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THE NEW NORMAL : Creating a Pleasant Virtual Communication

Lessons on effective communication from Taiwan Government to combat COVID-19

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The 2019 corona virus disease (COVID-19) is airborne and highly transmissible, as well as extremely lethal. The greatest impact of the spread of the infection is on communication and social interaction. This condition is a serious concern for all nations, because it disturbs the order of human life in society, including in Indonesia. The world was shocked by the speed of its spread and the extraordinarily high mortality rate. March 12, 2020 was the first day the WHO began announcing case counts country by country. That day, in one 24-hour period, four new countries reported cases of COVID-19, namely, French Polynesia, Turkey, Honduras, and Côte d'Ivoire (WHO, 2020). The WHO warned that the symptoms could be severe and mortality was high, along with a rapid rate of transmission. Although the WHO continued to share knowledge about patient care and hosted a discussion for clinicians via teleconference twice a week, its spread in the community could not be stopped (WHO, 2020). On that day alone, 118 countries reported about 125,000 confirmed cases to the WHO. Indonesia reported a total of 34 confirmed cases to date, with 7 confirmed new cases, and one death, all of which were locally transmitted (WHO, 2020).

Indonesia is struggling to combat Covid-19 and the government is using several different strategies to slow its spread in the community. Despite these strategies, cases are continuing to skyrocket and the death rate is rising exponentially every day in Indonesia, in contrast with Taiwan, Vietnam and New Zealand, which have had greater success at controlling its spread. Since March 2020, Taiwan has had remarkable success eliminating local transmission over a period of five months (Aspinwall, 2020). Vietnam and New Zealand have likewise achieved long periods without new local cases, at 100 and 102 days, respectively (Everington, 2020).

Roughly three months later, on June 17, 2020, Taiwan's Central Epidemic Command Center (CECC) reported a total number of 74,699 suspected cases of COVID-19, of which 73,775 tested negative. At that point, confirmed cases in Taiwan numbered 445, of which 354 were imported, 35 were transmitted locally, with 36 cases among the crew of a navy ship abroad. Of this total, 434 had been hospitalized in isolation wards and 7 people had died of the disease (Taiwan Centers for Disease Control, 2020). There were few (123) new cases, all imported, for five months with no local transmission until November, 2020, when the CECC

announced four more imported cases, this time from France, Germany, the United Kingdom, and the Philippines. More recently, confirmed cases have reached 850 of which 751 recovered with still only 7 deaths on January 16, 2021 (CECC, 2021).

In contrast to Taiwan's success, Indonesia recorded the highest number of cases among ASEAN nations on June 17, 2020, with 41,431 positive cases, and 2,276 Covid-19 deaths, along with 1,241 new cases in a single day (Azanella, 2020). In addition, Indonesian Medical Physicians Association tracked the death rate of health care professionals due to COVID-19, reporting 252 deaths of physicians, 171 nurses, 64 midwives, 7 pharmacists, and 10 medical laboratory personnel, with the number of deaths increasing by five times since the first wave of the pandemic hit Indonesia (Antara, 2021). As of the time of this writing, the government's latest estimated 1,037,993 positive cases and 29,331 deaths, while 647 health worker deaths due to COVID-19. Meaning that Indonesia lost its population in a big city and the loss of health care workers due to Covid-19 has also exacerbated the problem of distribution of health workers that has not changes evenly in the health care centers or hospitals.

How can we explain the extraordinary gap in cases and deaths between Indonesia and Taiwan? Why does Taiwan have just 7 deaths while Indonesia reported 14,348 deaths in the first week of November 2020? What strategy did Taiwan's government employ to combat COVID-19? What lesson can be learned from Taiwan to combat Covid-19? It is a great challenge for an Indonesian nursing student studying in Taiwan to experience firsthand the stunning difference between Indonesia and Taiwan in the exposure and prevention of COVID-19. The aim of this article is to identify lessons on effective communications strategy used by Taiwan's government that can affect government, health professionals, and population together to combat COVID-19.

Findings and Discussion

1. Taiwan government strategy used to overcome or prevent transmission COVID-19

Wang, Ng, & Brook (2020) Covid-19 occurred before the Lunar New Year celebration in January 2020, and around 2.71 million visitors from the mainland traveled to Taiwan to celebrate with their families. The distance between Wuhan and Taiwan is close, and 850,000 Taiwanese resided in China, with 404,000 working there (Gardner, 2020). Based on these facts, epidemiologists expected Taiwan to have the second highest number of coronavirus cases after Wuhan due to its proximity to and the number of flights between China and Taiwan. Yet Taiwan became an outstanding success story in combatting the coronavirus (Wang et al., 2020).

