

Journal of Peace, Development and Communication



Volume 05, Issue 04, Dec 2021
pISSN: 2663-7898, eISSN: 2663-7901
Article DOI: <https://doi.org/10.36968/JPDC-V05-I04-05>
Homepage: <https://pdfpk.net/pdf/>
Email: se.jpdc@pdfpk.net

Article:	HEALTH INFORMATION SEEKING BEHAVIOR ABOUT COVID-19 AMONG YOUNG ADULTS IN SURABAYA, INDONESIA
Author(s):	Ratih Pandu Mustikasari Assistant Professor, Dept. of Communication Science, Faculty of Social and Political Sciences, Universitas Pembangunan Nasional Veteran Jawa Timur, Indonesia.
	Heidy Arviani Assistant Professor, Dept. of Communication Science, Faculty of Social and Political Sciences Universitas Pembangunan Nasional Veteran Jawa Timur, Indonesia.
Published:	31 th Dec 2021
Publisher Information:	Journal of Peace, Development and Communication (JPDC)
To Cite this Article:	Mustikasari, P, Ratih., & Arviani, Heidy. (2021). “ Health Information Seeking Behavior about COVID-19 among Young Adults in Surabaya, Indonesia ” <i>Journal of Peace, Development and Communication</i> , vol. 05, no. 04, 2021, pp. 63–75, https://doi.org/10.36968/JPDC-V05-I04-05
Author(s) Note:	Ratih Pandu Mustikasari is serving as Assistant Professor at Dept. of Communication Science, Faculty of Social and Political Sciences, Universitas Pembangunan Nasional Veteran Jawa Timur, Indonesia. Email: ratih.pandu.ilkom@upnjatim.ac.id
	Heidy Arviani is serving as Assistant Professor at Dept. of Communication Science, Faculty of Social and Political Sciences, Universitas Pembangunan Nasional Veteran Jawa Timur, Indonesia. Email: ratih.pandu.ilkom@upnjatim.ac.id

Abstract

Living through the COVID-19 pandemic is a big challenge for everyone. People are trying their best to survive in many ways, including finding the best information to deal with it. Seeking health information is one of the things that people do to prepare themselves better in encountering this situation. This information will enhance their knowledge and help them understand this situation. The diverse health information regarding COVID-19 available in various media certainly provides many choices. People's behavior on accessing health information in media varies from one to another, depending on age, gender, education, income, culture, and marital status. The objective of this study was to determine and map information about health-seeking behavior, especially in COVID-19 cases among young adults in Surabaya. The young adults' characters fit the current situation, where the information circulated quickly in new media. This type of research belongs to the Health Communication scope. The method used was quantitative descriptive and involved 100 young adult respondents. The numbers get from Slovin's formula, with a 5% error rate. The study collected data with questionnaires via Google form. The result showed that respondents accessed COVID-19 information in various ways and themes; they also preferred in-depth information.

Keywords: COVID-19, Health information-seeking behavior, young adults

Introduction

COVID-19 was a threat that we faced along 2020 and might continue for the following year. On March 11, 2020, WHO declared COVID-19 a global pandemic (WHO.int). This pandemic spread fast all over the world. The positive rate increased, and so did the death rate. Every country arranged its best policies to encounter this condition. Some of them succeeded, but many of them failed. Indonesia faced difficulties in flattening the COVID-19 curve and became one of the worst countries with the lowest testing rate up to September 2020 (Soeriaatmadja, 2020).

The response of the Indonesian government at the beginning of the pandemic was considered late and even ignorant (Djalante et al, 2020). The news from January-February 2020 showed that the government was not dealing seriously with the COVID-19 case that had spread in Indonesia. This lack of seriousness was evident through various things shown by not banning direct flights from Wuhan (where the COVID-19 case began) and even preparing to fund influencers to promote tourism (Almuttaqi, 2020). These wrongly targeted policies had worsened the conditions for COVID-19 spread in Indonesia. Java became one of the epicenters of COVID-19 in Indonesia. Some areas with the highest COVID-19 cases included DKI Jakarta, East Java, Central Java, and West Java (2020, September 29).

