

PARENT TRUST ON THE IMMUNIZATION PROGRAM: *Media Coverage over Counterfeit Vaccine in Indonesia*

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ABSTRACT

The primary purpose of this research is to discover how parent trust on the immunization program; to identify advocacy strategy on health issues with the influencer role. The finding of counterfeit vaccine in Indonesia becomes the background. Under normal circumstances, some parents choose not to vaccinate their children for various considerations and reasons; such as fear of the substances inside the vaccine and black campaign issues. The media coverage and headlines about counterfeit vaccine, further raises the parent hesitancy to vaccinate their children. Health communication strategy is crucial to communicate the importance of immunization. This research used qualitative method with case study approach by interviewing key influencers in the field of vaccines and public figures. Stakeholders involved in the vaccine issues are the Ministry of Health, National Agency of Drug and Food Control (NADFC) and vaccine manufacturers in Indonesia. This case study concludes that it is important to educate the public on the health issues. The government requires further advocacy in re-educating journalists, parents, and health professionals. As the implication to prevent the similar case in the future, various relevant stakeholders are required to put forward synergism and intensive coordination among them to increase parent trust on the immunization program.

Keywords-component; Trust; Immunization; Health Communication; Influencer; Counterfeit Vaccine

I. INTRODUCTION

Media plays a significant role in shaping people's perception, understanding, and trust on health issue. In June 2016, the public was shocked by the findings of Indonesia Police Criminal

Investigation Department (BARESKRIM POLRI) about the counterfeit vaccines, started in June 26, 2016. This issue became the headlines for many mainstream printed media and online media in Indonesia and became the subject of intense public interest. During people preparing Eid Festive and went to their hometown, the media continuously presented news from a variety of perspectives, both aspects from the police investigation and the counterfeit vaccine maker's perspective. *Netizens* in online media continued to provide feedbacks and opinions, until the end of June 2016, counterfeit vaccine became a trending topic in Social Media.

The findings of counterfeit vaccines case in Indonesia, as well as the rapid development of media, various influencer and public figure who are competent in *vaccinology* and immunization background and who have less understanding about the vaccines simultaneously enliven and give opinions on several medias. Moreover, various statements from community leaders, Ministers, Vice-President and President delivered either calming or anxiety perspectives to public.

The World Health Organization (WHO) stated, The Expanded Program on Immunization (EPI) was established in 1976 to ensure that infants or children and mothers have access to routinely recommended infant or childhood vaccines. Six vaccine-preventable diseases were initially included in the EPI: tuberculosis, poliomyelitis, diphtheria, tetanus, pertussis and measles.

The Immunization Program is committed to promoting the health of Indonesian children by reducing the burden of vaccine preventable diseases. The mission of the program is to prevent disease by ensuring that all children are fully

immunized in a timely manner. The Immunization Program develops strategies to ensure that the children are appropriately immunized and have access to vaccines. Each country has a different immunization program, depending on the priorities and health conditions in each country.

The determination of this type of immunization is based on expert review and epidemiological analysis of the diseases that arise. Immunization programs in Indonesia consist of Hepatitis B, BCG, DPT-HB-Hib, Polio and Measles. Successful immunization programs are the foundation of health care in every country in the world. Table 1 shows type of vaccines and timetable of administration in Indonesia from IDAI.

TABLE 1: Type of Vaccines and Timetable of Administration in Indonesia (age 0-18 years)

NO	TYPE OF VACCINES	ADMINISTRATION SCHEDULE
1	Hepatitis B	At birth, 1 month, 6 months
2	Polio	At birth, 2 months, 4 months, 6 months, 18 - 24 months, 5 years
3	BCG (Bacillus Calmette Guerin)	1 - 2 months
4	DTP (Difteri, Pertusis, Tetanus)	2 months, 4 months, 6 months, 18 - 24 months, 5 years, 10 - 18 years (Td booster every 10 months)
5	Hib (Haemophilus Influenza type B)	2 months, 4 months, 6 months, 15 - 18 months
6	PCV (Pneumococcal)	2 months, 4 months, 6 months, 12 - 15 months
7	Rotavirus	2 months, 4 months, 6 months
8	Influenza	6 months - 18 years (repeated 1 time per year)
9	Measles	9 months, 24 months, 6 years
10	MMR such as Measles, Mumps, and Rubella	15 months, 5 - 6 years
11	Typhoid	24 months -18 years (repeated every 3 years)
12	Hepatitis A	24 months - 18 years (2 times, interval 6 - 12 months)
13	Varicella	12 months - 18 years (1 time)
14	HPV (Human Papiloma Virus)	10 - 18 years (3 times)

