

Communication Management of Covid-19 Survivors in Indonesia

by Nani Nurani Muksin

Submission date: 12-Apr-2023 08:50AM (UTC+0700)

Submission ID: 2062102327

File name: 125964727.pdf (212.58K)

Word count: 4579

Character count: 26716

Communication Management of Covid-19 Survivors in Indonesia

*1st Nani Nurani Muksin
Master of Communication Studies
Universitas Muhammadiyah Jakarta
 Jakarta, Indonesia
 naninuranimuksin@umj.ac.id

4th Hendra Hidayat
Master of Communication Studies
Universitas Muhammadiyah Jakarta
 Jakarta, Indonesia
 hendrahidayathhd@gmail.com

2nd Mulkan Habibi
Communication Department
Universitas Muhammadiyah Jakarta
 Jakarta, Indonesia
 mulkan.habibi@umj.ac.id

5th Rahman Djalun
Communication Department
Universitas Muhammadiyah Jakarta
 Jakarta, Indonesia
 rahmandjalun123@gmail.com

3rd Tria Patrianti
Communication Department
Universitas Muhammadiyah Jakarta
 Jakarta, Indonesia
 tria.patrianti@umj.ac.id

Abstract— A COVID-19 survivor is a person who recovered from COVID-19. Various valuable experiences can be used as lessons from COVID-19 survivors, especially communication experiences in healing and post-healing process. The purpose of this research is to make sense of the experience of Communication Management for COVID-19 Survivors. This study refers to Michael Kaye's model of Communication Management. This research approach is qualitative with the phenomenological method. The informants were 20 COVID-19 survivors in Indonesia. The results shows COVID-19 survivor has competence in communication management and considers that communication is an important factor in helping recovery. Communication management is done through Self-Management with a focus on health, pray a lot, think positively and motivate yourself to heal. Interpersonal communication is carried out intensively with closest relatives to sharing feelings of joy and sorrow. Communication management in the system is managed through communication with groups such as paramedics, colleagues, and the public to foster enthusiasm. It's hoped this research can eliminate the negative stigma.

Keywords—*Communication management, COVID-19 Survivors, Indonesia*

I. INTRODUCTION

The phenomenon at the end of 2019 and early 2020 was the emergence of a pandemic of novel coronavirus infection or abbreviated as COVID-19 which became a world health problem. As informed by the World Health Organization (WHO) on December 31, 2019, a cluster of pneumonia cases with the etiology of the novel coronavirus appeared in Wuhan City, Hubei Province, China. This case continues to develop, causing death and importation outside China (Sugihantono, 2020: 3)[1]. Until finally, the COVID-19 pandemic infected almost all citizens of the world.

The Covid-19 pandemic is still not over, even though vaccinations have taken place in several countries. Based on Worldometers data, there were 1,662,868 COVID-19 sufferers in Indonesia on April 30, 2021, with 45,334 deaths and 1,517,432 patients recovered [2]. Referring to these data, there are more patients recover than those who

died and it give hope to people. It is interesting to study, especially concerning how the patient's communication management is during treatment until recovery.

Communication management experiences for COVID-19 survivors can also educate the public that COVID-19 can be cured. This study is also important due to the negative stigma that Covid-19 sufferers receive. As stated by Dicky Pelupessy (2020), Synergy Mahadata Team for COVID-19 Response, University of Indonesia, some problems need to be addressed, namely stigma against health workers, COVID-19 patients, and families. This stigma results in the exclusion and expulsion of Covid patients and their families [3]. This problem is concerning, considering that sufferers of COVID-19 should receive support in healing and post-healing process.

The negative stigma is also aimed at patients who have recovered or survivors of COVID-19. Retno Asti, Member of the Tracing Sub-Division for Health Management of the Indonesian Covid-19 Task Force, said that the negative stigma against Covid-19 patients could cause people to be afraid to admit that they are suffering from Covid-19, emphasized the importance of communication to prevent the negative stigma of patients and survivors of COVID-19 as if it were a source of problems [4]. In fact, COVID-19 survivors can contribute in the form of experiences as learning for the community. Social stigma according to WHO, in the context of health, is a negative relationship between a person or group of people who share certain characteristics and certain diseases. Stigma can encourage people to hide illness to avoid discrimination, prevent people from seeking immediate health care, and prevent people from adopting healthy behaviors [5]. It is hoped that the stories of the survivors of COVID-19 can eliminate this stigma.

