantitative approach with descriptive statistics analysis. The analysis does not generalize the result but it can explain the characteristics of the sample to formulate the meaning of the result. The findings show that the public communication management of the government of Indonesia has not been effective because the dissemination of public information is diverse and inconsistent. This is because the government gives freedom to various media to provide information to the public, which creates a gap in the management of COVID-19 in Indonesia and results in low public discipline and awareness (mean value 2,97). Therefore, it is difficult for the government to deal with and manage health emergencies caused by the COVID-19 pandemic. Research has shown that the government must provide the public with consistent and valid information (mean value 3,51), monitor and supervise mass and electronic media, and use social media and online media to provide valid information from the government and disseminate positive and educative information to the public (mean value 4,06).

Keywords

communication, electronic media, mass media, online media, social media

JEL Classification

H12, H84, O38

INTRODUCTION

The COVID-19 pandemic is a threat to human health and life, causing panic, anxiety and even depression (Qiu et al., 2020). Such conditions can be controlled with appropriate government responses. This paper focuses on how the government of Indonesia manages, responds, and educates the public during the COVID-19 pandemic through public communication so that the public is not panic but willing to support the government's measures.

Public communication plays an important role in assisting the government's steps in handling COVID-19 as is done by China (Wilder-Smith & Freedman, 2020; Wu & McGoogan, 2020). Furthermore, this step was considered successful, given the existence of government governance regarding public communication. The government has taken strategic measures in managing COVID-19, including isolation, social and physical distancing, work from home, and Large-Scale Social Restrictions (PSBB), but they have not shown success in stopping the transmission of the virus thus far. In general, the community has a low level of discipline and awareness. This requires the government to prepare a strategy to increase discipline and awareness. Therefore, it is

necessary to implement educative public communication, especially risk communication. Risk communication during a pandemic has a positive correlation with public trust in the government (Blair et al., 2017; Liao et al., 2010; Sheen et al., 2020; van der Weerd et al., 2011).

The government's public communication can be a source for the community to take action. Therefore, it is crucial to use public communication that can affect public understanding and trust in the government. Public communication can be carried out before and during the pandemic, and then the result can be evaluated based on community responses (Triwibowo, 2020). Positive evaluation results will increase public confidence and vice versa, depending on how the government implements a public communication strategy in responding to the COVID-19 pandemic.

Public communication implemented during the COVID-19 pandemic shows challenges that require comprehensive research. To date, the government of Indonesia has not been effective in implementing public communication. Therefore, this study aims to identify the management of public communication in governing the COVID-19 pandemic in Indonesia. Public communication affects public reactions. Thus, it is crucial to develop a national strategy to reduce the impact of the COVID-19 pandemic by slowing down the transmission and conducting research (Cowper, 2020).

1. LITERATURE REVIEW

COVID-19 has become a pandemic (Chopra et al., 2020; Lenca & Vayena, 2020), causing emergencies both in humanity (Hua & Shaw, 2020) and health (Lenca & Vayena, 2020). The emergency has to be properly managed because it affected people's lives. The COVID-19 pandemic is growing rapidly worldwide (Robinson & Kengatharan, 2020) and has received aggressive responses consisting of testing, screening, contact tracing, social distancing, travel restrictions, and appeals to stay at home (Berger et al., 2020). The government's responses are followed up with public communication to convey public information about COVID-19 to the public. Stakeholders' comprehensive strategies are the key to the success of public communication about COVID-19 (Chopra et al., 2020).

The COVID-19 pandemic has caused health emergencies and requires integrated emergency management such as risk communication (Zhang et al., 2020). Risk communication can provide an understanding of the public about the dangers of the COVID-19 pandemic. The communication is intended to educate the community to stop the transmission of the virus (Paakkari & Okan, 2020). Public communications of COVID-19 should be done on time and regularly updated (Chopra et al., 2020). This means that public communication of COVID-19 must use the latest data and convey it on time. The latest data on the

development of COVID-19 provides the latest information to the public.

Public information data about COVID-19 must be clear. Public communication should also be clear and compassionate (Wang et al., 2020). Compassionate means not scaring the public, but providing lessons and understanding about COVID-19, for example explaining the risks or ways to avoid the transmission. Conveying information about the use of face masks during this pandemic is crucial (Chopra et al., 2020).

Public communication can be implemented by the government with various strategies. Communication plays a role in providing education during the COVID-19 pandemic (Hamzah et al., 2020). Public communication can be centralized in the government and can also involve social media as implemented in China, but it must be wisely used (Wilder-Smith & Freedman, 2020; Wu & McGoogan, 2020). Public communication can also be centralized in health centers as implemented in Taiwan, where the government also controlled the social media (Oxford Analytica, 2020; Wang et al., 2020) and required all hospitals to report public information regularly (Chopra et al., 2020).

The government's public communication can also be done through mass media and online media. Conveying public information through the mass media can also educate the public about the patho-

genesis, transmission, prevention, and control of the virus (Liu et al., 2020). Meanwhile, online media utilize digital technology in accordance with current development in technology. The COVID-19 pandemic provides great opportunities for digital technology to improve public health and communication (Ting et al., 2020). Digital technology can be in the form of social media. Social media can be one of the communication media during health crises and disasters (Yu et al., 2020). Since the beginning of the COVID-19 pandemic, social media has been a source of information and discussion (Xinning et al., 2017; Zhao et al., 2020).

Some literature shows varied responses to the COVID-19 pandemic in various countries. Indeed, some apply the same measures but get different results (Remuzzi & Remuzzi, 2020). Thus, this causes a gap in controlling the virus. This means that each country must prepare a good strategy to control the virus, including a communication strategy to minimize the gap or even avoid it. To date, no literature or study specifically addresses the issue of public communication in controlling the COVID-19 pandemic. Indonesia's government public communication shows inconsistency that affects people's understanding. Therefore, it is necessary to conduct this study in order to find solutions that contribute to the development of science and countries with poor public communication.

Studies related to public communication during the COVID-19 pandemic have never been carried out to date, but some studies have resulted in the information of public communication applied by several countries. Previous studies showed that the Chinese government implemented public communication by determining the main sources of public information handled by the government (Wu & McGoogan, 2020) and wisely using social (Wilder-Smith & Freedman, 2020). Meanwhile, the Taiwan government has public communication, which is centralized to the National Health Command Center (NHCC) and has been launched since the 2003 SARS pandemic. This command center coordinates with various agencies, including the Central Epidemic Command Center (Oxford Analytica, 2020; Wang et al., 2020), and the government-controlled social media during the pandemic (Cheng et al., 2020). Further, all hospitals sent public information on time (Chopra et al., 2020).