Source: www.idai.or.id

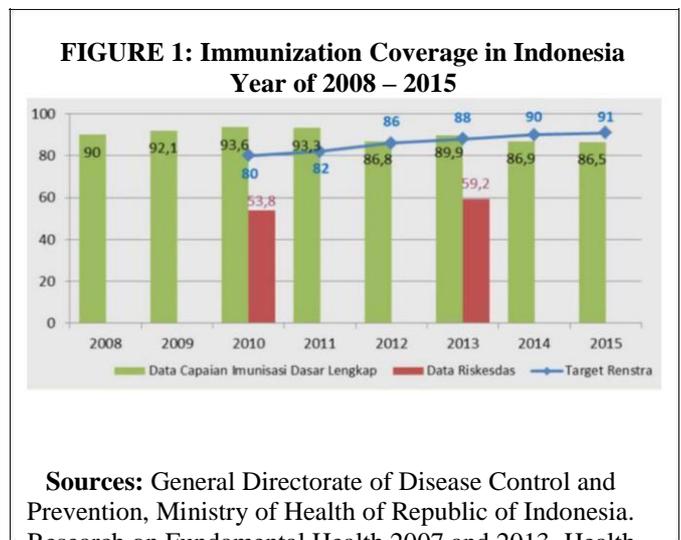
Disease prevention through vaccination has been carried out since five centuries ago. The vaccine works to prevent a person from being infected from a deadly disease. Vaccination is the act of administering a vaccine to actively stimulate one's immunity with the objective to build an active immunity system.

Since 1991, the percentage of unvaccinated children has increased more than double from the previous period; in which one in ten chose not to

give one or more vaccine. Every week they're bombarded with stories about the dangers of vaccines; parents who claimed their children were fine one minute, when vaccinated, they weren't fine anymore. This has happened in some developed countries, the Islamic countries, including developing countries such as Indonesia.

Issues and negative vaccination campaign in each country were different. In the Middle East, for example, health workers who would conduct Polio vaccination were arrested and even got shot for allegedly becoming a part of Jewish strategy for the extermination of Muslims, as vaccination will have an impact on loss of inheritance quality even to infertility.

Likewise, in Indonesia, the occurrence of negative campaign and doubts about the vaccine, the fear of substances inside the vaccine, and issues of "Halal and Haram" has proved that the anti-vaccine movement had already affected the public doubts to vaccinate their children. This ultimately affects the reduction of the targeted vaccination coverage in Indonesia.



Sources: General Directorate of Disease Control and Prevention, Ministry of Health of Republic of Indonesia. Research on Fundamental Health 2007 and 2013, Health Research and Development, Ministry of Health of Republic of Indonesia Additional information: Regular Data of P2P Directorate General in 2015 and was updated in 13 May, 2016.

In comparison to the period of 2008-2011, the complete immunization coverage in 2012-2015 underwent a decrease. The coverage based on regular data in 2010-2013 reached the Strategic Plan (Renstra) of the Ministry of Health. However, in 2014-2015 the communication coverage did not achieve the expected Renstra. The proportion of

complete immunization coverage, research on fundamental health in 2010 was 53,8% and 59,2% in 2013. Yet, both did not achieve the planned target on the specified years.

II. STATEMENT OF PROBLEMS

A. Immunization

Convincing people to adopt healthy behaviors or policymakers and professionals to introduce and change practices to support better health has never been an easy task. Children immunization is one of the greatest medical and scientific successes of recent times. Because of immunization, many diseases that were once a threat to the life and well-being of children have now become rare or have been eradicated in many countries in the world. Health communication has played a fundamental role in this effort since the introduction of the first childhood vaccine (Schiavo 2007:19)

A high degree of trust is involved when communicating to the public about vaccination, as vaccines are generally administered to healthy people to prevent diseases. Every time a parent holds a healthy infant to be immunized, she or he is demonstrating enormous faith in the potential benefit and safety of the vaccine, as well as trust in the health provider who recommended it, as mentioned in a article on protecting public trust in immunization

B. Counterfeited Vaccine

The findings of Counterfeit vaccine revealed by Police Criminal Investigation Department originated from the public and mass media reports about a child who died after vaccination. It started in 2013 when BPOM received reports from the pharmaceutical companies GSK and SG concerning Counterfeit vaccines products of GSK used by two health facilities which did not have the authority to conduct pharmaceutical practice.