As one of the regions with the highest rate of Covid-19 cases, East Java had patients with fluctuating numbers from March to October 2020. East Java was even declared as one of the regions with the highest number of COVID-19 cases (Faizal, 2020, September 1). Nowadays, the number of COVID-19 cases gradually decreased. Furthermore, until October 11, the number of victims who died due to COVID-19 reached 3425 (Melani, 2020, October 17). The highest COVID-19 cases in East Java came from Surabaya (Melani, 2020, October 17). People in Surabaya should have had a better understanding and awareness of this condition. Understanding the conditions in the field was one of the keys to being vigilant and determining steps on taking preventive action.

Knowledge about information and facts regarding COVID-19 is essential during these uncertain times. Information that is accessed in proper numbers and from reliable sources would benefit their readers. Health Information Seeking Behavior can be used in three circumstances: health-threatening situations, medical decision-making, and behavioral change and prevention. This research contributes as an evaluation toward the information-seeking process. The main objective of this research is to determine how young adults in Surabaya get information about Covid-19, and this research also tries to map the pattern about how they access information.

Health Information Seeking Behavior (HISB) is one of the health communications concepts that has already been used previously in many kinds of research. HISB is defined as an individual's active action in purposive behavior to seek health information (Lambert & Loiselle, 2007; Zimmerman & Shaw Jr, 20). This definition explains that HISB should be done knowingly rather than accidentally to get health information. This concept also displays how people look for health information due to some conditions. Lambert and Loiselle (2007) detail that HISB can be used in three contexts; (1) coping in health-threatening situations, (2) participation and involvement in medical decision-making, and (3) behavioral change for preventive purposes. A researcher then could align their research with these three concepts as needed.

The first context discussed how HISB is used in coping with health-threatening situations. This context sometimes is used when people encounter severe illness or might be in the middle of a pandemic. As the context mentioned, HISB identifies that the type of information sought related to the conditions faced is done as an attempt to unravel tension and stress levels

(Lambert & Loiselle, 2007). Searching for health information is considered one of the anticipatory steps individuals take to cope with threatening situations. On the other hand, some parties avoid seeking health information to reduce fear in learning chronic and life-threatening health information (Lambert & Loiselle, 2007; Galarce, Ramanadhan, & Viswanth, 2011; Zimmerman & Shaw Jr, 2019). The different attitudes shown by individuals in dealing with this health-threatening situation occur due to socio-demographic differences (Galarce, Ramanadhan, & Viswanth, 2011; Zimmerman & Shaw Jr, 2019).

The second context explains participation and involvement in medical decision-making. People usually think and learn before making a significant decision in their life. HISB is needed to make a big decision about medical decision-making. Lambert & Loiselle (2007, p.1009) states the type and amount of information are required to participate in medical decision-making. The amount of health information from various types and sources can be used as references to consider the decisions taken. During the Covid-19 pandemic, many decisions have to be made by the public when faced with certain health conditions. If most people were not reluctant to go to the hospital before the pandemic, it is very different from the current pandemic condition. Some people think that going to the hospital will worsen their health condition or even make them infected with Covid-19. One of the solutions and trends in this public chaos is Telemedicine.

Competition in the Health Tech industry sector in Indonesia has begun to develop, affecting health information-seeking behavior. In addition to Alodokter (1 million downloads), in Indonesia, there are also similar services, namely Halodoc (more than one million downloads), KlikDokter, Go-Dok, YesDok (Arviani & Febrianita, 2020). After the Covid 19 pandemic has spread throughout Indonesia, this health application has been installed five times more than before. This shows that the pandemic greatly affects the need for health information in Indonesia.

The third context elaborates the change in behavior and for preventive purposes. The health information collected can be used by individuals to make behavioral changes, including preventive action. High or sufficient knowledge about medical information would impact positive behaviors (Zimmerman & Shaw, 2019). The amount of information accessed by individuals could influence individuals' rational and cognitive decisions to take actions that are beneficial to themselves and those who were closest to them. This context is usually used as a guideline for implementing policies related to health and preventive behavior (Lambert & Loiselle, 2007). HISB also explained that the output of health information-seeking patterns can be seen in aspects other than cognitive. Several other factors in individuals will also be influenced by the health information they seek, including behavioral outcomes, physical outcomes, and affective outcomes (Lambert & Loiselle, 2007). Behavioral outcomes are related to a person's ability to take care of themselves, such as complying with health protocols. The physical outcome is related to the individual's desire and ability to improve the quality of life by doing physical activities, for example, sports. The last is an effective outcome which refers to increasing life expectancy, reducing anxiety, and reducing stress levels.