The cause of negative stigma for COVID-19 is the level of knowledge that affects the understanding of human behavior and the dissemination of incorrect information. The type of stigma posed may be due to discrimination, etiquette, or public opinion. The side effects of COVID-19 can cause barriers to detecting relevance, leading to notification of

issues such as stress and mental health issues. Prevention of COVID-19 can be done by providing education, improving health, providing accurate information, controlling incorrect information, and providing psychological support for counseling people with disabilities.[6]

The purpose of this study is to describe and interpret the communication management experience of Covid-19 survivors related to self-management, interpersonal communication, communication management in systems and communication management competencies. Communication management theory research from Michael Kaye (1994) which defines communication management is how people manage their communication processes through interpreting the meaning of their relationships with others in various settings. They manage their communication and actions in large relationships - some personal some professional [7]. In the context of this research is how the COVID-19 survivors communicate in situations of interpersonal communication, group communication, and communication with the community, especially when infected with COVID-19.

Kaye specifically describes communication management through a model in the form of "Russian Matoushka dolls". The first and smallest dolls are the innermost parts representing "self". Understanding yourself is a very important stage in achieving effective self-management. The second doll is an "interpersonal doll" which focuses on how "self" relates to other people and carries out a communication process that aims to build meaning. The third doll is the "people-in-system doll", describing how the social system or organization in which a person works can have an effect on that person from the way they communicate with other people in the system. The fourth doll, which covers all the other dolls, represents a "competence doll". This doll describes the entire communication management process of an individual [7]. A person becomes competent in intrapersonal communication when he can understand himself and can lead to "self-control".

II. METHOD

This research approach is qualitative with the phenomenological method. The study of phenomenology aims to explore the deepest awareness of the subjects regarding experiences and their meanings. The sources of information were 20 informants who survived COVID-19 in Indonesia. The determination of informants was carried out using purposive techniques, namely those who had been infected with Corona Virus. The 20 informants consisted of 9 men and 11 women, ranging in age from 18 - 59 years. Work as Lecturers, Students, Nurses, Civil Servants and Entrepreneurs, who come from the Jakarta, Tangerang, Bekasi, Bogor, and Sukabumi areas.

The data collection technique was done by interviewing online. While the data analysis technique used is a modification of the phenomenological analysis technique from Van Kaam in (Moustakas, 1994), which includes 1) Listing and Preliminary Grouping, listing all expressions relevant to experience, namely a list of answers to informants or research subjects (horizontalization); 2) Reduction and Elimination, Testing each existing expression with; 3) Clustering and Thematizing the Invariant Constituents (Thematic Potrayal); 4) Final Identification of the Invariant

Constituents and Themes by Application: Validation; 5) Individual Textural Description; 6) Individual Structural Description; 7) Textural-Structural Description [8].

III. RESULT AND DISCUSSION

A. Self Management

The first stage of communication management for COVID-19 survivors is carried out through Self-Management. This stage is carried out by interpersonal communication, communication with themselves, reflection and self-introspection [7].

Self-management in the form of treatment that COVID-19 survivors do for themselves while infected with COVID-19 is generally self-motivation, praying, thinking positively and optimistic, and doing hobbies. The optimism that the community shows is so important that it needs to be improved. People should know that optimism is the key to a strong immune system. This is because Indonesians are in a good position to face Covid-19.[9]

In addition, self-management is carried out by transcendental communication, praying a lot asking for strength and healing. In addition, they also carry out health treatment by taking regular medication and sunbathing. Take the time to reduce stress and boredom by watching Youtube, movies like Netflix, Korean dramas, and channeling hobbies such as reading books, painting, and singing. Good habits boost the immune system, so the chances of a crown infection are low. Healthy skin maintains immune function. And stress can affect immunity so doing things you like become important thing.[9]

The results of the interviews showed that survivors of COVID-19 generally surrendered when they first tested positive for COVID-19, besides that they also felt sad, afraid, and some felt confused, bored, and stressed, but there were also those who felt normal or nothing. Meanwhile, some of them also have positive feelings such as just let it be, patient, optimistic that they will recover soon so that they can carry out normal activities, taste delicious food and reunite with family. Informants do self-management by fighting negative feelings such as sadness and fear of becoming positive feelings and let it go. Self-management is also carried out by motivating yourself to always positive thinking, they set a positive mindset that they will be cured and living as before, keeping the mood happy so that they can increase their body's immune system and spirit so that they can recover quickly and reunite with families who are sources of joy.

