

# Comparative Analysis of Risk Communication during COVID-19 Spread Period in Two Nations: China and Australia

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**Abstract.** Risk communication strategies during the spread period of COVID-19 outbreak could have huge impacts on the development and transmission of pandemic. A proper strategy of risk communication could effectively reduce the adverse outcomes of the disease and lead to a nationwide recovery. In this study, the risk communication strategies adapted by two nations: China and Australia is investigated and concentrated on the January 2020 to July 2020, when the transmission of the disease was in an exponential ascending trend. The result of this study suggested that risk communication requires decent preparedness to be effective, and many lessons could be learnt from the reaction of both countries for further improvements.

**Keywords:** Risk Communication, Covid-19, China, Australia.

## 1. Introduction

In December 2019, the emergence of a novel coronavirus named COVID-19 was initially confirmed and reported by Wuhan, China, which then transmitted over the country and across the world within 3 months. In March 2020, the confirmed cases outside China have grown exponentially by 13-fold, with more than 118,000 cases in 114 countries with over 4000 cases of death, the World Health Organization (WHO) has announced the COVID-19 outbreak as a global pandemic, a public health emergency crisis that is worth international concerns [1]. This pandemic is believed to be one of the greatest threats to humankind, until present, the COVID-19 data collected by Johns Hopkins university has reported that the pandemic has infected 614 million people, and has caused the 6.5 million deaths worldwide [2]. The pandemic not only impacted on people's health system, but it also had severe negative influences on the social system, politics, and economics in all countries.

Upon the declaration of COVID-19 as a global pandemic by WHO, the virus outbreak has already reached the first spread period, with rapidly increasing infected patients spreading across the world; efficient risk mitigation strategies were essential to reduce the possible negative outcomes. Among all the strategies, risk communication is the most direct connection between the officials and the public to exchange information about the disease prior to further action of other mitigation strategies, it is also one of the most commonly used strategies on a daily basis. According to the WHO guideline for emergency risk communication (ERC) policy and practice, the definition of risk communication is stated as the exchange of information, opinions and advice between the experts, official authorities and population susceptible to the risks on a timely basis [3]. It is an indispensable category of emergency preparedness in the field of public health, especially during the spread period of pandemic. For people who are most vulnerable to risks, effective risk communication could enhance their understanding and perception of the risk, and allow individuals to perform better protective behaviors for their own wellbeing [4]. On top of that, it provides opportunities for officials and experts to pay more attention to their needs and concerns of the public and therefore be able to provide relevant, acceptable and timely advice [4]. Along with the WHO Director-General, Dr Tedros Adhanom Ghebreyesus stated that: "We are not just fighting an epidemic; we are fighting an infodemic." It emphasized the hardship of communication during a period where the demand of information and up-to-date facts were in urgent demand [5].

Different countries have different strategies in risk communication strategies during the spread period of pandemic. An effective risk communication not only can save more lives, it can further reduce the negative impacts on social stability and economics. This study will be introducing a

comparatively analysis of the risk communication strategies between China and Australia regarding the spread of COVID-19, and to understand what was most effective methods that could be adapted to the future improvement. This is going to be comparative analysis based on a series of literature and documentary reviews on the risk communication and emergency responses of China and Australia when encountering the spread of COVID-19.

## **2. Risk Communication**

Risk communication can be categorized into internal communication and external communication, both are equally important in disseminating information during pandemics. Internal communication is assessing information among the officials such as the government, and the experts to establish a consensus of their responsibilities and the appraisal of the possible outcomes and impacts depending on the available information [4]. The external communication is the dissemination of information between the officials or experts and the public, with the aim to raise awareness of the potential harmful effect of the risk [4]. Effective risk communication should be delivered in a transparent, trustworthy, timely and accurate manner, as suggested by the WHO [6].

### **2.1. Major risk communication strategies implemented by Chinese government**

The outbreak of the novel coronavirus in China has been so unforeseen and the local government has not performed a well-prepared emergency management against the disease. Although the Wuhan government has a risk communication that contains all the internal and external communication between the public community and the government, the hesitation delivery of information has created extra burden for both the officials and public to perform protective actions and thus increases the spread of disease. The Wuhan provincial government response to the outbreak didn't achieve effective communication in both internal and external aspects. In terms of internal communication, the information about the outbreak of new virus was kept exclusively among the government and research institutions, and the investigation was undertaken privately with the purpose of maintaining social stability and avoid public panic [4]. On the side of external communication, the first official announcement of the government emphasized lack of evidence to support the virus can be transmitted between human vectors, and reported that there were no healthcare workers infected with COVID-19 [4].