What strategy did Taiwan's government use to combat COVID-19 to protect the nation? Wang is Medicine and Health Research and Policy from Stanford University California mentioned that the government quickly response to COVID-19 by recognizing the crisis and managing the crisis in nation. First, Taiwan has been on constant alert and ready to act on epidemics arising from China ever since the severe acute respiratory syndrome (SARS) epidemic in 2003. Then, Taiwan created a public health strategy to enable rapid response, starting with monitoring to identify emerging crises, managing the crisis, and educating the public by using communication and political leadership during an outbreak. Also, the government had access to database and for tracking cell phone location data as part of contact tracing and enforcing quarantine, and proactive testing (Wang, 2020). Moreover, the government established the National Health Command Center (NHCC) and the Central Epidemic Command Center (CECC) which were focused on direct communications among central, regional, and local authorities. Besides that, the government used measures to gain control of the situation within five weeks from January 20 to February 24, 2020 like delaying the start of school after lunar new year and shutting down businesses like restaurants; Mandating masks. Moreover, Taiwanese government based strategies on hospital data to combat COVID-19 involved five important components, namely (1) border controls, (2) media communication tools and conferences, (3) establishing a distribution system for rationing medical masks and an online ordering mechanism, (4) Travel Occupational Contact Cluster-based rapid triage, outdoor clinics, and protective sampling devices, and (5) social distancing, postponing resumption of classes,

and banning large assemblies, such as religious festivals and concerts (Chen et al., 2020).

2. *Taiwan policy and politics to control COVID-19*

In terms of pandemic policy and politics, communication through the media is important for social continuity and keeping communities intact. New technologies have disrupted traditional human habits and changed behaviors. For example, for communication, it becomes less common for people to meet and interact directly with other people face-to-face in the same time and place due to the emergence of new technologies such as portable social media. Accustomed to looking at screens all day, people easily trust information that is untrue coming through electronic devices. Democracies are debating the extent to which governments should be involved in controlling disinformation harmful to human and social health. More authoritarian governments control digital content without apology, suppressing falsehoods but also valid political criticism. Jankowski in Lievrouw and Livingstone (2006) describes a “virtual community” as incorporated in an environment that is not physically visible but has a virtual form. Humans can also interact with each other virtually and form communities to facilitate sharing information. Modern societies are described as information societies because people access to a great deal of information is necessary now for daily life.

Taiwan acted quickly as an independent country to combat COVID-19 because it learned from the history and tragedy of severe acute respiratory syndrome (SARS) in 2003 and the H1N1 pandemic of 2009 (Su & Han, 2020). Without using coercive measures, the government organized a disciplined and comprehensive social response, including the public, the military and technology companies. For example, the soldiers took part in drills organized by the New Taipei City to put in action “Taiwan’s anti-coronavirus strategy” which utilizes a combination of proactive measures and technology in the form of analyzing phone data for contact tracing and monitoring people in quarantine and using online platforms to notify the public about specific risks. In addition, Su and Han describe how the government quickly organized strategies for controlling specific situations that might emerge and allocating resources to protect the public health. Finally, both the CECC and other government officials employed culturally sensitive and transparent public communications and organized a comprehensive society-wide partnership that involved civil society organizations, schools, businesses, and technology platforms in taking precautions to prevent the virus’ potential spread (Su and Han, 2020). Another strategy came from the Communicable Disease Control Act which was amended by the Ministry of Health and Welfare in June 19, 2019. The law involves seven sections and each section outlines very clear general principles, and details of the disease control system, prevention of communicable diseases, disease control measures, quarantine measures, penal provisions, and supplementary provisions. For example, passengers who refuse to wear masks on public transport will be fined up to NTD 15,000.