Previous studies (Cheng et al., 2020; Chopra et al., 2020; Wang et al., 2020; Wu & McGoogan, 2020) in China and Taiwan did not focus on public communication as a whole but resulted in several aspects, including a public communication strategy in controlling the COVID-19 pandemic. The public communication strategy in China was carried out by the government and did not prohibit other media, such as mass media, electronic media, social media, etc., but the government did not give them freedom and warned to provide positive and educative information. This also happens in Indonesia but the government of Indonesia gives freedom to various media to disseminate public information without filtering the information to be conveyed. Meanwhile, public communication in Taiwan is centralized at the National Health Command Center in which mass media are monitored by the government not to disseminate public information about COVID-19 and emphasize hospitals to report any information to the command center soon. Strategies implemented in Taiwan differed from those in Indonesia. Although the government of Indonesia has established a coordination center as a source of public information, it also gives freedom to various media to convey public information. Even this country often shows inconsistent information between hospitals and the government, both local and central government.

Some previous studies (Cheng et al., 2020; Chopra et al., 2020; Wang et al., 2020; Wu & McGoogan, 2020) showed different phenomenon with the condition in Indonesia, which creates gaps in implementing a public communication strategy. Since the first COVID-19 case has been announced by the President on March 2, 2020 (Almuttaqi, 2020), there have been inconsistent information and public communication issues. Public communication has been criticized by many parties, including experts, researchers, public and even government officials. The community expects that the government institution and mass media can provide information for the best decision-making for the affected community (Lestari et al., 2020).

This research framework covers several strategies undertaken by several countries and successfully implements public communication different

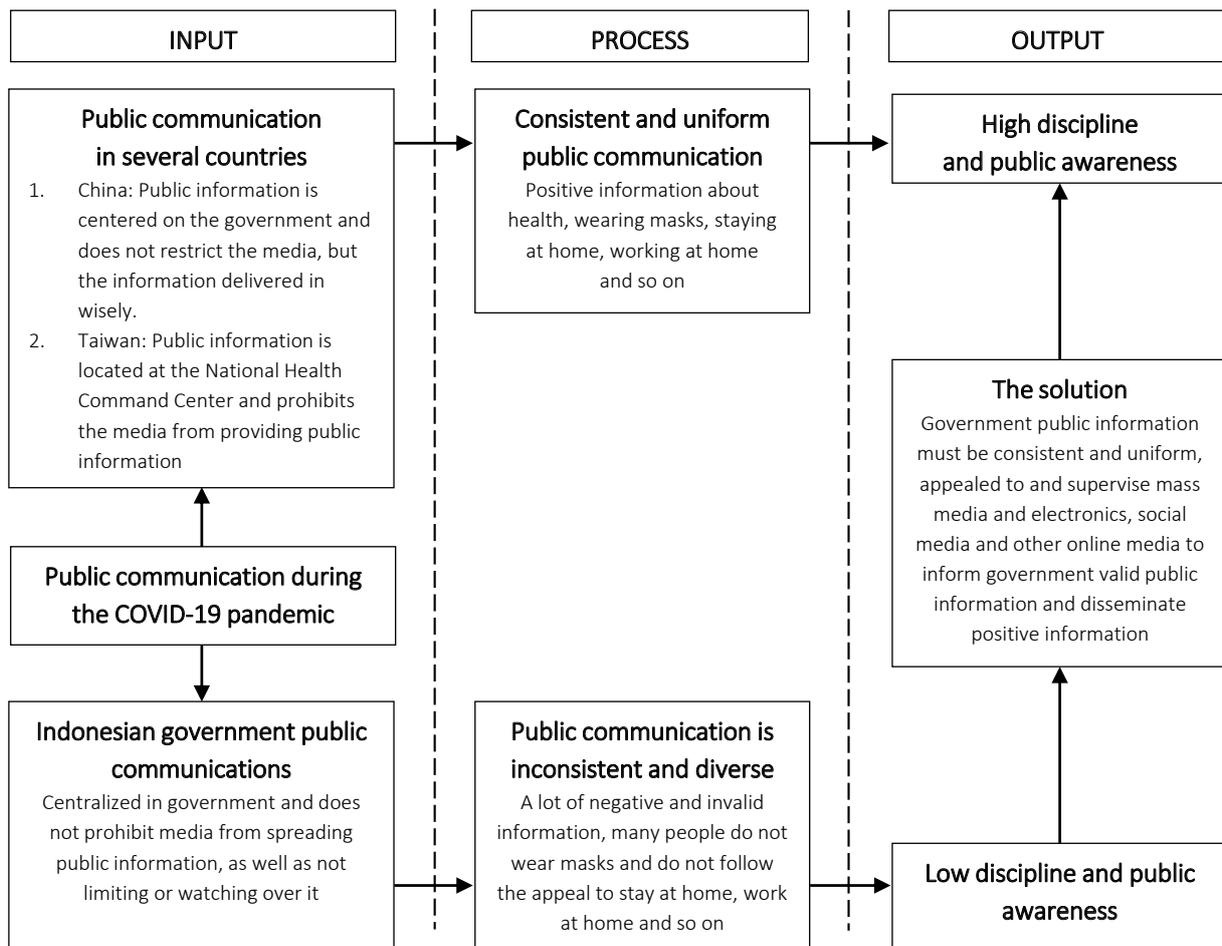


Figure 1. Research framework

from the Indonesian Government’s communication strategy, which is experiencing various problems. The problem is the discipline and awareness of the low society that raises the gap in implementing public communication in Indonesia. Based on this, a solution is proposed that can improve the communication strategy applied to improve the discipline and awareness of society and ultimately help the government in fighting the COVID-19 (Figure 1).

2. METHODS AND DATA

This study used a quantitative method using primary and secondary data. The data were collected from observations, questionnaires, and documents. The observation was to identify public communications implemented by the government in responding to the COVID-19

pandemic. The questionnaire was developed to collect data from respondents and consisted of a list of questions based on phenomena in the field. Before being distributed, the questionnaire was validated first through a pilot test in a region in which all question items were valid and reliable. The questionnaire was distributed using a Google form to all regions in Indonesia. Meanwhile, written documents covered books, journals, official government websites, information from mass media, and electronic media, including online media.

The sample for this study consisted of people aged 20 and over from Indonesia willing to fill out the questionnaire via a Google form. A total of 268 respondents completed the questionnaire. The collected data were then analyzed using descriptive statistics to organize and describe the characteristics of the sample.