The research released before shows that HISB can be used to map the pattern of health information seeking and find the causal relation between HISB and antecedent or outcome factors. Antecedent factors include demographic, direct experience, salience, and belief (Basnyat, Nekmat, Jiang, & Lin, 2018). The antecedent factors would affect how people seek health information. Situational or contextual factors refer to the environment, sources of information, and the context of information seeking (Lambert & Loiselle, 2007). Demographic, experience, environment, and various sources of information eventually encourage many researchers to make it one of the studied variables.

None of us imagines that the pandemic of COVID-19 will happen and affect every single aspect of our life. The readiness to face this pandemic has tested many people of various ages, including early adulthood. According to Hurlock (1996), young adults are 18-40 years old. An individual experienced adaptation and transition from adolescence to adulthood at this age. New responsibilities and roles also start to be assumed by individuals at this age (Putri, 2019). Individuals at this age are required to understand their new roles and at the same time must be able to escape dependence on their parents. The capabilities of young adults to adapt to the new condition were getting more complex along with COVID-19 which should be tackled. Young adults' profile and their media habits fit well with this study.

The young adults were selected in this research by considering the adaptation process being faced. This research attempted to reveal individuals' health information-seeking patterns in the young adults' category, especially in Surabaya. This information-seeking pattern would give an overview of young adults' attitudes toward facing a crisis caused by the COVID-19 pandemic. A young adult's new responsibilities and roles are now being tested in the pandemic era, thus making life and responsibilities even harder.

The heavy burden faced by young adults in the COVID-19 pandemic can be decreased if there is good knowledge of the situation and conditions. Knowledge related to COVID-19 could be obtained by looking for it through various reliable sources and individuals' preferred sources. The habit of accessing certain media with various search topics was varied among every individual. This media uses activity, if done repeatedly, will become a media habit.

Media habits in young adults are affected by age, gender, class, education, and ethnicity (Ghersetti & Westlund, 2016). Some of these influencing factors lead to the habit of searching for information that is different from one another and very subjective. A study conducted by Antunovic, Parsons, & Cooke (2016) showed that young adults, especially students, used Internet as the primary source of information search, although sometimes they also got information from conventional media, such as television and newspapers. This habit was acquired and formed in their family. Media habits would influence information-seeking patterns and contents obtained from the information. Individuals who liked to access only one type of media would prefer not to compare information between media and would be satisfied with one information from a single medium.

HISB also acknowledges that different media habits would make individuals have different knowledge on health issues, such as COVID-19. Based on the statement of Ghersetti and Westlund (2016), this research only focused on HISB carried out by young adults in Surabaya, assuming that the same age range would form a pattern of HISB that is not much different.

Method

This research was conducted with the quantitative descriptive method. Data on this research was collected through the survey. The questions on the questionnaire were formulated based on the indicators from the HISB concept. From those indicators, 16 questions were created for the questionnaire. The validity results showed one invalid question; thus, that question was eliminated. Ultimately, the total number of questions used in the survey was fifteen. Here is the questioner detail :

Health information-seeking behavior has two dimensions. The first is the information dimension, and it has two indicators, type and amount of information. Type indicator consists of content and the variousness of information seeking, and its breakdown into two questions. The amount of information contained with information detail, number of information, and control of

information is formulated in three questions. The second dimension is the method. The dimension method consists of five sub-indicators. The first is the degree of freedom in accessing information, and then it's represented in one question. Second is the way people seek health information, described in one query. The third sub-indicator is discussion and observation, and it is formulated in three questions. The fourth sub-indicator is seeking information time, it's represented in two questions. The last one is the validation and completeness of information represented in two questions.