The syndicate of Counterfeit vaccines manufacturing practice was said to have lasted for thirteen years. Parents who had vaccinated their children in that period were certainly worried of the possibility that their children were exposed by the Counterfeit vaccines.

Under normal circumstances, some people choose not to vaccinate their children with a variety of considerations and reasons; such as fear of substances inside the vaccine and issues of “Halal and Haram”. The finding of Counterfeit vaccine cases and the agenda setting by the media further raise the parent doubts to vaccinate their children.

The reemergence of many infectious diseases that had started to decline or disappear has influenced health communication in two different but related ways. It is one of the reasons for the health communication renaissance, because of the rising incidence of several reemerging diseases such as cholera and tuberculosis (center for disease control, 1994a), many organizations have pointed to the need to raise awareness of the ongoing risk for communicable diseases by using the health communication approach (freimuth, cole and Kirby, as stated on health communication, from theory to practice, schiavo, 2007:65)



FIGURE 2: Communities seeking facts about vaccine

Source: Documentation of Bio Farma

Fig. 2 shows many communities, religious leaders, parents directly visiting vaccine manufacturer to inspect and assure various confusing issues regarding vaccination. In explaining and answering the doubts of public about the vaccine, the company, along with various stakeholders, communities, and experts made use advocacy strategies; such as the Immunization Awareness Movement Group and Vaccination House (*Rumah Vaksinasi*). They actively contributed their efforts as the influencer or buzzer on social media. They provided concise explanation of both the vaccination benefits and the impacts if the children are not vaccinated.

After uncover counterfeit vaccine syndicate who have been distributed across Indonesia since 2003, Raises the concerns of parents. counterfeit vaccines threaten mostly the young generation. In Indonesia, children are still unprotected from diseases, because of the less than optimum immunization coverage.

Based on the problem identification mentioned earlier, the researcher states the following problems: Improper widespread news and viral information about the findings of Counterfeit vaccines in the media, whether in printed form, electronic, and online media without covering *both side*, could potentially reduce parent trust on the immunization program. There should exist communication strategy to increase parent trust on immunization program. The media should play strategic role in advocating the importance of immunization program.

III. RESEARCH METHOD

This study was designed as qualitative method. The study period was from June 27 to December 30, 2016. June 21, 2016 was the day in which counterfeit vaccine was revealed in Indonesia. Research processes were conducted through observation, interviewing the key influencers and public figures, collecting various specific data, media monitoring analysis, and analyzing the data inductively; from those that were specific to general. In addition, the process also involved data interpretation on media concerning the counterfeit vaccines, advocacy, influencer. Health issue and media coverage during the reports on counterfeited vaccine in some cities in Indonesia showed that the role of media during this period had influenced parent trust on national immunization program.

Research Objective

Based on the background and statement of problems, the aims and objectives are pursued as follow: To discover how parent trust on national immunization program after widespread news and viral information about the findings of Counterfeit vaccines. To identify and examine the role and advocacy strategy on health issues through the Media with the influencer role. To discover what

health communication strategy that is appropriate to increase the parent trust on immunization program.

IV. FINDING / ANALYSIS / DISCUSSION

A. Health Communications

The Center of Disease Control and Prevention (CDC) define health communication as the study and use of communication strategies to inform and influence individual and community decision that enhance health (2001, US. Department of Health and Human Services, 2005). Health communication interventions have been successfully used for many years by nonprofit organizations, the commercial sector and others to advance public, corporate, or product-related goals in relation to health.

“Health communication is a multifaced and multidisciplinary approach to reach different audiences and share health-related information with the goal of influencing, engaging and support individuals, communities, health professionals, special groups, policymakers and the public to champion, introduce, adopt, or sustain a behavior, practice or policy that will ultimately improve health outcomes.” Schiavo (2007:7)

Through agenda setting, the media functions as the mirror which the society requires for understanding itself in the various facets of life. Such framing towards media give issues and events in the society, and would likely shape what the society knows and thinks about themselves (Baran 2010, the power of media in health communication 2016:29). The media performs above the issue like counterfeit vaccine, the coverage of media are engaged in what has been known as health journalism or journalist from health desk. This is called as the gathering and reporting of facts about health issue.