3. RESULTS

The results of this study cover data about the public communication problems of Indonesia's government, the results of the SPSS test in the form of descriptive statistics, and the proposed research framework.

3.1. Public communication issues

The government of Indonesia provides varied public information without restricting mass media and other electronic media in providing public information. In general, the government's public communication strategy has not been effective as it has received a lot of criticism from ex-

perts, researchers, and even from the public thus far. The government's communication strategy in managing the COVID-19 pandemic faced many challenges such as unclear transmission clusters and limited information on the management of the victims (Sucahyo, 2020). The government did not provide detailed information to avoid panic and chaos (Liputan6.com, 2020). Different public communications regarding the management of COVID-19 illustrate the lack of government coordination (Maharani, 2020a). Table 1 presents some problems in public communication in Indonesia.

Table 1 shows that the government of Indonesia faced difficulties in implementing effective communication in which the government officials

Table 1. Problems in public communication in Indonesia

Phase	Statement
Pre-crisis (end of January –early March 2020)	False statements by state officials such as President, Vice President, Minister of Health, Coordinating Minister for Maritime Affairs, Coordinating Minister for Politics, Law, and Human Rights, Coordinating Minister for the Economy, Minister of Transportation, Head of the National Agency for Disaster Management (BNPB), Minister of Tourism, Presidential Spokesperson, Government Spokesperson for Handling Covid-19, the Directorate General of Transportation (Farisa, 2020; Mawardi, 2020)
	State officials such as President, Vice President, Minister of Health, Coordinating Minister for Maritime Affairs, Coordinating Minister for Political, Legal and Human Rights, Coordinating Minister for the Economy, Minister of Transportation, Head of the National Disaster Management Agency (BNPB), Minister of Tourism, Presidential Spokesperson, Government Spokesperson for Handling Covid-19, to the Directorate General of Transportation (Farisa, 2020; Mawardi, 2020)
Early crisis (2-14 March 2020)	Announcement of the first and second cases with inaccurate data revealing the patient data to the public (Almuttaqi, 2020)
	The case announcement by the President was late considering warning about this virus had been started since January and the media investigations reported one positive patient in Cianjur (Putra, 2020)
	The Covid-19 spokesman, who initially denied the COVID-19 case in Indonesia, admitted that the patient was indeed positive (Putra, 2020)
	The government has inconsistently stated that the patient who died in Cianjur was not caused by COVID-19, but then stated that the patient was tested positive for COVID-19 (Farisa, 2020)
	The Vice President, Ma'ruf Amin still had time to joke that wild horse milk could stop the transmission of this virus (Farisa, 2020; Putra, 2020)
Crisis	When other countries started to apply lockdown policy to prevent the spread of the virus, the Indonesian president and some ministers stated that they would promote the tourism sector during this pandemic (Farisa, 2020)
	The civil emergency status set by the President of the Republic of Indonesia was revised as a health emergency, regarding the leniency of vehicle loans, and the prohibition of returning hometown on Eid Al-Fitr (Putra, 2020)
	The Presidential Spokesperson corrected the statement of the President regarding the leniency of vehicle loans, which turned out to be intended for corona positive patients (Putra, 2020)
	The Presidential Spokesperson and the Coordinating Minister for Maritime Affairs corrected the statement of the President about the restriction to return to hometown and rectified it by allowing people to return to their hometown on Eid Al-Fitr but by practicing isolation (Putra, 2020)
	The Minister of Home Affairs stated that the virus has low death rate and is heat resistant; The Government Spokesperson for Handling COVID-19 stated that poor people transmit the virus to rich people; The Chief of Indonesian National Police threatened to send people to jail if gathering in the crowd and insulters during the pandemic. The Minister of Law and Human Rights stated that he wanted to release prisoners because of the pandemic (Putra, 2020)
	The government has just issued the Ministry of Health Regulation Number 9 of 2020 concerning Large-Scale Social Restrictions (PSBB) and Jakarta became the first region to implement this regulation (CNN Indonesia, 2020a)
	During the implementation of the PSBB policy in Jakarta, based on the Regulation of the Minister of Health, Apps-based transportation (motorcycle) is prohibited to carry passengers, but the Minister of Transportation allowed it with several conditions through the Minister of Transportation Regulation Number 18 of 2020 (CNBC Indonesia, 2020; CNN Indonesia, 2020b; Silaban, 2020a)

provided contradict information between one and another. The initial confirmation of positive COVID-19 cases in Indonesia caused debate even at the social media (detikcom, 2020). The government has poor communication management (Husna, 2020; Puspa, 2020) in which there is a lot of contradictory information in public communication (Husna, 2020). The public communication expert of Universitas Gadjah Mada, Professor Hermin Indah Wahyuni assessed that the current government's challenge is to provide more coordinated information (Sucahyo, 2020).

During the COVID-19 pandemic, the government has shown many mistakes in public communication (Farisa, 2020). This has caused panic in the community such as panic buying, negative stigma against the infected patients, bullying to infected patients, and even some patients running out from the hospital and refusing the status of Patients under Supervision (PDP) or positive (Mawardi, 2020; Putra, 2020). Many patients are dishonest with their condition resulting in transmission to healthcare workers (Iqbal, 2020; Nugroho, 2020; Prawira, 2020; Ramadhan, 2020). Further, the community in some regions rejected the burial of

the infected corpse in their area. This indicates the poor public communications management from the center to the regions. Therefore, public knowledge about the virus is still limited so that the public considered the corpse of the infected patients dangerous even though they have been treated in accordance with the WHO standard procedure (Pramuji, 2020).

3.2. Statistics result of Statistical Product and Service Solutions (SPSS)

The result of the SPSS test on the data obtained from the questionnaire is presented in Table 2. The test used descriptive statistics. The result showed mixed responses from respondents, mostly on scales of 3 and 4.

The respondent of this study has varied responses to the Indonesian government's public communication management in the prevention of the COVID-19 pandemic based on the mean value and the Likert scale level. Most of the respondent's responses showed a mean value of 4.47 indicating that in the response to COVID-19, the role of the

Table 2. Descriptive statistics

Source: SPSS test results.