There were 100 respondents to this research. This number was obtained through the Slovin formula, with a 5% error rate. The number of 100 was gained from the total population in Surabaya. Statistical data show that the population of early adults in Surabaya is 25,52% of the total population in Surabaya, 2.870.000 people. So the population for this research is 732.424. The respondents were young adults from early adulthood ages who resided in Surabaya. Surabaya was chosen because the number of Covid-19 cases was high at the beginning of the pandemic. The questionnaire was distributed via Google Form. Researchers distributed the questionnaire by utilizing social media and personal connections. Respondents were given a website link to fill out the prepared questionnaire. The incoming data respondent will be used following the main purpose of this research. All data security of respondents in this study is guaranteed.

Data analysis was carried out descriptively according to the initial objective of this research that is mapping health information search patterns. Data analysis was counted using SPSS 21. A descriptive survey attempted to explain the population observed, while an explanative survey attempted to explain the relationship between two or more variables (Walliman, 2011). Since this research only uses descriptive statistics, the result could not be generalized. The survey was the best method for generalizing data from a broad population (Babbie, 2013). Through descriptive depictions, it could be observed later how young adults in Surabaya accessed health information related to COVID-19.

Measurement is done by using a questionnaire. This questionnaire was formulated by decreasing two dimensions in HISB, namely the information dimension and the method dimension (Lambert & Loiselle, 2007). The information dimension is related to the character of the information, generally with the type and amount. Type is related to content and searches diversity. The number is related to how detailed or how many topics are searched, underlining the depth of the information.

The method dimension explained an individual's freedom to collect health information related to the information and sources they were using. Freedom of information seeking was related to the strategies used, both direct and indirect, discussion and exchange of information, the use of third parties, reading, observing, and listening. Individuals use the time based on their pace to access information (Lambert & Loiselle, 2007). They used various sources to validate or complete information from the main source. These two dimensions then derived 15 questions. Each of these questions will be used to map the patterns of information seeking carried out by young adults in Surabaya.

The scale used in this study is the Likert scale. The value that appears on the Likert scale ranges from 1-5 points. Point 1 represents the lowest score with a strongly disagreed statement, point 2 is a statement that disagrees, point 3 is a statement of doubt, point 4 is a statement agreeing, and point 5 is a statement that strongly agrees. The results of the questionnaire will be calculated. The results will be used to map how young people in Surabaya access health information about Covid-19.

Result and Discussion

The discussion of this research was done descriptively without considering the impact or cause-effect relationship. The data presented were socio-demographic characters from the respondents, including education, marital status, age, occupation, and media used in accessing health information. The second presented data was a table consisting of the questionnaire's responses from the respondents. The response table displayed the average response for each question, frequently appeared modes or answers, and the dominant answer for each question.

Table 1: Socio-demographic of Respondent

Education	High School 45%	Bachelor Degree 36%	Master Degree 19%	
Marital Status	Married 85%		Single / Not Married 15%	
Age	17-21 30%	22-26 37%	27-31 24%	32-36 9%
Job	Students 40%	Freelance 20%	Educator 15%	Entrepreneur 25%
Media Used for Seeking Information	Smartphone 100%	Printed Media 23%	Radio 16%	TV 52%

Source: Primary Data

The research result showed that the educational background of the respondents varied from high school to master degree graduates. The dominant age of the participating respondents in this research was 22 years old. Recent education and age were in line with the respondents' occupation, which were some factors that influenced the way and content of health information accessed by individuals (Galarce, Ramanadhan, & Viswanth, 2011; Zimmerman & Shaw Jr, 2019). Socio-demographic factors in HISB can be classified into antecedent variables. As one of the antecedent variables, socio-demographic factors influence health information seeking (Basnyat, Nekmat, Jiang, & Lin, 2018). This is one of the reasons why this research only chose respondents in particular characters in a limited area.

The tables showed that all respondents used a smartphone to seek information. All the respondents of different ages use smartphones as a source of information. It means that all respondents can get information from new media in any form. 52% of young adults in Surabaya also used television as an information source. The result tells us that even though they already have access to new media information, some of them still need other information resources. The third was printed media, and the last was radio. This research result followed the previous research, which stated that most young adults used the internet/smartphone as sources to search for information (Antunovic, Parsons, & Cooke, 2016). Other media that respondents also use could be a habit passed down from the respondents' families. The result of the demographic profile also showed that young adult needs other information resources. This pattern assumed that they might need another information resource to validate their new media information. However, this required further evidence and research. It can be stated that young adults mostly use the internet/smartphone as media for seeking health information, but they also still use other information resource.

