

## Risk Communication in Times of COVID-19: Public's Perception in Sri Lanka

Pradeep N' Weerasinghe

Department of Mass Media, University of Colombo, Sri Lanka  
drpradeep@spc.cmb.ac.lk

### ABSTRACT

*In order for the public to make informed decisions during an emergency, they need to be equipped with accuracy, balance, impartial, and factual truth information. Thus, communication methods and news media play the role of creating an informed citizenry in times of emergency. COVID-19 termed a pandemic on March 11, 2020, by the WHO, and health officials released guidance, rules, and regulations for the public. Thus, communication on the pandemic became crucial and society needed COVID-related information. Nevertheless, News Media dominated the scene by awaking the public regarding behavior, and methods to avoid contracting the virus, as well as mobilizing and empowering them. In this context, a problem arises whether News Media carried out its role as an emerging risk communicator effectively. Thus, Emergency Risk Health Communication, Behavioral Change Communication, and Third Person concepts are applied to the study. The study employed mixed research method for data collection and analysis purposes. The study found that most of the respondents faced a dilemma about what to do and were confused by the uncertain, ambiguous, emotional, and contradictory content of the COVID-19 messages. This study explored lack of expertise and professionalism in the mainstream media that contributed to the failure of COVID messages.*

**Key Words:** COVID-19, Sri Lanka, Risk Health Communication, News Media, Public perception

### INTRODUCTION

Theories in media influence, third-person effect, and behavior change communication emphasize that mass media, social media, and communication methods play a critical role in changing people's attitudes and behavior. There is many literatures on the role of mass media and communication methods in making awareness in people and changing their behavior during a disaster.

On March 11, 2020, the World Health Organization announced covid 19 as a global pandemic. The covid 19 pandemic has made a notable change in the daily life of the people of Sri Lanka. Mass media and communication strategy was the main tool used by health experts and government authorities to motivate people to prevent COVID-19 due to the uncertain environment where there were no proper treatments and medicines. During this period, the contents of messages given by the health experts and the authorities were strange, and on the other hand, the people played the role of the health experts who in turn became the messengers.

In order for the public to make informed decisions during an emergency, they need to be equipped with accuracy, balance, impartial, and factual truth information. Thus, communication methods and news media play the role of creating an informed citizenry in times of emergency. In this context, a problem arises whether News Media carried out its role as an emerging risk

communicator effectively. Did news media inform the public with accurate and truthful emergency information as necessary? Was adequate consideration given to Sri Lankan life conditions, risk experiences, and cultural values, when providing information and guidance? How did risk communication strategies influence the day-to-day activity of the people, and how did they understand it? To what extent did the news media and communication methods used during COVID-19 in Sri Lanka succeed in changing the social behavior of the people? Thus, the positive and negative effect of the messages given for that is problematic. Although various studies have been conducted on the medical background of COVID-19, the impact of news media and communication methods on changing people's behavior has not been revealed in the public's perception in Sri Lanka. The purpose of this study is to explore the receiver's perception and experience of the impact of news media, social media, and other communication methods on healthy behaviors, emotions, and attitudes in Sri Lanka during COVID-19.

The third-person effect, media influence, emergency health communication, and behavior change communication theories are used to investigate the effect of news media and other communication methods on disease prevention. This paper situates and discusses the above theories in the context of news media, communication methods, and the public's perception during covid 19. This study was intended to answer the following research questions. What is the receiver's experience of the efficiency and effectiveness of COVID-19 messages delivered by news media and other communication methods? What is the experience of the receiver playing the role of the messenger? Were those messages believed by the public? How did those messages affect public behavior? What are the facts behind it? What forms of communication did people trust and influence people the most? Were COVID-19 messengers sensitive to the recipient's psychological, cultural, environmental, and practical environment? Did it affect the outcomes of the messages?

### **Literature Review**

The public's perception of mass media messages and their influence, media influence, third-party influence, and changing public behavior has been the focus of previous research. When analyzing the influence of the third party, it appears that mass media as well as other communication methods can influence people's attitudes and behavior. Several studies have been conducted examining the messages contained in media and communication systems based on the theory of third-party influence (Cohen & Davis, 1991; Davison, 1983; Johansson, 2005; Paul et al., 2000; Perloff, 2002).

Academic studies have also focused on assessing the effectiveness and productivity of public service messages and communication methods, and their impact on people's emotions and behavior. Examples include studies on the effects of communication messages on health messages such as smoking, physical exercise, nutrition, and HIV. With the spread of the COVID-19 pandemic around the world, academic attention has been focused on the effectiveness of using mass media and communication methods in emergency health communication, and the impact on public behavior. Deuze (2020) analyzes media and mass communication theories about the social impact of mass media and suggested that those theories can be applied to face an emergency disaster situation. Mass media can influence the target audience's healthy behavior alone or in

combination with other efforts (Gao et al., 2020). Effective health communication can facilitate the public to cope with uncertainty and fear and change the behaviors necessary to avoid disease (Finset et al., 2020). Mass media played an important role in healthy behavior (Bedford et al., 2020). Talabi et al. (2022) a study done on public perception of radio campaign messages in managing COVID-19 in Nigeria shows that radio messages have had an impact on shaping people's awareness and health safety practices. Liqun Liu et al. (2020) conducted a study on the effect of mass media on creating protective behavior in people during the Covid pandemic in China. The study revealed that mass media was able to have a positive effect by promoting negative emotions and subjective behavior change. It was also found that social norms and cultural values played an important role in the process. Further, Traong et al. (2022) have examined the impact of media exposure on COVID-19 preventive behavior among Vietnamese. They found that media influence was indirectly associated with perceived intensity, perceived vulnerability, perceived self-efficacy, knowledge about COVID-19, and COVID-19 prevention behaviors. Miah et al. (2022) examined mass media utilization to promote public behavior change during COVID-19 in Dhaka city. This study showed that there was a remarkable positive relationship between the behavior of people during covid 19 and the role of mass media. They argued that the credibility of mass media has directly influenced the behavior of the public. Scopelliti et al. (2021) investigated TV news, COVID-19, and media influence on healthy behavior in public spaces in Italy. The study suggested that news media content has motivated the public to adopt healthy behaviors in the use of public spaces. The study revealed that media content scared people about health risks.