Konfortion, Jack and Davies (2012) the power of media in health communication 2016) content-analyzed the newspaper coverage of the most common cancers and their relation to incidence and cancer awareness campaigns in UK national newspapers. Media in general, play an important

part in influencing the opinions of the public, and their engagement in cancer awareness could contribute to improve knowledge of symptoms that could lead to earlier diagnosis.

The media has been widely acclaimed to have far-reaching effects. This powerful role in bringing important social discourse to public purview cannot be overemphasized. In recognition of this fact, McCombs and Shaw (1972, the power of media in health communication 2016:34) came up with the idea of the agenda-setting role of the media: how media bring to the fore, issues of public interest, and by extending the influence for the public to think at the same direction. In the face of crisis, epidemic and national health issues, the media plays an important role in awareness creation. Mass media have the power to reach significant percentages of the audience. Schiavo (2014) recognized that the media are an important health news source for laying audiences from a public health perspective. Media can influence public perceptions on a disease's seriousness, the risks of having a disease and therefore their portrayal contribute to individual's ideas and beliefs on their own disease and doctors.

Communication approach had successfully built communication understanding between Health Communicator and parents/potential parents. In this term, the communication being addressed was a good interpersonal communication, as stated by Spitzberg and Cupach. The theory is well known as *communication competence*, which is the ability to select proper and effective communication behavior for situation. This model of communication competence consists of three components; namely *knowledge*, *skill*, and *motivation*.

Clive Seale in *Media and Health* (2002: 1) argued that health care and any related behavior were influenced by the news in mass media. Rapid development on information technology through internet indicates that health message is popular and has great influence to the life nowadays. However, the news on health presented in the media is not neutral in nature, some are influenced by the expectation of party to deliver message.

Seale's perspective on media and health was:

"Some health educationist has shifted towards are more radical from a practice, under the rubric of health promotion, media advocacy or communication empowerment. These shifts have involved changes in the way in which audience's relationship with the media has been conceptualized. But even while the shifts have occurred, the overriding perspective of health educator has often been that a health-promoting media ought to deliver accurate, objective information about health risks and health behavior, free from any distortions of ideology, pressure from commercial interest, or obligation to entertain". (Seale, 2002:2)

Health information during media coverage on counterfeited vaccine is often criticized for being misleading, inaccurate, and are not both coverside. The relation to this study is that media and health must transform. If promotion, education, or campaign was previously done directly to the communities, current media development has allowed the strategy organizing of health promotion campaign using new media. Additionally, it also allows such advocating programs and community empowerment to establish. This change is significant due to population development in Indonesia that is becoming more millennial. With this change, the health communicator must also adapt it by performing health promotion through accurate media and concise information on health risk and behavior. In delivering their message on health education and advocacy, the health communicators must be independent and are not bound to any order and sponsor. Additionally, they should not show their standing up for the government, foundation, professional organization, community organization, or even Pharmacy Company.

Health communication, particularly for biological products such as vaccine and other pharmacy products, requires a commonly acknowledged principle in medicine known as *evidence-based medicine* (EBM). Truth is important to maintain the scientific truth itself. It is inevitable that incorrect information consumed by the community occurs anyway. The topics and issue on

vaccine in social media have now been public consumption.

The context of health communicators in this study is the Health Communicator who are related within the vaccination delivery; doctor, pediatrician, midwife, *mantri* (traditional health practitioner), health care staffs, nurses, staffs of integrated health care service, and any health care provider within the area of immunization. Therefore, the health communicators are then those whose professions are mentioned earlier.

Health communicators are prominent in encouraging parents' trust to national immunization program. With the trust, parents may voluntarily take their toddlers for vaccination; in some areas in Indonesia parents do not take their toddlers for vaccination due to lack of information access concerning the benefit of the vaccine.

“Health communication interventions have been successfully used for many years by nonprofit organizations, the commercial sector, and others to advance public, corporate, or product-related goals in relation to health. As many authors, have noted, health communication have draws form numerous disciplines, including health education, mass and speech communication, marketing, social marketing, psychology, anthropology, and

sociology (Bernhardt,2004; Institute of medicine,2003; World Health Organization 2003). It relies on different communication activities or action areas, including interpersonal communications, public relations, public advocacy, community mobilization, and professional communications” (World Health Organization, 2003; Bernhardt, 2004).