Item	N	Min	Max	Mean	Scale	Category
Is the government's public communication regarding COVID-19 good?	268	1.00	5.00	2.9328	3	Quite Good
Is the government's public communication on the response to COVID-19 is inconsistent and diverse?	268	1.00	5.00	3.5187	3	Quite Agree
How is the communication style of public officials in response to COVID-19?	268	1.00	5.00	2.7351	3	Quite Good
Does the government's public communication in response to COVID-19 cause many mistakes?	268	1.00	5.00	3.5896	4	Agree
Is public panic caused by ineffective public communication?	268	1.00	5.00	3.9366	4	Agree
How big and important is the role of the media in helping the government to respond to the COVID-19?	268	1.00	5.00	4.4701	5	Strongly important
Is public panic caused by COVID-19 information from social media, which is not controlled by the government?	268	1.00	5.00	3.9925	4	Agree
Should the government control COVID-19 information from social media?	268	1.00	5.00	4.0634	4	Agree
Do people only want to know COVID-19 information from the government?	268	1.00	5.00	3.5299	4	Agree
Has the government provided risk communication to the community?	268	1.00	5.00	3.2985	3	Quite agree
Has public communication increased public trust in the measures taken by the government?	268	1.00	5.00	3.0746	3	Quite agree
Does frequent criticisms make the government improve its communication style?	268	1.00	5.00	3.4366	4	Agree
Are public communications between central and local government very different?	268	1.00	5.00	3.5672	4	Agree
Is the quality of public communication between central and local governments relatively the same?	268	1.00	5.00	2.9552	3	Quite agree
Does public communication in response to COVID-19 cause confusion and panic for public?	268	1.00	5.00	3.9664	4	Agree
How is the public trust in the government in response to the COVID-19?	268	1.00	5.00	2.9776	3	Quite believe

media is considered very important. Then, it was followed by a mean value of 4.06 meaning that the government needs to control COVID-19 information from social media. These results indicate that the prevention of the COVID-19 can be done well if the government uses media and controls the spread of information.

Meanwhile, some responses were considered in the sufficient category for some statements indicated by low mean values. The lowest response showed a mean value of 2.73 for the communication style of public officials in the response to COVID-19. Then public trust in the government in the prevention of the COVID-19 showed a mean value of 2.97; the quality of public communication between the central and local governments is relatively low with a value of 2.95; and government public communications regarding COVID-19 showed a value of 2.93. These data indicate that the public's assessment of the Indonesian government's public communication management is considered sufficient. It means that the public communication of the Indonesian government still needs to be improved and managed, especially the style of public communication of the public officials and public communication between the central and local governments. Therefore, it can increase public trust in the government and increase public discipline and awareness in the prevention of the COVID-19.

4. DISCUSSION

In response to the COVID-19 pandemic, the Indonesian government has implemented government-centered public communication without prohibiting media, including social media, from spreading public information about COVID-19. The strategy was implemented so that the government can inform the public widely to obey the government policy to protect the community from the spread and transmission of the virus. The government did not prohibit the media from spreading public information about the virus to make the public more aware of the virus. The government should work with the media to reduce fear in the society (Hopman et al., 2020). It aims to make it easier to provide understanding to the community. Public communication can be in the form of risk communication.

Public communication without any limitation in social media can negatively affect public communication because all media report anything without considering the accuracy of data, which may cause panic. Social media becomes an additional challenge in ensuring compliance during the pandemic (Wilder-Smith & Freedman, 2020). The result of this study also showed that the public considers the media important. As stated earlier, the government has received a lot of criticism from various groups, experts, researchers, and even the public. It is due to inconsistent and varied public communications as revealed by this study. The Presidential Expert staff acknowledges that the information provided is not detailed, particularly about patients, and public communication in Indonesia cannot be as transparent as in other countries (Liputan6.com, 2020; Patricia, 2020). This contradicts the results of previous studies that show that public communication is strived to be transparent (Lenca & Vayena, 2020) because communication plays a vital role in determining the response and reducing risk during a crisis (Lestari et al., 2020).

The government states that non-transparent public is not considered a problem. This statement contradicts the freedom of information as mandated by the Public Information Law (Idris, 2018) Number 14 of 2008 concerning Openness of Public Information, which guarantees the public to obtain public information and other information related to the public interest. This shows poor public communication management. This can lead to public misunderstanding and even affect public trust because each hospital has its spokesperson and provides different information (Puspa, 2020). This study found that public communication between the central and local governments is different and has a relatively similar quality. Besides, this condition is heated by the mass media to attract public interest. According to the public communication expert of Universitas Gadjah Mada, Prof. Hermin, media plays a vital role in public communication during the pandemic, hence media should be based on public logic in facing crisis or pandemic and accompany the community to get out of this crisis (Rahadi, 2020).

The Head of the Disaster Information and Communication Data Center of BNPB stated that the data presented by the central government are

not coherent with the local government (Human Rights Watch Group, 2020). The inconsistent public communication regarding the response to the COVID-19 pandemic illustrates poor government coordination (Maharani, 2020a). Indeed, coordination should not only be carried out between government agencies but also with the media, particularly social media that have a very significant influence on people's understanding. The low understanding of COVID-19 is affected by poor public communications and the inaccuracy of media coverage. The media do not use finer framing and only use click-bait about the COVID-19 situation, which can cause misunderstanding (Rahadi, 2020). This can worsen the situation and panic that undermines public trust.

The result of the study showed that information from social media is not controlled by the government. It causes panic, and people expect the government to control it as they only want to get the information of COVID-19 from the government. In response to the pandemic, social media should support and cooperate with the government in providing consistent, simple, and clear information (Hopman et al., 2020). Social media play an important role in public perception of crisis or disasters (Schultz et al., 2011; Xinning et al., 2017; Yu et al., 2020; Zhao et al., 2020). They aim to establish a public understanding of the risks of the virus and even can affect public trust in the government. The public can identify and anticipate the impact of the crisis as described by the government (Saleh & Yusmanizar, 2019). Then, the public will trust the government. Public trust in public health policies issued by the government is crucial, especially during the crisis (Blair et al., 2017).

The government's public communication in responding the COVID-19 becomes the spotlight as it is not systematic (Rahadi, 2020). The result of the study revealed that public communication is considered sufficient. The criticisms indicate that public trust in the government has decreased as evidenced by the result of this study in which public trust is an insufficient category. Indeed, the public may have a high level of trust in the government, but it can decrease over time (van der Weerd et al., 2011). The Indonesian government needs to improve communication with the public, especially about the risks of COVID-19. The pub-

lic believed that the Indonesian government has improved its communication style. Risk communication during the pandemic has a positive correlation with public trust in the government (Blair et al., 2017; Liao et al., 2010; van der Weerd et al., 2011). Currently, the Indonesian government has appointed a spokesperson for the response to COVID-19 as there was a lot of contradictory information from the beginning of the pandemic. To date, this has not been effective as there are criticisms on the government's public communications. Therefore, some members of the House of Representatives advise the government to appoint a Chief of Information Officer (CIO) who can build public awareness and trust through information (Maharani, 2020b). This means that the appointed spokesperson cannot provide a good understanding of the public. The government needs to improve public communication to control COVID-19 (Maharani, 2020a, 2020b).