Singh et al. (2022) explored the relevance of social and behavioral change and communication in the media on the COVID-19 response in India. They argued that messages to avoid COVID-19 should be clear, concise, and based on scientific evidence. The efficiency and effectiveness of health messages can change people's behavior and protect their lives (Singh et al., 2022). Pamuk et al. (2022) explored that the accuracy and truthfulness of the information and stopping the flow of misinformation was very important to the sustainable adoption of preventive measures and precautionary behavior during the pandemic in Turkey. Added, understandable characteristics of the news received by the audience as well as the ability to engage with it had a positive impact on their avoidance behavior. World Health Organization (2005) suggested that “Effective public risk communication is an essential component of managing disease outbreaks. Such communication should be timely, accurate, understandable, based on credible sources, and should include actionable suggestions for individuals”.

Non-experts should not comment on the media and the publishing of false information. Mainstream media are the people most used for information and positive opinions (Moreno et al., 2020). Tuccori et al. (2020) in their study of the impact of the COVID-19 infodemic on drug utilization behaviors found that mass media and social media's sensationalized and distorted information had a negative impact on the public. The pandemic had become an “infodemic” by publishing fake news and misinformation by the media (Balakrishnan ,2022; Mheidly & Fares, 2020). The incorrect numbers, inaccurate guidelines, and unapproved treatments disseminated by the media have created stress, anxiety, fear, financial abuse, and chaos among the public.

Airhihenbuwa et al. (2020) who studied how culture was a matter in using communication to respond globally to COVID-19, suggested that culture had a critical impact on the effectiveness of communication through effective community engagement in collectively facing the risk. Culture shapes language, message delivery, and reception. In Europe's response to COVID-19, cultural factors related to race, ethnicity, and beliefs influenced the effectiveness of messages (Airhihenbuwa et al.2020). Further Reddy and Gupta (2020) suggest that ignorance of gender, sociocultural, psychological, economic, health, and sensitivity to the recipient's life reality influence the acceptance of messages. Zhaohui Su et al. (2021) who studied how covid-19 media coverage affected mental health, indicated that COVID-19 media coverage is inherently harmful and mental health issues were created by negative news. The fear and panic generated by misinformation affect the long-lasting mental health of people. This destroyed media standards, and ethics as well as public trust. Misinfodemics on COVID-19 negatively affected people's lives, mental health, and socio-political activities (Mukhtar, 2021).

The general conclusion reached by these studies is that mass media and other forms of communication influence people's behavior during health emergencies. Although it is possible that there are cases where the results are positive as well as negative, it is suggested that the influence of social media is higher than that of legacy media and that the audience's sociocultural, psychological, economic, health, and recipient's life reality influence on the outcomes of messages.

## **METHODS**

Qualitative, quantitative, and mixed-method approaches have been utilized in previous studies of COVID-19 and the role of the media. A quantitative approach has been used to study the role played by the media in Jordan to change social behavior during the pandemic (Al Dmour et al., 2022); how exposure to the media in China influenced the survival of covid 19 (Lieun Liu et al., 2020); how risk communication has influenced the residents of Dhaka city (Rahman et al.,2021); Spanish experience on communication management during pandemic (Moreno, 2020). A qualitative research approach has been used for the study of risk communication during the COVID- 19 (Cinar & Toker, 2022). A mixed research method has been used for the study of global risk communication and community engagement (IFRC, UNICEF, WHO, 2020); a study conducted under the theme of covid-19 and mass media in thirty countries (IMS, 2021); the study of television news in Nigeria (Apuke, & Omar,2021); a mixed-methods study describing behavioral factors that influenced general practitioners' experiences using triage during the COVID-19 pandemic (Lackey et al., 2021); What Media Helps, What Media Hurts: A Mixed Methods Survey Study of Coping with COVID-19 Using the Media Repertoire Framework and the Appraisal Theory of Stress (Pahayahay & Mahani, 2020). Thus, this study employed a mixed-method exploratory and descriptive approach. Mixed methods provide a unique opportunity to “understand complex social processes, to capture essential aspects of a phenomenon from the perspective of study participants, and to uncover beliefs, values, and motivations that underlie individual health behaviors” (Curry et al.,2009, p.1442). Further, Johanna Riha et al (2021) argue that instead of using a singular mono method of research on public health, it is possible to better

determine different social norms, social-cultural practices, and a range of social behaviors through the use of mixed methods.

Questionnaires and key informant interviews were employed as instruments. Data was collected for this study from 15<sup>th</sup> to 31<sup>st</sup> January 2021. The questionnaire was emailed with a google form link to a random sample of 400 respondents. Respondents were heterogeneous as they were randomly selected from email lists. Three hundred seventy-five responded to it. The sample error was 5%. An interview tool was utilized to cross-examine the validity of data collected from the questionnaire. Twenty key informants were selected for interviews using the purposive sampling method. Interviewees were selected to represent opinion leaders, health workers, media critics, social activists, and journalists who have experience and observations of media and public behavior during the COVID- 19. The questionnaire was developed taking into the account literature review, expert advice, and personal experience of the researcher. Fifty percent of the questions in the questionnaire were allocated to closed-ended questions and the remaining fifty to open-ended questions. The closed-ended questions aimed to capture demographic factors and preferences. The open-ended questions aimed to capture public perceptions of experience, influence, and behavioral change.