The Success or failure of any risk or health crisis communications event such as counterfeit vaccine issues is closely linked in part with the parent's perception of the communicator. Nearly all health practitioners and communicators in the field of risk and health crisis communications view two key variables as fundamental factors-trust and credibility. The terms overlap in some respect but are very different in others. Understanding how messages are impacted by thought by many to be a key to a successful communication in health promotion.

Salmon and Atkin introduce about media issue with a review of health campaigns as health promotion tools, emphasizing the long history of media use in these strategic health efforts. Their review provides a framework for understanding how to develop campaign objectives based on careful formative research, the characteristics of campaign audiences guide message, source, and channel selection, all within the scope of a campaigner's purview, perhaps not too surprisingly, theories that address the components of campaigns are common, but theoretical frameworks to integrate these perspectives are not so readily available. (Handbook of Health Communication, Thompson et al, Roxanne Parrot:445)

B. The Various Roles of the Media

It is overly simplistic to state that the role of the media is to report information to a larger audience. Of course, that is a fundamental part of their task, but in current society their roles and responsibilities, and goals and objectives go far beyond that. Regardless of whether one believes that the media have become nothing more than a part for biased information flow and are bent on changing public opinion toward their bias, the media in our society have always existed to perform several roles; therefore, the roles of the media fulfill in risk and crisis communication events are no different. Lundgren suggest their roles include the following (Lundgren and McMakin 2004, Risk and Crisis Communications (104));

1. **Reporting existing information.** This role is the more traditional one taken on by mainstream media and consist mostly of gathering facts and reporting them out in an interesting way to each segment of the audience.
2. **Influencing the way an issue portrayed.** This role can be less obvious. The number of stories published on the issue, the length of each story, and the placement of the story in a newscast or in print all are major factors that can benignly affect an audience's knowledge of an end issue and, less

obviously, its crisis can have a profound effect on opinion. Crises with national implications are often reported on several times each day by print media, hourly by many broadcast media, and twenty-four hours a day by other online media and some broadcast sources. This intense level of coverage can last for days, weeks, and even months, depending upon situation.

3. **Independently bringing an issue to the public's attention or restricting its coverage.** This role is related point two above. Many media outlets run feature stories that independent of any news events that may be occurring. These stories are often termed "human interest" stories; however, there are no real criteria to determine what the public might be interested in other than ideas generated by the reported and editorial staff (or as suggested above by an organization itself). They can often have their genesis in some topic of "human Interests" but at times comes completely from the interest of those in charge of deciding what stories get written, namely editorial staff of the media outlet. The opposite may also be true in that the media may determine that story does not warrant any mention or will "bury" the coverage in such a way that the audience receives little information about it. In general, this role is restricted to stories that have limited large scale interest among a wider audience. In shorts, if most of the major of media outlets are reporting on a story, restricting its coverage can be more harmful to the outlet not doing so than anyone else.
4. **Proposing solutions to a risk-related decision, including taking a stand on an issue.** This role is both active (when the media outlet composes an editorial and makes clear what its specific position obvious). The latter is related to points 2 and 3 above and is observed by the number and content of the stories presented on an issue.

Public communication campaign is aimed at stimulating interpersonal influences from the health communicators by inspiring, encouraging, and empowering the *influencers*. The influencers are similar to opinion leaders, yet they are at the position to take control and make use of persuasion approach. For example, in Indonesia Pediatric Association (IDAI) several influencers are appointed to be the spokespersons and have the authority in the position to personally educate, encourage, and control the focus in accordance with the age segmentation. The party who is influential in decision making for health education on vaccine may be given to parents, relatives, friends, coworkers, employees, teacher, coach, or private doctor. The influencer plays key role in educating the communities through positive campaign. The success or failure of any risk of health communication in media is closely related with the audience's perception to the communicator.

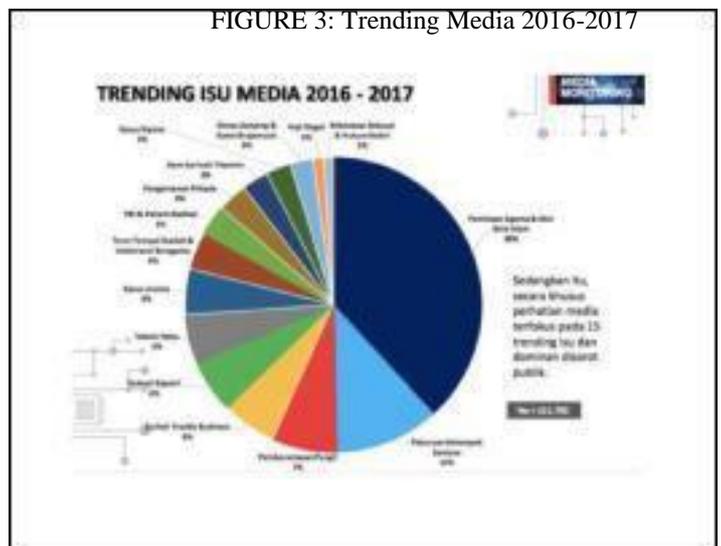
Health communication campaigns require the use of the mass media; a correct media strategy maximizes reach while minimizing costs to optimal results. This address the efficiency and effectiveness questions in media selection. An effective media plan addresses the traditional media concerns of reach and frequency with the gains and downsides associated with them.