According to Ova Emilia, communication is an important factor to make the public have a better understanding of the COVID-19, since poor communication will affect public understanding (Sucahyo, 2020). Effective internal communication is a prerequisite for success (Ruck & Welch, 2012). Thus, accurate information is needed, particularly public information regarding the risks of the pandemic. The result of the study showed that government communication about the risk of a pandemic is considered sufficient. Risk communication during the pandemic is crucial to provide accurate information (Husnayain et al., 2020). Efforts to prevent a pandemic can be assisted by proper risk communication (WHO Team, Department of Communications, Risk Communication, 2020). They should be implemented in Indonesia, but the government does not provide good examples for the community so that some do not obey the established regulation (Kumparan, 2020).

The government is considered not serious in the pre-crisis phase at the end of January – early March 2020 and even rejected the possibility of a COVID-19 case in Indonesia as a consequence; the public is not ready to face this virus (Farisa, 2020; Mawardi, 2020; Putra, 2020). Marc Lipsitch, a scientist from Harvard University stated that the coronavirus should have entered Indonesia, but the Minister of Health of the Republic of

Indonesia responded to this statement by declaring Indonesians immune to COVID-19 (Kompasiana.com, 2020). Even when the first case was identified, the information conveyed was also inaccurate and the patient's identity was not covered up due to poor public communication management. Even the Minister of Health of the Republic of Indonesia was the first to reveal the residence of first-two COVID-19 patients resulting in the use of police lines in their residence (Kompasiana.com, 2020). This received a lot of criticism and caused chaos in the community. The communication style of the Minister of Health is considered to be making a scene causing panic in the community (Kompasiana.com, 2020). It is in line with the result of the current study that the government's public communication is considered sufficient due to incorrect and ineffective communication.

The government's public communication was still ineffective until the mid of April 2020. Even when the DKI Jakarta Regional Government implemented the Large-Scale Social Restriction (PSBB) regulation to reduce the spread of the virus, the Ministry of Health and the Ministry of Transportation had contradictory regulation. Based on the Regulation of the Minister of Health, App-based transportations (motorcycle) are prohibited from carrying passengers, but the Minister of Transportation allows it with some requirements through the Minister of Transportation Regulation Number 18 of 2020 (CNBC Indonesia, 2020; CNN Indonesia, 2020b; Silaban, 2020a). This is contrary to the goal of social distancing policy. Even the government official often corrected other official's statements, which confused the public. This confusion has made the public have low awareness of the risk of COVID-19 transmission. Even during the implementation of PSBB in Jakarta, many companies did not comply with the rules, for example, keep working from the office and some closing their entrance but keep operating the business (Silaban, 2020b).

Based on the results and the discussion results presented above, it seems that the government's public communication has not been effective because of inconsistent information. Thus, it is necessary to evaluate public communication by centralizing the public information at the Ministry

of Health and restricting media, including social media, in reporting public information as practiced by Taiwan. Taiwan centralized the public communication about the pandemic at the Ministry of Health (Sucahyo, 2020) by assigning an integrated team (Chopra et al., 2020). Meanwhile, in China, social media is controlled to wisely report the situation and it makes the community take the initiative to protect themselves from the virus, stay at home, limit social contact, and wear face masks outside the house (Chen et al., 2020).

It is important to provide correct, brief and motivating information that supports the government measures to control the virus to the community. However, some information should not be widely published to prevent misunderstanding such as disinfecting the environment to stop the transmission of the virus (Hopman et al., 2020). Indeed, this happens in Indonesia as public received inaccurate data and information. The poor public communication management caused the emergence of new problems such as the rejection of the corpse of infected patients and Patients under Supervision (PDP) as the community has limited information about it (Human Right Watch Group, 2020) due to lack of socialization, educative communication, and news with invalid data.

The findings of this study indicate that the government's public communication management has not been effective due to inconsistent and varied dissemination of public information. It is also caused by the freedom of mass media and electronic media in reporting invalid data and information which causing gaps in controlling the COVID-19. It resulted in low discipline and awareness of public in following the government policies. Based on this gap, the government needs to solve this issue by providing consistent information, controlling mass media and electronic media in reporting public information. The findings of this study contribute to providing information and knowledge to the government both in Indonesia and other countries to improve and implement good public communication strategies during the pandemic.

In determining the dissemination of public information, the government should consider many as-

pects, either through government officials or mass media. Many countries have succeeded in implementing public communication through government officials only but some other also manage to do this by involving and controlling mass media. However, this country has not managed to do it. Therefore, the government needs to learn from other countries such as China and Taiwan that have good and successful public communi-

cation. Based on the findings of this study, future researchers focusing on the same topic are expected to conduct research in countries that have not faced any pandemic, such as Indonesia, so it is difficult for this country to deal with the pandemic. Meanwhile, both China and Taiwan previously had SARS, so current policies and public communication are making it possible to successfully fight COVID-19.

CONCLUSION

Effective public communication management during an outbreak must be centered on the government. However, the implementation may also involve various media (mass and electronic media), including social media and online media. In practice, the information reported by various media should be under the government control, so as to encourage positive news and increase public understanding and trust. Public communication in Indonesia is inconsistent. It affects the public's understanding of COVID-19 resulting in a low discipline and awareness to comply with government appeals and policies. A lot of negative and invalid information, people who do not wear a mask outside the house, and people who do not comply with work from home policy indicate that public communication is poor and problematic.

The results of this study show that the government's public communication management has not been effective due to inconsistent and varied dissemination of public information. The findings can contribute to the development of science and can help countries experiencing difficulties in fighting COVID-19, especially difficulties with public communication. The government needs to manage public communication and involve various parties, including the media. The importance of this is based on the findings of this study, which show that the media play a very important role in tackling COVID-19, when information disseminated by the media must still be closely monitored by the government to avoid spreading invalid information. These efforts, in turn, will affect public trust.

AUTHOR CONTRIBUTIONS

Conceptualization: Achmad Herman.
 Data curation: Achmad Herman.
 Formal analysis: Achmad Herman.
 Funding acquisition: Achmad Herman.
 Investigation: Achmad Herman.
 Methodology: Achmad Herman.
 Project administration: Achmad Herman.
 Resources: Achmad Herman.
 Software: Achmad Herman.
 Supervision: Achmad Herman.
 Validation: Achmad Herman.
 Visualization: Achmad Herman.
 Writing – original draft: Achmad Herman.
 Writing – review & editing: Achmad Herman.