The questionnaire consisted of five sections. The sections include socio-demographic information; experience of efficiency and effectiveness of media messages and communication methods; experience on the influence of media, the experience of engagement in media and messages during covid 19. Response-positive standards were used using the volume of a five-point Likert scale ranging from one (completely disagree) to five (completely agree). The independent variables are demographic factors, types of communication methods, preferred communication method, truthfulness and accuracy of the news, attitude towards messages, cognitive and emotional impact, and types of engagement. Dependent variables are the level of professionalism of messengers, level of influence, level of misleading, level of behavioral change, and level of engagement. Interpretative inductive and deductive thematic analyses were used for data analysis. The closed-ended questions were analyzed using IBM's SPSS software.

## **RESULTS AND DISCUSSION**

Sri Lanka, an island nation located near India in the South Asian region, has a population of 22 million. 52% of the population is female and 47% is male. Sri Lanka is a developing country with a multi-ethnic and multicultural population. 80% of the country's population lives in rural areas, life expectancy is 77 years, and literacy is 92%. 42 percent of Sri Lanka's population lives below the poverty line. 671,995 COVID-19 cases and 16828 deaths were reported in Sri Lanka.

As at present there are fifty FM radio stations, twenty terrestrial television stations, twelve newspapers, and hundreds of news websites operating in Sri Lanka. At the beginning of the 1990 decade, the private sector was granted the opportunity to enter the radio and television media industry. Sri Lanka does not have an independent electronic media regulatory body on news media regulations, generally accepted radio and television ethics or news professional guidelines. Here the radio and television station owners have the opportunity to tailor news content according to

their agenda. Gunawardene (2019) found that the main source of information for nearly 22 million people living in Sri Lanka is television news. Added, for news consumption, television is the most widely followed regular source of news and also the most trusted news media. 96% regularly watched domestic television channels for news (p.6).

The internet penetration in Sri Lanka is 52%. Thirty-three percent of the population uses Facebook, of which 36 percent are female and 63% are male. There are no official statistics available on the number of WhatsApp users, but the usage will take a higher percentage than Facebook. YouTube usage is 31%, Instagram usage is 7%, and Twitter usage is 1.5%.

### **Socio demographic characteristics of the respondents**

The study involved Three hundred seventy-five respondents over the age of 18 participated in this study. The sociodemographic factors of the respondents are presented in Table 1. As the table shows, 42.7% of the survey participants are female and 57.3% are male. Majority of the survey participants are young and middle-aged. Among them 40% between the ages of 18-32, 17% between 33-40, and 24% between the ages of 41-48. 18.8% of the respondents were postgraduates, 20.5% graduates, 24.8% undergraduates, 15.4% diploma holders and 17.1% G.C.E advanced level qualified. The table shows that the majority of the respondents have higher education qualifications. 35.9% of the survey participants were urban, 45.3% sub-urban, 18.8% rural. Accordingly, the majority of the respondents represented the urban community.

**Table 1.**  
*Sociodemographic Characteristics of Respondents*

<b>Characteristics of Respondents</b>		<b>Percentage</b>
<b>Gender</b>	Female	42.7
	Male	57.3
<b>Age</b>	18 – 32	40
	33 – 40	17
	41 – 48	24
<b>Education</b>	G.C.E (A/L)	17.1
	Diploma	15.4
	Undergraduates	24.8
	Graduates	20.5
	Post Graduates	18.8
<b>Residence</b>	Urban	35.9
	Suburban	45.3
	Rural	18.8

**Efficiency and effectiveness of media messages and communication methods**

World Health Organization (2005) suggest that effective public risk communication is an essential component of managing disease outbreaks. Such communication should be timely, accurate, understandable, based on credible sources, and should include actionable suggestions for individuals. Accuracy, truthfulness, factuality and credibility is a central ethical practice in crisis reporting (Porlezza, 2019). During the COVID -19, Ven der Linden et al. (2020) argued that people found it extremely difficult to access true and reliable information. Gupta et al. (2021) empathized that mass media should contain relevant, timely and actionable information to an appropriate response to Covid-19. Added, inaccurate information adversely affects prevent treatment and safe behavior. High-quality sourced information on COVID- 19 coverage is needed to manage the crisis as well as shape public knowledge and behavior. The extent to which these theories were applied in Sri Lanka during the COVID 19 period is shown in Tables two, three and four.

The second table presents data on how people accessed the information on COVID - 19. According to Table 2, 42% of the survey participants got information about COVID-19 from television, 36% from social media, 14% from interpersonal communication and 8% from other sources.

**Table 2.**  
*Accessed Information on COVID-19*

<b>Types of Communication method</b>	<b>Percentage</b>
Television	42
Social Media	36
Interpersonal communication	14
Other	08

The third table shows the response on whether the warning information was received at the time of need during the COVID-19 period. 58.1 percent of respondents agreed and 35.1% disagreed.

**Table 3.**

*Warning Information Received at The Time of Need*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	12.0
Disagree	23.1
Neutral	06.8
Agree	48.7
Completely Agree	09.4

The fourth table shows whether the mass media informed the public about lock down, travel restrictions, curfew, purchase of goods and essential services at the time of need during the COVID-19. Seventy percent of respondents answered “yes” and 26.4 percent answered “no”.

**Table 4.**

*Mass Media Informed About Essential Services at The Time of Need*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	08.5
Disagree	17.9
Neutral	03.6
Agree	61.5
Completely Agree	08.5

Table five shows the response to the question whether they are satisfied with the qualifications of people who have been giving advice about COVID-19 on the mass media platforms. 46.3% answered yes and 39.3% answered no.

**Table 5.**

*Satisfaction on Qualification of Spoke Persons*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	17.1
Disagree	22.2
Neutral	14.5
Agree	41.0
Completely Agree	05.3

The sixth table shows whether mass media created informed citizens during covid. 53% answered yes and 41% answered no to the question of whether the media had equipped themselves with all the information about COVID-19.



**Table 6**  
*Creating an informed citizenry*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	16.2
Disagree	24.8
Neutral	06.0
Agree	43.6
Completely Agree	09.4

Table seventh shows the responses to the question whether they had the opportunity to be reliably informed about the COVID-19 vaccine. 58.1% of respondents said they were able to be reliably informed. 30.8% said they did not feel trust about the vaccine.