Media online in Indonesia is a popular source of information on health-related topics. Nowadays, websites are a common feature of vaccination campaigns. However, while there are many websites on health-related topics, some contain information that might be misleading. It is therefore important to ensure that the content is credible and to take measures that can enhance the trustworthiness of the website. Some credible sources for immunization: www.infoimunisasi.com; www.idai.or.id and www.depkes.go.id

IV. DATA ANALYSIS

The First Research Question is how parent trust on national immunization program after widespread news and viral information about the findings of Counterfeit vaccines. The results show that the media coverage during counterfeit vaccine was reduce trust and related issues such as reputation and adequate risk communication. To be successful in communicating the importance of national immunization program, public health professional need to build and foster their reputation as trustworthy sources of evidence-based information, as this will impact how the public perceives and acts upon their messages. Each action matters and can make a difference by either reinforcing a positive reputation and parent trust.

Consideration of vaccine issue in Indonesia, especially the effect of media during counterfeit issue, education and Transparency about vaccine fact is essential in maintaining public trust. It allows the public to understand the information-gathering process, as well as the risk-assessment and decision-making processes associated with immunization issues. Public health authorities should ensure that information is accessible, accurate, consistent and easy to understand. Depending on the topic to be communicated, this may include presenting clear information on how the process of licensing of vaccines works, which stakeholders are involved in a specific vaccination campaign, ensuring that there are no conflicts of interests or perceptions of undue commercial influence, as well as acknowledging adverse events following immunization. By being transparent authorities can clarify a situation to the public, acknowledge the public's concerns, and provide relevant information about issues where the public has limited knowledge.

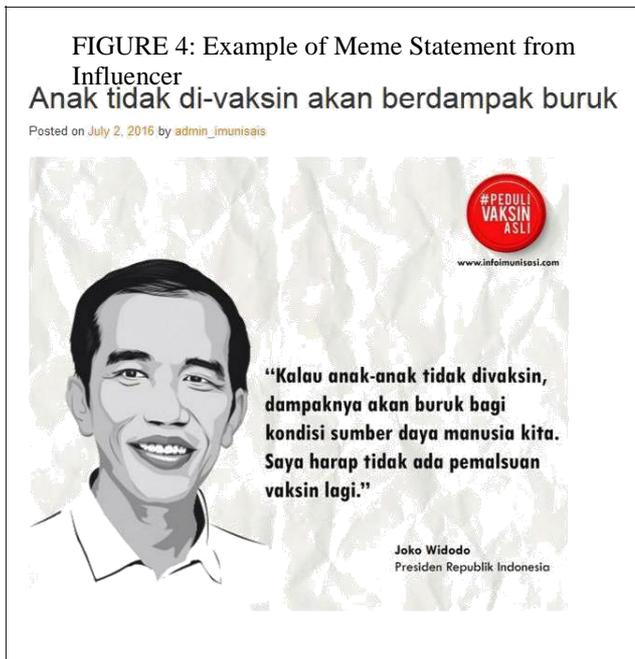


Source : Public Relations Division of Indonesian Police

During June 26 until mid of July, 2016 counterfeit vaccine issue reach 1.080.000 result on google and from media monitoring Public Relations of Indonesian Police, that Counterfeit Vaccine reach 5% attention from fifteen media issues on 2016-2017. This issue became the headlines for many mainstream media in Indonesia and became the subject of intense public interest. The media continuously presented news from a variety of perspectives, both aspects from the police investigation and the counterfeit vaccine maker's perspective.

The Second Research Question is how to identify and examine the role and advocacy strategy on health issues through the Media with the influencer role, the results show that influencers statement such as President, opinion leaders and various influencer and public figure who are competent in *vaccinology* and immunization background delivered calming statement to public.