REFERENCES

1. Almuttaqi, A. I. (2020). The Omnishambles of COVID-19 Response in Indonesia. *The Habibie Center*, 13. Retrieved from <https://www.habibiecenter.or.id/img/publication/66f28c42de71fefe1c6fcdee37a5c1a6.pdf>
2. Berger, Z. D., Evans, N. G., Phelan, A. L., & Silverman, R. D. (2020). Covid-19: Control measures must be equitable and inclusive. *BMJ*, 368. <https://doi.org/10.1136/bmj.m1141>
3. Blair, R. A., Morse, B. S., & Tsai, L. L. (2017). Public health and public trust: Survey evidence from the Ebola Virus Disease epidemic in Liberia. *Social Science & Medicine*, 172, 89-97. <https://doi.org/10.1016/j.socscimed.2016.11.016>
4. Chen, S., Yang, J., Yang, W., Wang, C., & Bärnighausen, T. (2020). COVID-19 control in China during mass population movements at New Year. *The Lancet*, 395(10226), 764-766. [https://doi.org/10.1016/S0140-6736\(20\)30421-9](https://doi.org/10.1016/S0140-6736(20)30421-9)
5. Cheng, H.-Y., Li, S.-Y., & Yang, C.-H. (2020). Initial rapid and proactive response for the COVID-19 outbreak – Taiwan's experience. *Journal of the Formosan Medical Association*, 119(4), 771-773. <https://doi.org/10.1016/j.jfma.2020.03.007>
6. Chopra, V., Toner, E., Waldhorn, R., & Washer, L. (2020). How Should U.S. Hospitals Prepare for Coronavirus Disease 2019 (COVID-19)? *Annals of Internal Medicine*. <https://doi.org/10.7326/M20-0907>
7. CNBC Indonesia. (2020, April 14). *Polemik Ojol Bawa Penumpang: Luhut izinkan, Anies Larang*. Retrieved from <https://www.cnbcindonesia.com/tech/20200414063212-37-151661/polemik-ojol-bawa-penumpang-luhut-izinkan-anies-larang>
8. CNN Indonesia. (2020a, April 7). *Anies Resmi Terapkan PSBB di DKI Jakarta Jumat 10 April 2020*. Retrieved from www.cnnindonesia.com/nasional/20200407152446-20-491265/anies-resmi-terapkan-psbb-di-dki-jakarta-jumat-10-april-2020
9. CNN Indonesia. (2020b, April 14). *Aturan Kemenkes-Kemenuh soal Ojol Disebut Tak Bertentangan*. Retrieved from <https://www.cnnindonesia.com/ekonomi/20200414203025-92-493582/aturan-kemenkes-kemenuh-soal-ojol-disebut-tak-bertentangan>
10. Cowper, A. (2020). Covid-19: Are we getting the communications right? *BMJ*, 368. Retrieved from <https://doi.org/10.1136/bmj.m919>
11. detikcom, T. (2020, March 3). *Pola Komunikasi Menkes soal Penyebaran Virus Corona Disorot*. Retrieved from <https://news.detik.com/berita/d-4922743/pola-komunikasi-menkes-soal-penyebaran-virus-corona-disorot>
12. Farisa, F. C. (2020, April 6). *LP3ES Catat Ada 37 Pernyataan Blunder Pemerintah soal Covid-19*. KOMPAS.com. Retrieved from <https://nasional.kompas.com/read/2020/04/06/17522121/lp3es-catat-ada-37-pernyataan-blunder-pemerintah-soal-covid-19>
13. Hamzah, F. B., Lau, C., Nazri, H., Ligot, D. V., Lee, G., & Tan, C. L. (2020). CoronaTracker: Worldwide COVID-19 outbreak data analysis and prediction. *Bull World Health Organ*, 1, 32. Retrieved from https://www.researchgate.net/publication/340032869_CoronaTracker_World-wide_COVID-19_Outbreak_Data_Analysis_and_Prediction
14. Hopman, J., Allegranzi, B., & Mehtar, S. (2020). Managing COVID-19 in Low- and Middle-Income Countries. *JAMA*. <https://doi.org/10.1001/jama.2020.4169>
15. Hua, J., & Shaw, R. (2020). Corona Virus (COVID-19) "Infodemic" and Emerging Issues through a Data Lens: The Case of China. *International Journal of Environmental Research and Public Health*, 17(7), 2309. <https://doi.org/10.3390/ijerph17072309>
16. Human Right Watch Group. (2020, April 7). *HRWG Soroti Penanganan Covid-19 di Indonesia*. Beritajatim. Retrieved from <https://beritajatim.com/postingan-anda/hrwg-soroti-penanganan-covid-19-di-indonesia/>
17. Husna, M. A. (2020, April 7). *Pakar Komunikasi UGM Rekomendasikan Komunikasi Publik Pemerintah Terkait Covid-19*. Tribun Jogja. Retrieved from <https://jogja.tribunnews.com/2020/04/07/pakar-komunikasi-ugm-rekomendasikan-komunikasi-publik-pemerintah-terkait-covid-19>
18. Husnayain, A., Fuad, A., & Su, E. C.-Y. (2020). Applications of google search trends for risk communication in infectious disease management: A case study of COVID-19 outbreak in Taiwan. *International Journal of Infectious Diseases*. <https://doi.org/10.1016/j.ijid.2020.03.021>
19. Idris, I. K. (2018). Government Social Media in Indonesia: Just Another Information Dissemination Tool. *Jurnal Komunikasi: Malaysian Journal of Communication*, 34(4), Article 4. Retrieved from <http://ejournal.ukm.my/mjc/article/view/28954>
20. Iqbal, M. (2020, April 17). *Ada Pasien Bohong, 46 Tenaga Medis RS Kariadi Kena Covid-19*. news. Retrieved from <https://www.cnbcindonesia.com/news/20200417104849-4-152605/ada-pasien-bohong-46-tenaga-medis-rs-kariadi-kena-covid-19>
21. Kompasiana.com. (2020, March 9). *Menakar Gaya Komunikasi Terawan, Fakta atau ABS?* KOMPASIANA. Retrieved from <https://www.kompasiana.com/elangmaulana5304/5e65c8d9d541df227a51ee03/menakar-gaya-komunikasi-terawan-fakta-atau-abs>
22. Kumparan. (2020, April 13). *Komisi III Kritik Koordinasi Luhut-Terawan soal Ojol: Warga Bisa Tak Ikuti PSBB*. LINE TODAY. Retrieved from <https://today.line.me/id/article/Komisi+III+Kritik+Koordinasi+L>