**Table 7**  
*Reliably informed on the COVID-19 vaccine*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	09.4
Disagree	21.4
Neutral	11.1
Agree	52.1
Completely Agree	06.0

The eighth table shows the responses to whether they trusted the information and advice given by the mass media about COVID-19. Forty-two percent of survey participants said they did not trust media information. 54% of respondents trusted media information and advice and three percent had no idea.

**Table 8**  
*Level of public trust on the media*

<b>Medium</b>	<b>Percentage</b>
Television	66
Community Health officers	18
International Media	10
Face Book	06
News Websites	05.40
WhatsApp	03.60
Friends and Relatives	02.70
Newspapers	01.80

---

Other	04.50
-------	-------

---

According to above the role played by the media in Sri Lanka during the COVID-19, there arises a matter of controversy. Thus, the results indicate that mass media failed to follow the World Health Organization's emergency health disaster management media guidelines such as timely, understandable, based on credible sources, accuracy, truthfulness, factuality and credibility. The key informants who responded in this study stated that in the early stages of COVID-19, interpersonal communication and group communication methods played a crucial role in the management of COVID-19 rather than mass media. "The influence of grassroots public health workers using interpersonal and group communication methods to change the public's behavior towards prevention from the virus was crucial" (NH, Public Health Expert, Personal Communication, July 24, 2021; SW, Social activist, Personal Communication, May 29, 2021).

It seems that public health workers being known to the general public and being able to build trust and persuasion through face-to-face communication had a strong impact on managing COVID-19. However, the medialization of COVID -19 started when the media initiated covering the number of people infected with COVID, number of deaths, and live coverage of officials visiting the private homes and offices of infected people, invasion of privacy and event sensitization, event dramatization, competitive reporting, misinformation, disinformation and mal information. Thus, the COVID -19 pandemic got transformed to infodemic and infotainment phenomenon by media agenda strategies. The spread of misinformation and fake news on the virus has led the WHO to warn of an ongoing infodemic. The result was that the serious attention and concern of the public to avoid COVID-19 was lost and people were encouraged to ignore the guidelines to avoid COVID-19. The results indicates that the majority of the respondents faced a dilemma about what to do and were confused by the uncertain, ambiguous, emotional, and contradictory content of the COVID-19 messages. The majority of people accessed television and social media to get information about COVID. Nevertheless, majority of key informants indicate that people trusted interpersonal communication mostly because of the lack of credibility of mainstream media and social media. This study identified factors such as competition, lack of continuity, lack of accuracy, and impulsivity in the mainstream media that contributed to the failure of COVID messages. This seems to have been influenced by the media firms that lacked the of expertise and a strategic emergency health communication plan, lack of media professionalism, inclusion of the political and business agendas of media owners and the loss of management of COVID 19 from government control.

### **Media influence**

Previous studies revealed that mass media content influenced public behavior during the COVID-19 period (Trang et al.,2022; Miah et al., 2022; Talabi el al., 2022; Massimiliano et al., 2021; Liqun Liu et al., 2020).

Tables 9, 10, 11 and 12 shows the data on how media content in Sri Lanka influenced the public. The ninth table presents data on the most useful media content and media genre to the public. 50.46 % of respondents said TV news was most helpful to them during COVID epidemic. 22% stated that TV talk shows. 13.76% said entertaining content on social media and 3.76% TV ads were helpful to them.

**Table 9**

*The most useful media content and media genre to the public*

<b>Media Content</b>	<b>Percentage</b>
Television News	50.46
Television talk show	22.00
Entertainment content of social media	13.76
Television Advertisements	3.67
Other	2.75
Newspaper articles	1.83
Newspaper news	1.83

The table nine shows that even though the government and health authorities have placed more weight on the top-down one-way communication format of TV ads to control COVID 19, people have not accepted them. The reason for this is the attitude of the people that these messages are pro-government and the lack of public trust of the television stations that carried ads. Nevertheless, Table 9 indicates that although there is a huge demand for entertainment media content to reduce the mental pressure of the public during the COVID season, the legacy media failed to address that demand. Table 10 shows the responses on social distance, isolation, lock down and the role of media. Thus, 45 percent said social media helped them avoid the loneliness of being away from others due to social distancing. Twenty-four percent said it was from watching television, and eight percent said it was from gardening. The four percentage who stated that it was by reading books.

**Table 10**

*The role of media on isolation, loneliness and social distance*

<b>Activity</b>	<b>Percentage</b>
Company of social media	45.53
Watching Television	24.11
Gardening	08.92
Watching movies	05.36
Other	16.05

Table eleven describes the impact of misinformation about COVID-19 itself. 47.9 % said yes when asked if they had been exposed to misleading information about COVID-19 and 41.8 % said that there was no impact.

**Table 11**

*The impact of misinformation about COVID-19*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	16.2
Disagree	25.6
Neutral	10.3
Agree	41.0
Completely Agree	06.09

Table 12 shows respondents' responses to whether they cross-checked the accuracy and truthfulness of television news about COVID-19 from other sources. 74% stated that they tried to verify the accuracy and truthfulness of the news they heard from other sources. 42% of news websites, 21% of social media, and 12% of acquaintances were selected as other sources used to confirm from other sources.

**Table 12**

*Cross-checked the accuracy and truthfulness of television news from other sources.*

<b>Cross-checked</b>	<b>Percentage</b>
Yes	74.4
Neutral	08.5
No	17.1

Table thirteen shows how the media influenced non-scientific information, misinformation, disinformation, mal information and fake news on respondents' attitudes, behaviors and decisions. 65.8% of the respondents said that they were not influenced by them. 25.6% of the respondents said that they were influenced by mass media unscientific and misinformation and changed their behavior attitudes and decisions.