This is in line with the results of research on the quality of life related to the health of COVID-19 survivors who are hospitalized: Initial exploration in the city of Nanning, China, by Chenhui Wu, et all, reveals the quality of life related to the health of the treated COVID-19 survivors. in the hospital. Hospitalized COVID-19 survivors provided eight-dimensional empirical evidence (physical symptoms, anxiety, trauma, economic loss, place-based identity, self-stigma, self-health interventions) [10].

Survivors of COVID-19 generally think that the illness they suffer is a result of not maintaining their health so that their immunity decreases and is a test of life to be more aware of health and take better care of themselves. When

finally declared cured, the feeling of the COVID-19 survivors was happy, relieved and grateful that he had gone through the years of Covid-19 treatment. In addition, informants who have been declared cured also feel excited for convalescent donors so that similar covid sufferers are alleviated by blood plasma of covid survivors.

B. Interpersonal Communication

The second stage in communication management is interpersonal communication, which is communicating with the closest people such as family, lovers and friends to convey things that are private. Communication messages are in the form of information on conditions experienced, both joy and sorrow. Almost all informants conveyed their condition when they felt pain to their family and close friends. Family Communication Management During the COVID-19 Pandemic, Ana Kuswanti, et al. [11], This paper writes about family communication management strategies during the COVID-19 Pandemic so that a harmonious family can be created.

Interpersonal communication mainly uses telephone communication media, and WhatsApp especially video calls. Moreno, et al (2020), "Covid-19 communication management in Spain: Exploring the effect of information-seeking behavior and message reception in public's evaluation". This article argues that WHO has emphasized communication as one of the greatest challenges and placed risk communication among the critical competencies needed to tackle a pandemic. Three of the four most widely used information channels are considered mainstream news media. The second source of information is WhatsApp [12]. Communication with the closest relatives (family and friends) is very meaningful because it provides strength and encouragement during the treatment. Families have an important role in efforts to prevent Covid-19 and support recovery process, namely support in the form of informational support, instrumental support, emotional support and appreciation support.[13]

Communication in this case does not only carry out an informative function, but is also persuasive and entertaining. Communication with friends and colleagues, besides using WhatsApp, they also using social media such as Instagram and Facebook. Communication through various media is very helpful to provide entertainment and encouragement, so you don't feel alone even though you are in isolation. O'Brien, et al, 2020, Social Media Spread During Covid-19: The Pros and Cons of Likes and Shares. Social media and the sharing of information, ideas, pictures and videos can be very powerful tools to achieve this. WHO recognizes how social media "can be used to engage the public, facilitate peer-to-peer communication, create situational awareness, monitor and respond to public rumors, reactions and concerns during emergencies, and facilitate local level responses" [14].

Survivors of COVID-19 tell their closest relatives such as family (parents, husband / wife, relatives), friends, and local RT when they tested positive for COVID-19, undergoing treatment, or when they were declared cured. Generally, the things that are told by COVID-19 survivors are about the symptoms they felt and give insights or suggestions to maintain health better way in order to avoid COVID-19. COVID-19 survivors also receive motivation in the form of support, prayers, advice and tips so that they can recover

quickly from COVID-19 and receive attention in the form of logistical support, medicines, vitamins, food, etc. In addition, support in the form of jokes and funny stories to entertain and increase the body's immune system and the hope that we need our energy and thoughts is still much needed out there. The informants also tell relatives to get COVID-19 test for who got close contact with them especially who have similar symptoms.

However, there are some of the COVID-19 survivors who hide their conditions to friends and neighbors, this was done out of fear and avoided unpleasant things such as being shunned or being gossip as a negative stigma are around them. COVID-19 pandemic in social stigma that can affect changes in a person's emotions and behaviors. Government and community partnerships have been instrumental in reducing the proliferation and control of COVID-19.[15] In addition, there are reasons for hiding their conditions from parents that was because of the fear of load more burden on the mind of parents.

One of the informant share her experience that she hide her conditions when she got shortness of breath which must always be assisted by oxygen and a ventilator, but she hide it so that the family does not feel sad, considering that her family members is also undergoing treatment at the hospital. However, on the other side there's also the informant who was treated at the Intensive Care Unit of a hospital communicates intensively with his girlfriend almost every night to accompany him before bed, who feels lonely alone in the treatment room, a touching story.

Some of the COVID-19 survivors have also had unpleasant attitudes and behaviors from neighbors in the form of being shunned or ostracized. However, COVID-19 survivors choose to ignore these actions and try to stay positive.