Nevertheless, after rapid and intense research about the novel virus, the epidemiological characteristics has been verified by the Chinese Center of Disease Control and Prevention, the government has eventually announced a highest level I of emergency response is required to fight against the disease, but over 2,744 people has been infected by the time of the lockdown, with approximately five million people left the city prior to lockdown; it increased the difficulty to manage the disease transmission [7]. Due to the delayed announcement for emergency response resulted in a sluggish strategy of lockdown and other protective strategies, thus broadened the scope of the outbreak. As in a domino effect, the untimely and ineffective communication further lead to inadequate preparedness of the governments, hospitals and the public. They have experienced shortage of necessities, disordered collaboration and management between authorities and thus deteriorated the outbreak of virus.

### **2.2. Major risk communications strategies implemented by Australian government**

The first officially confirmed case of COVID-19 in Australia was on 25th January 2020 [8]. the Australian government had a relatively better emergency preparation as the outbreak of the novel coronavirus in China has already attracted the world's attention, and the spread of information was promptly on digital media platforms. The prime minister of Australia, Scotts Morrison and his government have put their best effort to follow the WHO's emergency risk communication guidelines to deliver transparent, trustworthy, timely and accurate information to the public [6]. By the time the total number of diagnosed cases has reached one thousand, and doubled in the consecutive three days

on March 21, 2020, the Australian government has initiated their emergency response with a \$2.4 billion health package and the \$30 million has been allocated towards the establishment of effective risk communication [5]. The Australian government has implemented a media dissemination of information focused on information sharing approach based on scientific evidence, with emphasizing the potential issue severity to avoid scandalous discourses [5].

Crisis and emergency risk communication (CERC) and framing theory were the two of the main strategies used by the Australian prime minister and his government to design their communication policies [5]. CERC focused on providing theory and scientific evidence-based frameworks for community leaders to share both risks and potential optimism to raise the public awareness and to avoid encountering uncertainties of the risks during an urgent time constraint [9]. The framing theory emphasized the continuous understanding and development of context in terms of risks when unraveling the situation [5]. The language selection for risk communication is suggested to be inclusive, such as “we”, “us” to acknowledge diverse emotions during the pandemic, along with delivering accurate, transparent and timely information. And this is important to establish trust and empathy to achieve successive communication [5]. In addition, the risk communication response by the Australian government has also succeeded in selecting a trusted leader to do the most communication work, which aims to engage risk reduction responses from the public and also have a flow-on effect to public health worldwide.

### **3. Role of Media in Risk communication**

Throughout the entire spread period when the number of infected patients were increasing exponentially, the media was one of the essential major sources to deliver the information about the disease to the public, and build connections between the official authorities and individuals at different levels of susceptibility to the disease [10]. During the spread period of COVID-19, social media played a critical role in disclosure of information. When the governments and authorities have not released official reports about the virus with clarity and certainty to the public, people tend to alternate their path of seeking information in various social media platforms [11]. However, due to different perspectives and voices being shared and spread in the media, the diverse media environment made it extremely difficult to distinguish between the trusted and untrusted sources of information on the digital platforms. Which raises the level of difficulty in risk communication during the initial stage of spread period, as the uncertainty of information was more likely to cause social panics [10].

#### **3.1. China - ‘Rumormonger’ or ‘Whistleblower’**

Prior to the WHO announcement on COVID-19 as a global pandemic, the Wuhan government has officially claimed a ‘rumormonger’ - Doctor Li Wenliang, due to his spreading of “rumors” about the novel coronavirus diagnosed at the hospital he worked at as the new SARS on the social media and try to attract the public’s attention and persuade people to have protective behaviors [4]. However, with the increasing information being revealed on multiple platforms, along with people’s increasing scientific understanding and certainty on the virus, the spread of “rumors” about COVID-19 turned out to be the very first actual warning to the public [4].

On the other hand, the official clarification by the Wuhan government stating that there was zero evidence suggesting the novel coronavirus can be transmitted between human to human turned out to be untrue [4]. The spread of pandemic information from untrusted media sources could heighten the confusion and cause fear-mongering among the public and lead to negative consequences in individuals’ mental health. According to a study focused on the psychological outcomes of social media and health communication during the spread period of COVID-19, it was reported that 17.2% of the respondents experienced panic and 24.3% were having anxiety, and this is possibly due to limited knowledge about the pandemic [10]. The overwhelming and diversified information from various online sources could lead to emotional instability, which further influences individuals’ evaluation of the risks and their judgment to implement preventive behavior [10]. Health risk

communication is a key factor to minimize the negative outcome of pandemic, and communication strategies could be improved in multifaceted ways.