According to Atkin & Salmon, *Persuasive Strategies in Health Campaign*, 2013. An important goal of campaigns is to stimulate interpersonal influence attempts by inspring, prompting and empowering influencers. Influencers are similar to opinion leaders, but are in a position to exercise means control as well as utilizing persuasion.



source : www.infoimunisasi.com

Fig. 4 shows the meme at www.infoimunisasi.com and share to all social media integrated (facebook, twitter) took from the statement of Joko Widodo, The President of The Republic of Indonesia, his opinion on interview with CNN TV. Here are the statement of influencer or spokesperson on Print, online, and Electronic Media

The statements were delivered by the informants, influencer or spoke person in the media. Many comments whether negative, neutral, or positive exposed the findings of Counterfeit vaccines. The comments were intended to criticize particularly the works of government, in this case the Ministry of Health and NADFC. The comments are as follows:

- "If the children are not vaccinated, it will cause the worst impact for our human resources, I hope there is no Counterfeit vaccines anymore" Joko Widodo, interview with CNN TV
- "It is better for the children to get revaccination, as repeated vaccination is medically fine" ~ Nila Moeloek, Ministry of Health RI (tempo magazine)
- "In addition to its content, the data of hospitals or clinics who bought counterfeit vaccines should be found and exposed the public" ~ Dede Yusuf, (tempo magazine)

- "From the confessions of vaccines makers, the counterfeit vaccines have spread all over Indonesia since 2003" Agung Setya (Kompas)
- "The vaccines (counterfeit) issues is criminal, this is certainly very dangerous," Jusuf Kalla (Tribunnews)
- "The infusion fluid is normally used by the body, and also the antibiotic, therefore the reaction is still very minimal" dr. Aman Pulungan, Chairman of IDAI (Kompas.com)
- "We compare it to the drugs. Drugs destroy the lives of young generation. I think that if drugs can be punished to death, why it (the case of counterfeit vaccines) cannot be punished to death as well?" Seto Mulyadi (Kompas.com)
- "This shows that the control or supervision of the pharmaceutical industry by the Ministry of Health and BPOM as a whole is weak, even worst" Tulus Abadi, YLKI. (detik.com)
- "Related to the Counterfeit vaccines, the parents should not overreact and panic. If there is any doubt, do not need to hesitate to communicate with physicians and even they may see the vaccine's packaging before administration"

Dirga Sakti Rambe (BeritaSatu)

Media is extremely powerful in promoting health, media are essential to the social construction of public health problem. As more parents search online all the information about immunization and vaccine, media and journalists must provide complete information with credible resources.

Currently the government and vaccine manufacturers cannot rely only on journalists to produce news, the owned media, thus eliminating barriers and directly disseminate information to the public. However, with the extraordinary events on the findings of counterfeit vaccines that leads to communication crisis, a more integrated communication strategy is required to mitigate the risk of reputational damage especially parent trust on national immunization program. With the number of significantly growing users, social media can be seen as an opportunity to interact directly with the public. Social media is interactive, allowing to establish two-way communication with the users of another social media.

The **Third Research Question** concerns about health communication strategy that is appropriate to increase the parent trust on immunization program, from the interviews, it can be discovered that the case of counterfeit vaccines, some different narratives and statements made by the Police Criminal Investigation Department (*Bareskrim*) and National Agency on Drug & Food Control (NADFC) which had been published massively by the Media caused doubts and confusions for the public and potentially resulted in distrust in the terms of names of counterfeit vaccine products found, finding area and side effects.

The widespread news on the list of hospitals and clinics that were supposed to use counterfeit vaccines may be detrimental and disturb the public. Additionally, some information broadcasted through new media such as *WhatsApp* (WA) has no official source.