**Table 13**

*Influenced non-scientific information on respondents' attitudes, behaviors and decisions.*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	31.6
Disagree	34.2
Neutral	08.5
Agree	17.1
Completely Agree	08.5

After a long period of time without proper treatment for covid, public attention was drawn to it with the introduction of vaccine. Despite extensive publicity by authorities and health experts to motivate people to get vaccinated, public untrust remained. Young people and children in particular were trended to think that they would face side effects from getting the vaccine. Weaknesses in media communication strategies and disinformation, mal information had affected this. Study participants were asked who gave them the information they trusted about the vaccine. 43.24% said television media, 14.41% community health workers, 14.1% relatives, 14.1%

international media, and 9.90% social media. The data indicates that trust was placed in other communication sources than the legacy media when believing about the vaccine.

**Table 14**

*Level of public trust of the media on vaccine*

<b>Medium</b>	<b>Percentage</b>
Television	43.24
Community Health officers	14.41
International Media	14.41
Face Book	09.90
News Websites	05.40
WhatsApp	03.60
Friends and Relatives	02.70
Newspapers	01.80
Other	04.50

Zhaohui Su et al. (2021) and Mukhtar (2021) found that COVID-19 media coverage was generated the fear and panic and suggested its negatively affected people's lives, mental health, and socio-political activities.

A study conducted in Turkey by Pamuk et al. (2022) has emphasized that media comments by non-experts had a negative impact on the spread of COVID. The interviews and comments of non-medical experts who introduced unscientific treatment methods and medicine were included in the television news in Sri Lanka. Thousands of people, influenced by this news, flocked to buy fake medicines and meet people who introduced unscientific treatments, ignoring disease prevention guidelines. Further Public belief in non-scientific treatment was boosted by television stations giving wide publicity to the health minister's act of throwing a pot into the river based on a superstition. Nevertheless, “a dilemma and chaotic situation on COVID-19 has arisen in the society as a result of emotional and impassioned opinions and guidance of people who do not have the legal, professional authority or expertise to comment on COVID-19 are often seen in television content” (SB, opinion leader, personal communication, June 12, 2021 ; NS, social activist, personal communication, 15 June, 2021; SW, journalist, personal communication, 29 May, 2021; CH, media critic, personal communication, August 5, 2021).

Mheidly et al. (2020) suggested that the spread of unsanitary guidelines, scaremongering and unapproved treatments through the mass media created tension, financial fraud and chaos in the public. The fifteenth table shows the answers given by the respondents to the question of whether they felt fear, stress, shock, or uncertainty about COVID-19 due to the way in which the news about covid-19 was presented on television stations. 63.2% of respondents said they were shocked by the way TV channels presented the news of COVID-19. 24.8% said they had not faced such a situation. Accordingly, the results conformed to the finding of Zhaohui Su et al. (2021) and Mukhtar (2021).

**Table 15**

*Felt fear, stress, shock, or uncertainty about covid-19 was presented on television stations.*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	11.1
Disagree	13.7
Neutral	12.0
Agree	50.4
Completely Agree	12.8

“Due to the impulsive, emotional, dramatic, competitive, disturbing style adopted by the Sri Lankan television stations in presenting the news about COVID-19, instead of messages of preventing from COVID 19, feelings of fear were implanted in the minds of the people” (R.K, media critic, personal communication, June 5, 2021 ; DL, journalist, personal communication, June 24, 2021; UP, opinion leader, personal communication, June 20, 2021 ; UP, social activist, personal communication, July 18, 2021). The situation was affected by the lack of professionalism and expertise in emergency health disaster communication and media market competition in news coverage of disaster health messages and events. As a result, it seems that the pattern of media news presentation had an effect on the short-term and long-term mental health of the people. Previous study of Scopelliti et al. (2021) has conformed to this argument.

Gupta et al. (2021) empathized that mass media should contain actionable information to an appropriate response to Covid-19. Table 16 shows the responses to the question of whether they were able to follow the advice given by the media about COVID-19 without interfering with their daily activities. Forty one percent of the respondents stated that it interfered with their daily activities. Thus, the results conformed the Gupta et al. (2021) argument.

Airhihenbuwa et al. (2020) Venkatashira and Gupta (2020 suggest that culture, ethnicity, gender, life reality and belief had a critical impact on the effectiveness of communication. The sixteenth and seventeenth tables show media coverage of covid-19 whether the personal beliefs and cultural values of the respondents were taken into account while giving advice. 40.2 percent of respondents stated the media had not taken into account their cultural values, beliefs and faith when presenting COVID-19 advice and news. 24.8% of respondents stated that the media was concerned about these issues. When asked if they accepted the messages given regardless of their culture, life realities, gender and beliefs, 21 percent said yes. 32% said no and 47% had no idea. This shows that, as argued by Airhihenbuwa et al. (2020) culture and life realities have a crucial influence on the acceptance of health messages.

**Table 16**

*The personal beliefs and cultural values of the respondents were taken into account*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	12.0
Disagree	28.2
Neutral	35.0
Agree	22.2
Completely Agree	02.6

**Table 17**

*Accepted the messages given regardless of their culture*

<b>Response-positive standards</b>	<b>Percentage %</b>
Completely Disagree	11.0
Disagree	21.0
Neutral	47.0
Agree	18.0
Completely Agree	03.0

The social and cultural realities of Sri Lanka as well as the impracticality of applying the COVID messages to daily life affected the effectiveness and efficiency of the media's COVID messages. The family and social life of the Sri Lankan people is intertwined with group and collective activities. Living in close proximity to each other, accepting what elders and acquaintances say, cultural traits associated with Sri Lankan life seem to have motivated people to ignore top-down one-way direct messages containing information recommended for covid.

Because the majorities of peoples' practices centered on religions, beliefs, teachings, destiny, how to be born, the life after death, the destruction of the world, the sudden arrival of covid and the socio-economic environment created by it, matched each other.

Nevertheless, as a results of ignoring the covid preventive guidance in the news, discussion programs, and telenovelas and by media practitioners the audience watching them were also encouraged to ignore the covid preventive guidelines.