Therefore, Taiwan’s success in fighting COVID-19 is due to seriousness of the government in handling the confirmed and suspected cases, the high level of organization and advance preparation and the level of public trust in the government in terms of preventing COVID-19. Seriousness was evidenced by the immediate formation of a disaster response team and by establishing a framework of disease control (Yeh & Cheng, 2020). Yeh and Cheng mentioned that Centers for Disease Control (CDC) has the basic responsibility for public health governance and designing and carrying out major policy actions for tackling COVID-19, namely (1) creating the Central Epidemic Command Center (CECC), (2) testing, tracking, and epidemiologic investigation, (3) travel restrictions, quarantine, and surveillance, (4) provisions for healthcare and healthcare worker protections, and (5) precautionary measures and travel history tracking. Furthermore, the authors pointed out that Taiwan’s government response is the synergistic result of many policies such as (1) centralized leadership and CECC professionalism, (2) democracy and political accountability, (3) civil society and social participation, and (4) ethical and legal considerations.

The communication and politics in which government reassures and educates the public as a way of fighting misinformation, whether outright hoaxes or offering help analyzing and sorting through the deluge of facts, rumors, and disinformation that arise during any infodemic (Wang, 2020). Digital technology in modern society makes it possible to obtain and direct personalized information. However, the efficiency and

automation of digital technology platforms sometimes enables hoaxes and disinformation that can interfere with an effective public response to health threats. In fact, low quality information is a threat to the nation if it is not followed and corrected in communities characterized by diversity and plurality, as in Indonesia. If disinformation is not controlled, it will lead to public distrust of important information from the government; the global nature of disinformation is an emergency. For example, Taiwan is using humor as a tool against coronavirus hoaxes (Quito, 2020). These strategies have made Taiwan successful in suppressing the number of cases of Covid-19 in the country.

3. *What lesson can be learned from Taiwan to combat Covid-19*

The nightmare of SARS in 2003 formed the national cultural character to become sensitive to the threat to life from a virus. In addition, the government's rapid response to containing the Covid-19 pandemic accelerated efforts to prevent community spread of virus. Based on Pfeiffer (2021, January 31st) mentioned that there are eight Taiwan's society-wide response in related to prevent Covid-19, namely (1) many institutions, including schools, hospitals, businesses and monitoring employees and visitors taking temperature of everyone who enters the facility for screening for fever at entrances; (2) connecting travel data with national health insurance data, (3) large scale public gatherings and public transportation, meaning that everyone wears a surgical mask, whether or not they have cold symptoms. Subway cars and buses are cleaned with disinfectant at the end of each run; (4) distributing surgical masks and preventing price gouging. Initially people started buying up surgical masks leaving not enough for health workers. First the country stopped exporting masks. Then they worked out of system to rotation them, limiting people to two masks per week, in order to ensure that health care workers have enough, when they step up production. People use their NHI card to buy masks so they do not cheat; (5) hospitals have reorganized work to prevent transmission and shut downs. In this situation as much as possible, teams of doctors and nurses stay on a single ward instead of rotating through the whole building. That way, if infection starts spreading on the ward, they can shut one ward down without closing the hospital. Patients with the illness will be moved to medical observation or medial quarantine. The doctors and nurses working on that ward will stay home for two weeks to see if they develop symptoms. Scheduling nursing shifts is a lot of work in ordinary times, so recognizing work according to these criteria is probably more complicated still. Consequently, the number of both inpatients and outpatients have dropped; (7) use of Covid-19 test kits fir check community spread of infection via throat and nose culture to see the symptoms and a travel history, and (8) Taiwan's Central Epidemic Command Center and National Health Insurance system as a model. The question that is Indonesia ready? Another important aspect of Taiwan's success involves using digitized data and high technology to counter hoaxes and disinformation contributing to the outstanding performance of the health professionals and the government in controlling COVID-19 effectively and efficiently in Taiwan. Taiwan's epidemic prevention measures meet public needs, including face mask regulations, mandatory quarantines for all arrivals, and contact tracing, and have been so successful that there was no verified case of local transmission of COVID-19 in the first 176 days after the outbreak of Covid-19. While Vietnam, Thailand, and New Zealand also had long local case-free streaks of 100, 101, and 102 days, respectively, but all three records were broken by new outbreaks (Everington, 2020).

Conclusion

The strategy for preventing or mitigating the impact of the COVID-19 pandemic varies widely among countries. However, Taiwan has a strong public health foundation for combatting COVID-19 through a coordinated response, especially in the areas of initial screenings, effective methods for isolation and quarantine, digital technology to identify potential cases, and universal use of masks. A limitation of this article is that it is based on limited experience from a short period in Taiwan as an international student and observing community behavior of Indonesians from far away.

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