Empathic communication is very important in handling the COVID-19 pandemic. Effective health communication - a key factor in fighting the COVID-19 pandemic, A. Finset, H. Bosworth, et al, 2020. In the Pandemic era, effective health communication is needed because of the massive flow of information that is developing and the need to deal with uncertainty and fear [16] Therefore, information must be empathic, showing concern and acknowledging the impact of the situation on individuals and their lives.

C. Communication in a System

The third stage is communication in a system that is linked to group communication, both work groups, paramedics who treat them during illness, as well as neighbors and colleagues. Communication in the system which is linked to group communication during treatment is carried out by telephone, WhatsApp, and social media such as Facebook and Instagram as well as work media or online lectures with Zoom Meeting. Basthouri Muslih, 2020, The Urgency of Communication in Fostering Motivation in the Covid-19 Pandemic Era [17], examines individual habits in communicating and interacting with physical encounters no longer a priority during the Covid-19 pandemic

Most of Covid-19 survivors received good and non-discriminatory services from offices and campuses. Experience in the form of good service from the office in the

form of providing work dispensation and relieved of temporary office duties until recovered. Get medicine, vitamins, masks, fruits from the office, and motivation to recover so that they can share experiences. The college student informants also got a good service from the campus in the form of tolerance so that it is more focused on healing.

One of the informants who was still in college also shared her experience that she was working on a college assignment by borrowing the head of the hospital's laptop. The hospital is supportive because they think that being busy can increase immunity. Dasrun, et al, Crisis Management and Communication Experience in Education during the COVID-19 Pandemic in Indonesia. Focus on crisis management in education by implementing Study From Home (SFH) as an emergency learning program during the COVID-19 pandemic [18]. Groups on campus, offices, and around their homes also provide support in the form of motivation, advice, prayers, and logistical needs such as food and medicine.

There was also experience that in COVID-19 survivor's neighborhood was so kind of giving support. The neighbors not only provide such mental support (advice, prayers, and motivation) but also give supporting items such as vitamins, medicines, food, mask, etc during self-isolation. Some of COVID-19 survivors also receive financial support. Social support plays an important role in empowering COVID-19 survivor in moral and material understanding. In addition, various types of social support from neighbor such as emotional support (news, encouragement, motivation), material support (meeting daily needs, family needs, and medications), information support (disinfection and treatments) is connected be indifferent. On the other hand, forms of the social support system obtained from colleagues receive includes support for non-discrimination, continued empowerment, support for management needs, provision of equipment and financial assistance.[19]

Only a few informants received unfavorable treatment, such as being avoided in communication, being shunned and gossiped about, and even neighbors did not dare to pass in front of the house because they were afraid of being infected. This unfavorable attitude and treatment occurs due to a lack of understanding by the public who thinks that the virus can spread and be transmitted through the air, as well as stereotypes and hoaxes that are detrimental to sufferers of COVID and their families. Communication crisis during the COVID-19 pandemic (Case Study of Covid-19 Covid-19 Reporting by Air) by: Fera Indasari, & Ida Anggriani, 2021. Crisis and loss of public trust in WHO as a reliable source of world health information. Based on the understanding of crisis communication, the crisis of information differences conveyed by WHO regarding the spread of the corona virus through the air is an information crisis that occurs due to human error, where WHO is considered negligent in reviewing any information previously submitted to the public [20].

COVID-19 Survivors facing those unpleasant things, try to be ignorant and not think too much about it, because if they think about it, it can hinder healing. Indeed, there is a stigma, as discussed in the Handling of Public Stigma on COVID-19 in the Indonesian Society, by Sulistiadi et al, 2020. Patients with Coronavirus 2019 (COVID-19), their

families, health workers, and funeral workers are not only haunted by the tragedy of the new corona virus but also stigmatized by the community. Stigma can be detrimental to social life because it can last a long time without proper social action. The government has not acted appropriately to prevent the spread of the pandemic and various stigmas among local communities [21].

Communication and behavior received from medical personnel for informants who were hospitalized, on average stated that they were good and cooperative. The informants who got the treatment in Wisma Atlet tell that the doctors and paramedics was really good, they always give the informants support and asking the conditions in act of care. Empathic communication as a "Risky strength" for health during the COVID-19 pandemic: The case of frontline Italian healthcare workers, Barello, Serena, et al, 2020. Empathic communication, especially from doctors, has a positive impact on the quality of care and patient recovery. Empathetic communication should also be conveyed to doctors and paramedics who are likely to be at higher risk of experiencing stress [22].