Impracticality of COVID messages also negatively affected their effectiveness. For example, in order to maintain social distancing, even though it was ordered that the number of passengers travelling in public transport services should be limited, there were not enough public transport services. Thus, people used public transport services regardless of the recommendations on social distancing.

Due to lack of consumer goods and non-opening of shops, the people ignored the distance and gathered to fulfill their needs. Even though it was announced that there were punishments for the violators of the COVID rules, the people had understood that it was not a reality. The current study confirmed the suggestion made by previous studies that mass media should focus on the socio-cultural and practical realities of the recipient in emergency health communication.

Media critics and human rights lawyers suggested "the media of infringing the privacy of COVID-infected people by showing their residences, offices and their relatives" (JW, Legal expert, personal communication, 25 march 2021; DD, media critic, personal communication, April 6, 2021). This behavior of television stations made COVID sufferers reluctant to disclose their infection and seek treatment. The fifteenth table shows the responses to media exposure of the privacy of those infected with COVID. Forty eight percent of respondents said that privacy was harmed by the media when reporting on infected people, and 35% said that they became aware of the infected people because of television showing the infected people and where they live.

#### **Community Engagement on COVID-19 information**

Previous studies have focused on the effectiveness of community participation and community engagement in disease prevention and control in emergency health disaster management. The communication between the community by using interpersonal communication, group communication and two-way communication tools is effective (Gilmore et al, 2020). Social media and community health workers' played role of interpersonal and group communication during COVID. Apuke and Omar (2021) suggest that while social media played a role in knowledge and behavior during covid 19, fake news and misinformation of social media had a disruptive effect on disaster management.

There was a huge demand for information from the people to make quick decisions due to lockdown, quarantine, work from home, social distance, school closures, etc., during the pandemic. “People had to spend weeks alone in their homes without anything to do. People were tired of the stereo types, uncritical media content of the mainstream media as a result of that they turned to social media for access to information, entertainment and communication” (MR, social activist, personal communication, August 16, 2021). Nevertheless, confusion, contradiction, uncertainty, unclear in the content of the message given by the legacy media affected the public's lack of trust in it. Public has chosen social media to fill the gap.

Social media was widely chosen by people to communicate with their distant friends and relatives, to avoid stress and to find an organized way to spend their time, as well as to participate in preventing themselves and the society from the corona virus. “People shared content they received or created on their own to warn others, provide preventing tips, introduce treatments, protesting, finding a companion as well as enjoy unorganized time” (LA, social activist, personal communication, August 5, 2021). The majority of this content was fake, misinformation without sources or scientific evidences. Because this information was sent by people they know, some people were tempted to believe it and applied accordingly. Singh et al. (2022) suggested that messages to avoid COVID-19 should be clear, concise, and based on scientific evidence. Although there is uncertainty about the information shared through social media, there is no fact checking mechanism to verify their correctness, and because of the low media literacy of the people, social media created an infodemic society.

Table seventeen shows whether the respondent engage to make awareness of others about COVID-19, 94% of respondents answered “yes”. Table eighteen describes the communication tools used to share information about COVID-19. 61.3 % respondents used the face book, 62.2% WhatsApp, 41.4% interpersonal communication methods. When asked whether they were concerned about the correctness, accuracy and truthfulness of the information being shared, 83% said that they were not concerned about it.

**Table 18**

*Respondent engage to make awareness of others about COVID-19*

<b>Engaged</b>	<b>Percentage</b>
Yes	94
Neutral	Nil
No	06



**Table 19**

*Communication tools used to share information about COVID-19*

<b>Medium</b>	<b>Percentage</b>
Face book	61.3
WhatsApp	62.2
Telephone	55.0
Interpersonal Communication	41.4
Group Meeting	04.5
SMS	14.4
Email	03.6

**Table 20**

*Concerned about the correctness, accuracy and truthfulness of the information being shared*

<b>Accuracy of the information being shared</b>	<b>Percentage</b>
Yes	05
Neutral	02
No	83

## CONCLUSION

This study examined the perspective of public perception, experience and how the public engaged with the media and media messages during Covid 19 in Sri Lanka. For this purpose, mixed methodological approach is employed. The study suggests that the media Covid-19 messages have led to increased uncertainty, chaos, and stress in the society. This situation had a negative effect on the tasks such as changing public behavior and preventing the spread of disease, which was the ultimate goal expected through media messages. The public did not trust the messages because the mainstream media did not demonstrate competence in emergency health disaster communication strategies in delivering the messages. Nevertheless, the main stream media did not fulfill the information and entertainment needs of public. Thus, the people turned to fulfill their communication needs by engaging with the social media due to the matching of social media characteristics with the people's needs. This situation affected the spread of fake and disinformation within the society.

Emergency Risk Health Communication, Behavioral Change Communication, and Third Person concepts are applied to the study. The research found that the majority of the respondents faced a dilemma about what to do and were confused by the uncertain, ambiguous, emotional, and contradictory content of the COVID-19 messages. The majority of people accessed television and social media to get information about COVID. Nevertheless, people most trusted interpersonal communication because of the lacked credibility of mainstream media and social media. While previous studies extensively investigated the practice of risk health communication theory, the current research was narrowed down to the public perception perspective to get new insight into the theory. While the current research confirms previous findings, this study revealed that the practicality of the messages, not taking into account the socio-cultural reality had a negative effect

on their effectiveness and productivity. Thus, weaknesses in the government's Covid-19 management strategies, lack of expertise in emergency disaster health communication for the mainstream media, lack of a strategic plan for it, lack of professionalism for journalists, competition, political and market agenda of the media owners, etc. resulted in reduced effectiveness and productivity of COVID messages.