- uhut+Terawan+soal+Ojol+Warga+Bisa+Tak+Ikuti+PSBB-nONYgg
23. Lenca, M., & Vayena, E. (2020). On the responsible use of digital data to tackle the COVID-19 pandemic. *Nature Medicine*, 26(4), 463-464. <https://doi.org/10.1038/s41591-020-0832-5>
 24. Lestari, P., Ritonga, R., Ruliana, P., & Barus, C. C. B. (2020). Disaster Communication Uses Field Training Exercise Simulation as an Important Aspect of Disaster Risk Reduction. *Jurnal Komunikasi: Malaysian Journal of Communication*, 36(1), Article 1. Retrieved from <http://ejournal.ukm.my/mjc/article/view/37501>
 25. Liao, Q., Cowling, B., Lam, W. T., Ng, M. W., & Fielding, R. (2010). Situational awareness and health protective responses to pandemic influenza A (H1N1) in Hong Kong: A cross-sectional study. *PLoS One*, 5(10), e13350. <https://doi.org/10.1371/journal.pone.0013350>
 26. Liputan6.com. (2020, March 11). *Komunikasi Penanganan Covid-19 Kurang Transparan, Ini Penjelasan Pemerintah*. liputan6.com. Retrieved from <https://www.liputan6.com/news/read/4199581/komunikasi-penanganan-covid-19-kurang-transparan-ini-penjelasan-pemerintah>
 27. Liu, Q., Zheng, Z., Zheng, J., Chen, Q., Liu, G., Chen, S., Chu, B., Zhu, H., Akinwunmi, B., Huang, J., Zhang, C. J. P., & Ming, W.-K. (2020). Health Communication Through News Media During the Early Stage of the COVID-19 Outbreak in China: Digital Topic Modeling Approach. *Journal of Medical Internet Research*, 22(4), e19118. <https://doi.org/10.2196/19118>
 28. Maharani, T. (2020a, April 4). *Jokowi Diminta Benahi Komunikasi Publik Jajarannya soal Penanganan Covid-19*. KOMPAS.com. Retrieved from <https://nasional.kompas.com/read/2020/04/04/20050261/jokowi-diminta-benahi-komunikasi-publik-jajarannya-soal-penanganan-covid-19>
 29. Maharani, T. (2020b, April 6). *Komunikasi Pemerintah soal Covid-19 Dikritik, Jokowi Disarankan Tunjuk Jubir yang Lebih Ulung*. KOMPAS.com. Retrieved from <https://nasional.kompas.com/read/2020/04/06/10000051/komunikasi-pemerintah-soal-covid-19-dikritik-jokowi-disarankan-tunjuk-jubir>
 30. Mawardi, I. (2020, April 6). *LP3ES: Ada 37 Pernyataan Blunder Pemerintah Terkait Penanganan Corona*. detiknews. Retrieved from <https://news.detik.com/berita/d-4967015/lp3es-ada-37-pernyataan-blunder-pemerintah-terkait-penanganan-corona>
 31. Nugroho, P. D. P. (2020, April 15). *Pasien Positif Covid-19 di Grobogan Berbohong, 20 Pegawai RSUD Purwodadi Rapid Test Ulang*. Retrieved from <https://regional.kompas.com/read/2020/04/15/20303011/pasien-positif-covid-19-di-grobogan-berbohong-20-pegawai-rsud-purwodadi>
 32. Oxford Analytica. (2020). COVID-19 strengthens the hand of Taiwan's government. *Emerald Expert Briefings*, oxan-db(oxan-db). <https://doi.org/10.1108/OXAN-DB251284>
 33. Paakkari, L., & Okan, O. (2020). COVID-19: Health literacy is an underestimated problem. *The Lancet Public Health*, 5(5), e249–e250. [https://doi.org/10.1016/S2468-2667\(20\)30086-4](https://doi.org/10.1016/S2468-2667(20)30086-4)
 34. Patricia, S. (2020, March 11). *Pemerintah Terus Perbaiki Komunikasi Publik*. Kompas.Id. Retrieved from <https://kompas.id/baca/humaniora/2020/03/11/pemerintah-terus-perbaiki-komunikasi-publik/>
 35. Pramuji. (2020, April 3). *Penolakan Jenazah Korban Covid-19 Bukti Manajemen Komunikasi Pemerintah Lemah Suara Karya*. Retrieved from <https://suarakarya.co.id/penolakan-jenazah-korban-covid-19-bukti-manajemen-komunikasi-pemerintah-lemah/20807/>
 36. Prawira, A. E. (2020, April 17). *Dokter pun Bisa Terjangkit Corona, Kejujuran Pasien Menjadi Sangat Berharga – Health Liputan6.com*. Retrieved from <https://www.liputan6.com/health/read/4229929/dokter-pun-bisa-terjangkit-corona-kejujuran-pasien-menjadi-sangat-berharga>
 37. Puspa, A. (2020, March 13). *DPR Kritis Komunikasi Publik Pemerintah Soal Covid-19*. Media Indonesia. Retrieved from <https://mediaindonesia.com/read/detail/296484-dpr-kritis-komunikasi-publik-pemerintah-soal-covid-19>
 38. Putra, P. M. S. (2020, April 7). *LP3ES: Ada 37 Statemen Blunder Pemerintah terkait Covid 19 – News Liputan6.com*. Liputan6. Com. Retrieved from <https://www.liputan6.com/news/read/4221200/lp3es-ada-37-statemen-blunder-pemerintah-terkait-covid-19>
 39. Qiu, J., Shen, B., Zhao, M., Wang, Z., Xie, B., & Xu, Y. (2020). A nationwide survey of psychological distress among Chinese people in the COVID-19 epidemic: Implications and policy recommendations. *General Psychiatry*, 33(2). <https://doi.org/10.1136/gpsych-2020-100213>
 40. Rahadi, F. (2020, April 10). *Informasi Terkait Covid-19 Belum Sepenuhnya Dipahami*. MSN. Retrieved from <https://www.msn.com/id-id/berita/nasional/informasi-terkait-covid-19-belum-sepenuhnya-dipahami/rr-BB12peaM>
 41. Ramadhan, G. (2020, April 17). *46 Tenaga Medis RSUP Kariadi Positif Corona Akibat Pasien Tak Jujur – Tirto.ID*. Retrieved from <https://tirto.id/46-tenaga-medis-rsup-kariadi-positif-corona-akibat-pasien-tak-jujur-eNUR>
 42. Remuzzi, A., & Remuzzi, G. (2020). COVID-19 and Italy: What next? *The Lancet*. [https://doi.org/10.1016/S0140-6736\(20\)30627-9](https://doi.org/10.1016/S0140-6736(20)30627-9)
 43. Robinson, J., & Kengatharan, N. (2020). Exploring the effect of Covid-19 on Small and Medium Enterprises: Early Evidence from Sri Lanka. *Journal of Applied Economics & Business Research*, 10(2). Retrieved from <https://pesquisa.bvsalud.org/global-literature-on-novel-coronavirus->