Only two informants have experienced less pleasant treatment from medical personnel. Such treatment is a discriminatory attitude, such as staying away. One of them was tested for covid but the paramedics seems like don't really care and unfriendly. Risk management for COVID-19 handlers in Indonesia, although at the beginning it was still stuttering but now leads to a better direction, and this is in line with "Emergency Management: Reflections on the COVID-19 (2019-nCoV) Outbreak in Wuhan, China, by Liwei Zhang, et al. [23]. This article examines risk communication which is very important for emergency management. The whole communication process is recommended to integrate accessibility and disclosure of risk information, timing and frequency of communication, and strategies for dealing with uncertainty. Chuanyi Wang, et al, 2020, Covid-19 Risk Management by Universities in China. Chinese universities have made significant contributions to emergency risk management. The contributions were made primarily in the areas of: alumni resource gathering, medical rescue and emergency management, mental health maintenance, staff mobility control, and innovation in online education models. [24].

Based on the three stages of communication carried out by the Covid survivor, these are people who competent in conducting communication management both at the self, interpersonal and system. This is proven to help the healing process from COVID-19. Through the stories of the Covid survivor's experiences can be used as lessons about the importance of communication positive and empathic with various parties to speed up the healing process. The use of various communication media such as WhatsApp and Social Media is also capable to provide entertainment and excitement to increase the body's immune which is very important for the healing process.

IV. CONCLUSION

Communication management is done through self-management with a focus on health, praying a lot, thinking positively and always motivating themselves to recover by doing fun things such as hobbies and entertainment to

increase they immune system. Intensive interpersonal communication is carried out with family and close friends to monitor health conditions, provide motivation, comfort and support for recovery. Communication management in the system is managed through communication with paramedics and colleagues, and neighbors to foster enthusiasm. Communication takes place via telephone, WhatsApp and social media. Based on the results of the study, it shows that sufferers of Covid-19 have competence in managing communication and consider that communication is an important factor in helping the healing process and exist as COVID-19 survivors who can help the community through stories of inspiring experiences.

ACKNOWLEDGMENT

Thank are conveyed to Faculty of Social and Political Sciences, University of Muhammadiyah Jakarta who has funded internal research grants. Thank you also to Tria Patrianti and Master of Communication Science students Hendra Hidayat, Rahman Djalun, and Mulkan Habibi who helped this research.

REFERENCES

[1] Sugihantono, Anung, et al. 2020. Guidelines for Preparedness for Novel Coronavirus (2019-nCoV) Infection. Jakarta: Ministry of Health, Republic of Indonesia. Directorate of Disease Prevention and Control.

[2] Worldometers, "Corona Virus Cases in Indonesia" <https://www.worldometers.info/coronavirus/country/indonesia/> (accessed on 30 April 2021).

[3] Pelupessy, Dicky C, et al. "UI Recommends Policies to Improve Compliance with Health Protocols and Prevent the Stigma of COVID-19", September 14 th, 2020, <https://fk.ui.ac.id/berita/ui-rek-recommend-keb-policy-untuk-t-increase-k-compliance-against-health-protocols-and-prevent-covid-stigma-19.html>.

[4] Retno, Asti, Werdhani. "Stop Stigma: Spread Love During a Pandemic". 29 Dec 2020. <https://rri.co.id/humaniora/keseh/952872/Prevent-stigma-covid-19-bangun-komkom-positif-pasien> (accessed on 15 March 2021).

[5] WHO. Social Stigma associated with COVID-19: A guide to preventing and addressing. 2020. <https://www.who.int/docs/default-source/coronaviruse/covid19-stigma-guide.pdf>. (accessed on 8 Februari 2021).

[6] Wanodya, Kartika Sari, Usada Nanthyan Khampa. 2020, "Literature Review : Community Stigma Against Covid-19" *Preventia: Indonesian Journal of Public Health*, Vol 5, No 2.

[7] Kaye, Michael. Communication Management. Australia: Pretince Hall. 1994.

[8] Moustakas, Clark. Phenomenological Research Methods. California: SAGE Publications. 1994.

[9] Partono and Rosada. Amrina, 2020, "Optimistic in COVID-19 Pandemic", *Al-Insyiroh: Jurnal Studi Keislaman*, Vol. 6, No. 2.

[10] Wu, Chenhui, Cheng, Jianquan, Zou, Jun, Duan, Lian, Campbell, Janis E, "Health-related quality of life of hospitalized COVID-19

survivors: An initial exploration in Nanning city, China", <http://www.elsevier.com/locate/socscimed> Social Science & Medicine 274 (2021) 113748.