## REFERENCES

- Airhihenbuwa, C., Iwelunmor, J., Munodawafa, D., Ford, C., Oni, T., Agyemang, C. (2020). Culture Matters in Communicating the Global Response to COVID-19. *Prev Chronic Dis*, 17, E60. doi: 10.5888/pcd17.200245. PMID: 32644918; PMCID: PMC7367065.
- Al-Dmour , Masa'deh, R., Salman, A., Al-Dmour, R., & Abuhashesh, M. (2022). The Role of Mass Media Interventions on Promoting Public Health Knowledge and Behavioral Social Change Against COVID-19 Pandemic in Jordan. *SAGE open*. 1-12.
- Apuke, O. D., & Omar, B. (2021). Television News Coverage of COVID-19 Pandemic in Nigeria: Missed Opportunities to Promote Health Due to Ownership and Politics. *SAGE Open*, 11(3). <https://doi.org/10.1177/21582440211032675>
- Apuke, O.D., & Omar, B. (2021). Social media affordances and information abundance: Enabling fake news sharing during the COVID-19 health crisis. *Health Informatics Journal*. <https://journals.sagepub.com/doi/pdf/10.1177/14604582211021470>.
- Balakrishnan, V., Ng, W.Z., Soo, M.C., Han, G.J., & Lee, C.J. (2022). Infodemic and fake news - A comprehensive overview of its global magnitude during the COVID-19 pandemic in 2021: A scoping review. *Int J Disaster Risk Reduct*, 78, 103144.
- Braver, N. R. den., Bengoechea, E.G., Messing, S., Kelly, L., Schoonmade, L.J., Volf, K., Zukowska, J., Gelius, P., Forberger, S., & Woods, C.B. (2022). The impact of mass-media campaigns on physical activity: a review of reviews through a policy lens. *European Journal of Public Health*, 32(4), iv71–iv83.
- Çınar, F. & Toker, K. (2022). Coronavirus disease (COVID-19): The Impact and role of mass media during the pandemic. *Turkish Studies*, 17(1), 79-100.
- Cohen, J., & Davis, R.G. (1991). Third-person Effects and the Differential Impact in Negative Political Advertising. *Journalism Quarterly*, 68, 680-688.
- Curry, A.L., Nembhard, I.M., & Bradley., E.H. (2009). Qualitative and Mixed Methods Provide Unique Contributions to Outcomes Research. *Circulation*, 119(10), 1442–1452.
- Davison, W.P. (1983). The Third-person Effect in Communication. *Public Opinion Quarterly*, 47, 1-15.
- Deuze, M.(2020). The role of media and mass communication: Theory in the global pandemic. *Communication Today*, 11(2), 4-16.
- Duke, J. C., Farrelly, M.C., Alexander, T.N., MacMonegle, A.J., Zhao, X., Allen, J.A., Delahanty, J.C., Rao, P., & Nonnemaker, J. (2018). Effect of a National Tobacco Public Education Campaign on Youth's Risk Perceptions and Beliefs About Smoking. *Health Promot*, 32(5), 1248-1256.
- Finset, A., Bosworth, H., Butow, P., Gulbrandsen, P., Hulsman, R. L., Pieterse, A. H., Street, R., Tschoetschel, R., & van Weert, J. (2020). Effective health communication—A key factor in

- fighting the COVID-19 pandemic. *Patient Education and Counseling*, 103(5), 873. <https://doi.org/10.1016/j.pec.2020.03.027>.
- Gao, J., Zheng, P., Jia, Y., Chen, H., Mao, Y., Chen, S., Wang, Y., Fu, H., & Dai, J. (2020). Mental health problems and social media exposure during COVID-19 outbreak. *Plos One*, 15(4), e0231924. <https://doi.org/10.1371/journal.pone.0231924>
- Ghahramani, A. de., Courten, M., & Prokofieva, M. (2022). The potential of social media in health promotion beyond creating awareness: an integrative review. *BMC Public Health*, 22(1), 2402. doi: 10.1186/s12889-022-14885-0. PMID: 36544121; PMCID: PMC9770563.
- Gilmore, B., Ndejjo, R., Tchetchia, A., Claro, Vde., Mago, E., Diallo, A. A., Lopes, C., Bhattacharyya, S.(2020). Community engagement for COVID-19 prevention and control: a rapid evidence synthesis. *MJ Global Health*, 5(10), <https://gh.bmj.com/content/5/10/e003188>
- Gunther, A., & Thorson, E. (1992). Perceived Persuasive Effects of Product Commercials and Public Service Announcements: Third-Person Effects in New Domains. *Health Communication*, 19(5), 545-596.
- Gupta, M., Keshri, V.R., Konwar, P., Cox, K.LK., & Jagnoor, J. (2021). Media coverage of COVID-19 health information in India: a content analysis. *Health Promotion International*, 37(2) 1–12.
- Huang, H. T., Kuo, Y. M., Wang, S. R., Wang, C. F., & Tsai, C. H. (2016). Structural factors affecting health examination behavioral intention. *International Journal of Environmental Research and Public Health*, 13(4), 395.
- IFRC, UNICEF, WHO. (2020). COVID-19. *Global Risk Communication and Community Engagement Strategy*. <https://www.unicef.org/media/90706/file/COVID-19-Global-Risk-Communication-and-Community-Engagement-Strategy.pdf>
- International Media Support (IMS). (2021). *COVID -19 and the media: A pandemic of paradoxes. IMS Defending journalism book series*. IMS.
- Johansson, B. (2005). The Third-Person Effect. Only a Media Perception? *Nordicom Review*, 26(1),81-94.
- Lackey, S., Schmidtke., & K.A.,Vlaev, I. (2021). A mixed- methods study describing behavioral factors that influenced general practitioners' experiences using triage during the COVID-19 pandemic. *BMC Fam Pract*, 22, 146. <https://doi.org/10.1186/s12875-021-01469-x>
- Liqun Liu , Jingzhong, X ., Li. K., & Ji., S. (2020). Exploring How Media Influence Preventive Behavior and Excessive Preventive Intention during the COVID-19 Pandemic in China. *Int. J. Environ. Res. Public Health*, 17, 7990.
- Mheidly, N., & Fares., J. (2020). Leveraging media and health communication strategies to overcome the COVID-19 infodemic. *J Public Health Policy*, 41(4), 410-420.
- Miah, M. S., Eashat, M. F. S., Purba, N. H., Jhily, N. J., & Islam, M. S. (2022). Mass media utilization to promote public behavior change during COVID-19 situation: A population survey of Dhaka city. *Recent Research in Science and Technology*, 14, 1–7.
- Moreno, Á; Fuentes-Lara, C., & Navarro, C. (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*, 29(4), <https://doi.org/10.3145/epi.2020.jul.02>
- Mukhtar, S. (2021). Psychology and politics of COVID-19 misinfodemics: Why and how do people believe in misinfodemics? *International Sociology*, 36(1), 111–123.