### **3.2. Australia - Media as the most evident tool to influence public's perception to the virus**

Based on a study done by Bernard et al. (2021) focusing on the COVID-19 media release during January 25, 2020 to July 1, 2020 by the Australian prime minister to communicate about the risk of COVID-19 during the most initial and exponential disease spreading period; the communication strategy has effectively achieved a low level of virus transmission and disease mortality [5]. The prime minister, Scott Morrison has delivered a hundred percent of the information through media release and media statements. The information delivered were predominantly about political and economic context, such as economic policy implementation, economic impacts of the pandemic and what were the control measures being taken and anticipated in the future [5]. Besides, as the trusted leader to deliver the risk information to the whole country, PM Morrison has been frequently mentioning actions being taken by the government which were discussed and had consensus with the National Cabinet, emphasizing the actions that could help to reduce strain and concerns of the COVID-19 on the community [5]. In his communication through media, he has included the essential components of CERC. For instance, a clear message about the actions being taken were frequently explained with clarified scientific facts and specific time frames of action, accompanied by including perspectives from experts in the field of health as guest speakers to reinforce the certainty and uncertainty about the disease. A strong reliance on experts and trustworthy officials has always been helpful in engaging the community to make compliance with the protective measures against the pandemic. It is believed that PM Morrison has definitely provided transparent, timely and accurate information about the disease, the responses taken and expected in the future to reduce the burden by the virus in social, political and economic aspects. However, a limited sense of empathy through the expression of words to emphasize the commitment and compassion by the PM Morrison, which only took up half of the communiques analyzed, and mostly from the guest speakers [5]. It is suggested that empathetic language can aid to manage and mitigate social panic and anxiety when it is implemented in communication and emphasize the importance in a pandemic.

Another study about the effect of risk communication on school closure has also shown the limitation in the Australian government communication strategy during the initial spread period of the COVID-19 outbreak. Upon the advice of pre-emptive school closures from the Australian Health Protection Principal Committee (AHPPC) in March 2020, with the purpose to reduce the spread of disease [12]. However, a high concern and high uncertainty emerge as the school closure strategy has started due to an inconsistent delivery of information and the uncertainty about the aftermath of school closure. For example, a debate between re-opening schools and school closure has always been ongoing. This is because the degree of risks associated with school attendance, school staff and workers have always been uncertain and there could be an outbreak anytime during reopening of school [12]. But there are also many negative impacts in remote learning such as affecting children's educational outcomes and wellbeing, with up to 46% of students at all age groups vulnerable to a variety of adverse effects, especially for students from a lower socio-economic background [12]. Therefore, during a novel pandemic, it is essential for governments to make decisions and meanwhile acknowledging all the uncertainties disease based on all types of scientific evidence. This could effectively help the government to increase trust between the public and themselves, and further establish a better protective strategy in consensus to fight against the disease.

## **4. Potential improvements for risk communication**

To enhance health risk communication during a pandemic, the WHO has recommended three categories as a guideline [14].

First is to build trust and engagement with people susceptible to risks. The information disseminated should be transparent, timely and acknowledge the uncertainties at the given time. Also, the

knowledge should be simplified in external communication with different strategies targeting different socioeconomic groups to reduce the communication inequalities during the pandemic [15]. In addition, it is also helpful to create an autonomy-supportive environment that engages individuals to develop their preventative behaviors for their own reasons, meanwhile enhancing their emotion of acceptance and respect [16].

Second is to integrate emergency risk communication into health and emergency response systems [14]. The government should take the leadership to designate a strategic role in nationwide emergency preparedness within a sustainable budget, and always be prepared. Besides, the government should not only provide restrictions which some are counter-intuitive and hard to comply with. Instead, they can advise people with constructive recommendations of things they can be proactive with, which is directly related to pandemic [16]. This could empower the public to have a sense of control and decrease confusion and fear among the public.

Lastly, emergency risk communication should always be in a continuous process that focuses on both preparedness and response. The healthcare authorities should frequently circulate on social media to identify the rumours and prevent them from spreading further [17]. Furthermore, social media and traditional media should develop an integrated strategy to produce verified and accurate information.

## 5. Conclusions

The evaluation of the risk communication during the COVID-19 pandemic in both China and Australia reflected that communication must acknowledge the uncertainty about the information explicitly, especially during the spread period of a novel disease, when there is an urgent demand for timely, transparent and accurate information. Although China has not implemented a successful risk communication strategy when first encounter the novel coronavirus, as the officials had a stuttered response without a fully transparent communication about the disease, but the risk communication has been improved as more facts about the virus are discovered and two of the most trustworthy specialist in this field: Dr. Nanshan Zhong and Dr Wenhong Zhang, were mainly making announcements and having conferences about the virus. Along with the further risk management strategies such as lockdown, quarantine and building hospitals within a month for treating infected patients has effectively reduced the adverse impacts of disease. Australia had a privilege to have better emergency preparation when encountering the disease, which the PM Morrison and his government has achieved in disseminating the information in a transparent, accurate and timely manner. However, there were still some uncertainty remains internally between the official authorities and not published to the public that caused the public to experience panic and insecurity about the situation. Furthermore, the lack of empathy is reflected in the communiques from the officials, which could also be improved to enhance the risk communication. All in all, effective risk communication could empower the population to control the spread of pandemic at their own pace by reducing the spread of disease through motivating individuals to engage in preventative behaviors, reduce emotional and social instability as well as decrease fear and confusion among the public.

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