- [2019-ncov/resource/en/covid-who-665263](https://doi.org/10.1016/j.pubrev.2011.12.016)
44. Ruck, K., & Welch, M. (2012). Valuing internal communication; management and employee perspectives. *Public Relations Review*, 38(2), 294-302. <https://doi.org/10.1016/j.pubrev.2011.12.016>
 45. Saleh, R., & Yusmanizar. (2019). Emergency Response and Communication During Bili-Bili Dam Flood Crisis in Indonesia. *Jurnal Komunikasi: Malaysian Journal of Communication*, 35(4), Article 4. Retrieved from <http://ejournal.ukm.my/mjc/article/view/36901>
 46. Schultz, F., Utz, S., & Göritz, A. (2011). Is the medium the message? Perceptions of and reactions to crisis communication via twitter, blogs and traditional media. *Public Relations Review*, 37(1), 20-27. <https://doi.org/10.1016/j.pubrev.2010.12.001>
 47. Sheen, G. C.-H., Tung, H. H., & Wu, W.-C. (2020). *Citizen Journalism and Credibility of Authoritarian Government in Risk Communication Regarding the 2020 COVID-19 Outbreak: A Survey Experiment* (pp. 1-11) (Working Paper, 0040). Retrieved from <https://nyuad.nyu.edu/content/dam/nyuad/academics/divisions/social-science/working-papers/2020/0040.pdf>
 48. Silaban, M. W. (2020a, April 14). *Ombudsman Jakarta: Permenhub Ojol Tak Sesuai Social Distancing*. Tempo. Retrieved from <https://metro.tempo.co/read/1331572/ombudsman-jakarta-permenhub-ojol-tak-sesuai-social-distancing>
 49. Silaban, M. W. (2020b, April 14). *PSBB Jakarta, Ada Kantor Depannya Tutup tapi Karyawan Tak WFH*. Tempo. Retrieved from <https://metro.tempo.co/read/1331559/psbb-jakarta-ada-kantor-depannya-tutup-tapi-karyawan-tak-wfh>
 50. Sucahyo, N. (2020, April 8). *Pemerintah Harus Perbaiki Komunikasi Publik Terkait Corona*. VOA Indonesia. Retrieved from <https://www.voaindonesia.com/a/pemerintah-harus-perbaiki-komunikasi-publik-terkait-corona/5364324.html>
 51. Ting, D. S. W., Carin, L., Dzau, V., & Wong, T. Y. (2020). Digital technology and COVID-19. *Nature Medicine*, 26(4), 459-461. <https://doi.org/10.1038/s41591-020-0824-5>
 52. Triwibowo, W. (2020, March 27). *Analisis: Pemerintah masih bisa perbaiki komunikasi krisis pandemi yang sejauh ini gagal*. THE CONVERSATION. Retrieved from <http://theconversation.com/analisis-pemerintah-masih-bisa-perbaiki-komunikasi-krisis-pandemi-yang-sejauh-ini-gagal-134542>
 53. Van der Weerd, W., Timmermans, D. R., Beaujean, D. J., Oudhoff, J., & van Steenbergen, J. E. (2011). Monitoring the level of government trust, risk perception and intention of the general public to adopt protective measures during the influenza A (H1N1) pandemic in the Netherlands. *BMC Public Health*, 11(1), 575. <https://doi.org/10.1186/1471-2458-11-575>
 54. Wang, C. J., Ng, C. Y., & Brook, R. H. (2020). Response to COVID-19 in Taiwan: Big Data Analytics, New Technology, and Proactive Testing. *JAMA*. <https://doi.org/10.1001/jama.2020.3151>
 55. WHO Team, Department of Communications, Risk Communication. (2020, January 26). *Risk communication and community engagement (RCCE) readiness and response to the 2019 novel coronavirus (2019-nCoV)*. World Health Organization. Retrieved from <https://www.who.int/publications-detail/risk-communication-and-community-engagement-readiness-and-initial-response-for-novel-coronaviruses>
 56. Wilder-Smith, A., & Freedman, D. O. (2020). Isolation, quarantine, social distancing and community containment: Pivotal role for old-style public health measures in the novel coronavirus (2019-nCoV) outbreak. *Journal of Travel Medicine*, 27(2). <https://doi.org/10.1093/jtm/taaa020>
 57. Wu, Z., & McGoogan, J. M. (2020). Characteristics of and Important Lessons From the Coronavirus Disease 2019 (COVID-19) Outbreak in China: Summary of a Report of 72 314 Cases From the Chinese Center for Disease Control and Prevention. *JAMA*. <https://doi.org/10.1001/jama.2020.2648>
 58. Xinning, G., Y, W., Y, K., Tl, R., Y, C., Q, M., & K, Z. (2017). Understanding the Patterns of Health Information Dissemination on Social Media during the Zika Outbreak. *AMIA ... Annual Symposium Proceedings. AMIA Symposium*, 820-829. Retrieved from <https://pubmed.ncbi.nlm.nih.gov/29854148/>
 59. Yu, M., Li, Z., Yu, Z., He, J., & Zhou, J. (2020). Communication related health crisis on social media: A case of COVID-19 outbreak. *Current Issues in Tourism*, 1-7. <https://doi.org/10.1080/13683500.2020.1752632>
 60. Zhang, L., Li, H., & Chen, K. (2020). Effective Risk Communication for Public Health Emergency: Reflection on the COVID-19 (2019-nCoV) Outbreak in Wuhan, China. *Healthcare*, 8(1), 64. <https://doi.org/10.3390/healthcare8010064>
 61. Zhao, Y., Cheng, S., Yu, X., & Xu, H. (2020). Chinese Public's Attention to the COVID-19 Epidemic on Social Media: Observational Descriptive Study. *Journal of Medical Internet Research*, 22(5), e18825. <https://doi.org/10.2196/18825>