- Pahayahay, A., Khalili-Mahani, N. (2020). What Media Helps, What Media Hurts: A Mixed Methods Survey Study of Coping with COVID-19 Using the Media Repertoire Framework and the Appraisal Theory of Stress. *J Med Internet Res*, 22(8), e20186. doi: 10.2196/20186. PMID: 32701459; PMCID: PMC7419155.
- Pamuk, E., Cinar, F., Toker, K.(2022). Coronavirus Disease (COVID-19): The Impact and Role of Mass Media During the Pandemic. *Turkish Studies*, 17(1),79-100.
- Paul, B., Salwen, M.B., & Dupagne, M. (2000). The Third-person Effect: A Meta-analysis of the Perceptual Hypothesis. *Mass Communication & Society*, 3, 57-85.
- Perloff, R.M. (2002). The Third-person Effect. In B. Jennings & D. Zillman (Eds.), *Media Effects: Advances in Theory and Research*. NJ: Mahwah.
- Porlezza, C. (2019). Accuracy in Journalism. In *Oxford Research Encyclopedia of Communication*. Oxford University Press. <https://doi.org/10.1093/acrefore/9780190228613.013.773>
- Rahman, F.N., Bhuiyan, M.A.A., Hossen, K., Khan, H.T.A., Rahman, A.F., & Dalal, K. (2021). Challenges in Preventive Practices and Risk Communication towards COVID-19: A Cross-Sectional Study in Bangladesh. *International Journal of Environmental Research and Public Health*, 18, 9259.
- Reddy, B.V., Gupta, A. (2020). Importance of effective communication during COVID-19 infodemic. *J Family Med Prim Care*, 9 (8), 3793-3796.
- Riha, J., Claudia, A.L., Ibrahim, N.A., & Srinivasan, S. (2021) Media and Digital Technologies for Mixed Methods Research in Public Health Emergencies Such as COVID-19: Lessons Learned From Using Interactive Radio–SMS for Social Research in Somalia. *Journal of Mixed Methods Research*, 15(3), 304–326.
- Scopelliti, M. (2021). TV News and COVID-19: Media Influence on Healthy Behavior in Public Spaces. *Global Research in Telehealth: Challenges, Emerging Opportunities and Needs in Society*. 18(4), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7919256/#:~:text=Results%20showed%20that%20media%20exposure,the%20use%20of%20public%20spaces>.
- Singh, S., Muttreja, P., Chowdhary, D.N., Kalaan, M.K. (2022). Relevance of Social and Behavior Change and Communications in the Media on COVID-19 Response. In: Pachauri, S., Pachauri, A. (eds.), *Health Dimensions of COVID-19 in India and Beyond*. Springer, Singapore. [https://doi.org/10.1007/978-981-16-7385-6\\_17](https://doi.org/10.1007/978-981-16-7385-6_17)
- Talabi, F.O., Oyedeji, K. A., Adelabu, O., Sanusi, B. O., Alade, T., Talabi, J.M., Bello, S.B., Lamidi, I.K., & Alade, M. (2022). Public perception of radio campaign messages in managing COVID-19 pandemic in selected states, Nigeria. *Human Vaccines and Immunotherapeutics*, 18(5), <https://pubmed.ncbi.nlm.nih.gov/35714340/>
- Truong, N. X., Ngoc, B. H., & Ha, N. T. (2022). The Impacts of Media Exposure on COVID-19 Preventive Behaviors Among Vietnamese People: Evidence Using Expanded Protection Motivation Theory. *SAGE Open*, 12(2). <https://doi.org/10.1177/21582440221096129>
- Tuccori, M., Convertino, I., Ferraro, S., Cappello, E., Valdiserra, G., Focosi, D., & Blandizzi, C. (2020). The Impact of the COVID-19 "Infodemic" on Drug-Utilization Behaviors: Implications for Pharmacovigilance. *Drug Saf*, 43(8), 699-709.
- Ven der Linden, S., Roozenbeek, J., & Compton, J. (2020). Inoculating against fake news about COVID-19. *Health Psychology*, 11, <https://doi.org/10.3389/fpsyg.2020.566790>
- World Health Organization. Communicable Diseases Cluster. (2005). WHO outbreak communication guidelines. <https://apps.who.int/iris/handle/10665/69369>

World Health Organization. COVID-19.(2020). Global risk communication and community engagement strategy. Geneva: World Health Organization.

Zhaohui, Su., McDonnell. D., Wen, J., Kozak, M., Abbas5, J., Šegalo6, S., Xiaoshan, Li., Ahmad, J., Cheshmehzang, A., Yuyang, Cai., Yang, L., & Xiang, Y. (2021). Mental health consequences of COVID-19 media coverage: the need for effective crisis communication practices. *Globalization and Health*, 17(4), <https://doi.org/10.1186/s12992-020-00654-4>

Zhao, X., Delahanty, J.C., Duke, J.C., MacMonegle, A.J., Smith, A.A., Allen, J.A., & Nonnemaker, J.(2022). Perceived Message Effectiveness and Campaign-Targeted Beliefs: Evidence of Reciprocal Effects in Youth Tobacco Prevention. *Health Communication*, 37(3), 356-365.