Based on the data mentioned above and the research, the health communication strategies are as follows:

1. **Synchronize the single narrative** or messages, particularly important contents, to be delivered to the public through the media. The synergy is conducted among the Health Ministry, NADFC and Vaccine Industry (BFM)
2. **Develop tools and content media**, website, microsite, meme, video, info graphic and other information from credible and reputable sources.
3. **Organize advocacy strategy** with various stakeholders through stakeholder relations strategy.
4. **Initiate the spinning issue** with other potential interesting news for public, thereby the counterfeit vaccines issue no longer becomes the headlines of media. The media coverage of "*Mudik*" or going hometown is expected to be a potential spinning issue.
5. **Conduct media relations** strategies in the form of media tour to vaccine manufacturer to see the safety, quality, and effectiveness aspects of the vaccines.
6. **Re-educate Parent** to convince the importance of Vaccine
7. **Evaluate The Impact** of the campaign on health communication

FIGURE 5:

The Strategy of Health Communication over Counterfeit Vaccine

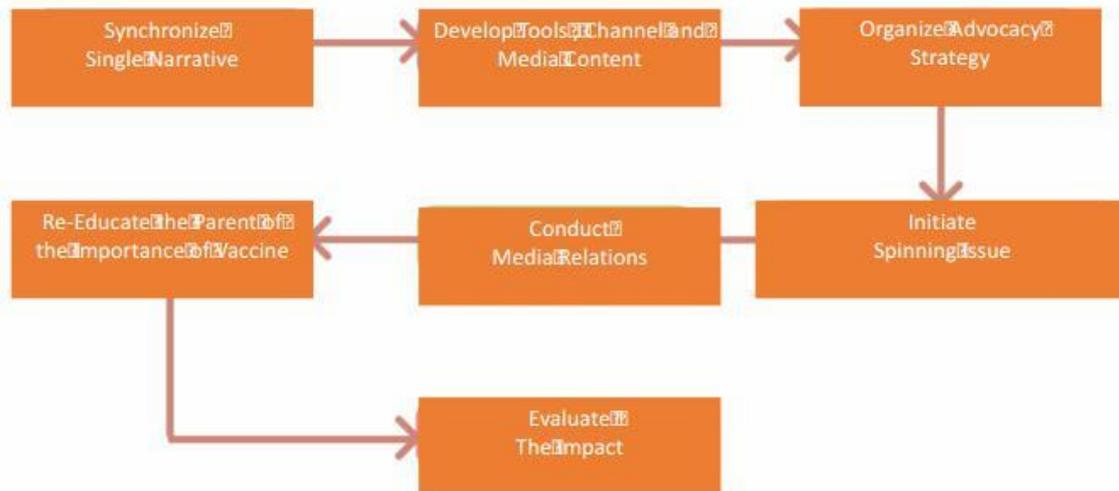


FIGURE 6: Counterfeit Vaccine Discussion on TV ONE



source: Documentation of Bio Farma

As it shows at Fig. 6 some of the famous Indonesian TV Program such as *Indonesia Lawyers Club (ILC)* on TV ONE, produce a special topic of in-depth reporting on counterfeit vaccines, invite speakers from various stakeholders, this is a positive impact on the issue because of the increase of exposure and awareness of the importance of vaccines and immunization program.

V. CONCLUSION

- Regarding the research about media coverage of counterfeit vaccine, it can be concluded that the health communication on the importance of vaccines requires good synergy and coordination with various stakeholders as the vaccine is categorized as essential disease prevention that needs education and specific approach. Education on the importance of immunization program should be made more creative and measurable. The strict monitor and supervision is mandatory for regulators and governments in monitoring aspects of the vaccines distribution as well as the implementation of vaccine waste control in order not to be reused by counterfeit vaccine syndicate.
- Vaccine manufacturer requires for more advocacies in performing the re-education through various stakeholders such as journalists, communities, parents, and health professionals. As the implication in order to increase parent trust, then various

stakeholders are required to perform proper and intensive coordination. Government should be committed to perform re-vaccination for children in order to increase parent trust in immunization program.

- Trust are parameters to work with – before and while undertaking any communication activities – to ensure that information on immunisation is acknowledged by the public and advice is followed. Undertaking the different steps for preparing and implementing a communication prog-ramme will increase effectiveness of immunisation campaigns. This includes managing stakeholders, selecting priority audiences and assessing their knowledge, attitudes and behaviours, selecting the most appropriate communication channels to reach them, as well as formulating key messages, being consistent and creating materials that address the information needs and concerns of the priority audiences.
- Practically this research is useful for government and vaccines manufacturers or pharmaceuticals in general. This research show how to perform health communication, especially education on the importance of immunization program through advocacy for all stakeholders, particularly the media. This research can be beneficial for the government and vaccine manufacturers in preparing resources to face the negative campaign in the field of health. In addition, it can also beneficial in planning the integrated health communication to support the successful national immunization program.

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Padjadjaran Indonesia, field of health communication, case study as a part of dissertation of health communication strategy on vaccine education for children under five years in two cities in Indonesia.

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