[11] Ana Kuswanti, et all. Management of Family Communication During the COVID-19 Pandemic. Syar-i Social and Cultural Journal. Volume 7 Number 8 2020.

[12] Moreno, Ángeles; Fuentes-Lara, Cristina; Navarro, Cristina (2020). "Covid-19 communication management in Spain: Exploring the effect of information-seeking behavior and message reception in public's evaluation". *El profesional de la información*, v. 29, n. 4, e290402. <https://doi.org/10.3145/epi.2020.jul.02>

[13] Alvita . Galia Wardha, Hartini, Sri, Winarsih, Dwi Biyanti, and Faidah. Noor, 2021, "Empowering Family Supportin improving the understanding of COVID-19 Preventions in Demak", Vol. 4, No. . <http://jpk.jurnal.stikeskendekiautamakudus.ac.id>

[14] O'Brien, et all, "Social Media Spread During Covid-19: The Pros and Cons of Likes and Shares The Spread of Social Media During Covid-19: Pros and Cons of Like and Sharing" <https://www.irishpsychiatry.ie/wp-content/uploads/2020/04/Social-Media-Spread-During-Covid-19-The-Pros-and-Cons-of-Likes-and-Shares-IMJ-2020.pdf>

[15] Agung. Ivan Muhammad, 2020, "Understanding the COVID-19 Pandemic from a Social Psychological Perspective", *Psikobuletin: Buletin Ilmiah Psikologi*, Vol. 1, No. 2.

[16] Bosworth, P. Butow et al. Effective health communication – a key factor in fighting the COVID-19 pandemic A. Finset, H. / *Patient Education and Counseling* 103 (2020) 873–876 www.elsevier.com/locate/pateducou

[17] Muslih. Basthoumi, 2020, The Urgency of Communication in Fostering Motivation in the Covid-19 Pandemic Era

[18] Hidayat. Dasrun, Anisti, Purwadhi, Wibawa, Darajat. "Crisis Management and Communication Experience in Education during the COVID-19 Pandemic in Indonesia", *Malaysian Journal of Communication* Jilid 36(3) 2020: 67-82. <https://doi.org/10.17576/JKMJC-2020-3603-05>

[19] Rahmatina . Zulfa, Nugrahaningrum. Galuh Ayu, Wijayaningsih, Ambarwati, and Yuwono. Susatyo, 2021. "Social Support for Families Tested Positive for Covid-19" *Proceeding of Inter-Islamic University Conference on Psychology Articles*, Vol.1 No.1

[20] Indasari, Fera, Anggriani, Ida, 2021. Crisis and loss of public trust in WHO as a reliable source of world health information" (Case Study of Covid-19 Covid-19 Reporting by Air)

[21] Barello, Serena, et all, 2020, "Empathic communication as a "Risky strength" for health during the COVID-19 pandemic: The case of frontline Italian healthcare workers", DOI:10.1016/j.pec.2020.06.027

[22] Julistiadi et all, 2020. "Patients with Coronavirus 2019 (COVID-19)" *Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)*. 2020; Special Issue 1: 70-76 DOI: 10.21109/kesmas.v15i2.3909

[23] Zhang. Liwei, Chen, Kelin, Li, Huijie, "Emergency Management: Reflections on the COVID-19 (2019-nCoV) Outbreak in Wuhan, China" DOI:10.3390/healthcare8010064

[24] Wang, Chuanyi, Zhe, Cheng, Yue, Xiao-Guang, McAcleer, Michael John. 2020, "Covid-19 Risk Management by Universities in China", *Journal of Risk and Financial Management* 13(2):36, DOI:10.3390/jrfm13020036

Communication Management of Covid-19 Survivors in Indonesia

ORIGINALITY REPORT

5%

SIMILARITY INDEX

0%

INTERNET SOURCES

4%

PUBLICATIONS

5%

STUDENT PAPERS

MATCH ALL SOURCES (ONLY SELECTED SOURCE PRINTED)

< 1%

★ Mursal Mursal, Mahyudin Ritonga, Fitria Sartika, Ahmad Lahmi, Taqlis Nurdianto, Lukis Alam. "The contribution of Amil Zakat, Infaq and Shadaqah Muhammadiyah (LAZISMU) institutions in handling the impact of Covid-19", Journal of Sustainable Finance & Investment, 2021

Publication

Exclude quotes Off

Exclude matches Off

Exclude bibliography Off