Questions about information dimension were on numbers 1-8, and the questions about method dimension were on numbers 9-15. A discussion was divided based on the dimension to explain it comprehensively. Here is the result of the questioner:

Table 2: Result of the Research

Dimension	Question	Mean	Mode	Dominance Answer
Information Dimension	1	3.96	4	Agree / 80%
	2	3.75	4	Agree / 60%
	3	3.88	4	Agree / 77%
	4	3.73	4	Agree / 71%
	5	2.87	3	Neutral / 40%
	6	4.01	4	Agree / 82%
	7	3.13	3	Agree 40% and Neutral 40%
	8	3.8	4	Agree 75%
Method Dimension	9	3.83	4	Agree 79%
	10	4.06	4	Agree 89%
	11	3.79	4	Agree 69%
	12	3.22	4	Agree 43 %
	13	4	4	Agree 86%
	14	2.48	2	Not Agree 51%
	15	3.85	4	Agree 75%

Source: Primary Data

The Information Dimension

The information dimension was divided into two indicators, the type and amount of information. Questions regarding the kind of information were in numbers 1-4. The first question related to whether the respondent searched for health information or not. 80% of the respondents reacted positively with a statement of agreement, 19% stated neutral, and 1% disagreed. The second question related to the respondents' interest in information about COVID-19. 60% of the respondents expressed their interest, 25% said a neutral attitude, and 15% disliked information about Covid-19. The third question was about the diversity of sources used to access COVID-19 information. The result was 77% stated that they accessed information from various sources, 18% were neutral, and 5% disagree. The fourth question discussed the diversity of the COVID-19 theme that was accessed. 71% of respondents agreed that they accessed COVID-19 information on various pieces, 23% were neutral, and 6% stated that they did not access COVID-19 information on various themes.

There were two types of responses in answering questions related to the kind of information about Covid-19. Most respondents exhibited positive attitudes towards seeking COVID-19 information on various themes and sources. Health information-seeking behavior is a form of activity that can be done for coping with stress and facing uncertain situations (Lambert & Loiselle, 2007). Question 5-8 still dealt with the dimension of information, highlighting the amount of information accessed. The fifth question is related to the time allocation used in seeking knowledge. 26% stated that they allocated some time of the day to access COVID-19 information. The neutral attitude in this statement was shown at 40%, while those who disagreed reached 34%. In the sixth question, respondents indicated a positive attitude towards in-depth searches related to

Covid-19. 82% stated that in-depth information could help understand the situation of Covid-19, while 16% said it was neutral, and 2% disagreed.

Furthermore, in this question, seven respondents showed the same positive attitudes and level of the doubt when asked about the convenience of the large amount of COVID-19 information circulating in the media. 40% of the respondents agreed, 40% expressed doubt, and 20% expressed disagreement. On the eighth question, respondents showed a positive attitude regarding transparency to various COVID-19 information. Respondents who agreed to this question were 75%, 19% were neutral, and 6% disagreed.

The diverse attitudes of the respondents on the amount of information accessed indicate the various needs about the amount of health information. Some seek broad information, rather than in-depth information (Clark, 2005; Echlin & Rees, 2002; Leydon et al, 2000; Swajcer et al, 2005; Lambert & Loiselle, 2007). Although the opinion about the number of information accessed was different, most respondents agreed that in-depth information helped to understand the current circumstances. Points about this amount of information yield exciting data. Several questions in this point showed two dominant answers. It showed different understandings and cognitive outcomes regarding the time to access health information and the convenience felt when a lot of information related to COVID-19 circulated in the media.

On the one hand, respondents felt the needs, but on the other hand, there was some discomfort when accessing a large amount of COVID-19 information circulating in the media. These two forms of response will affect the behavior of the next respondent. Much or little information that is accessed will make changes to the cognitive side of the respondent. A high level of curiosity will increase respondents' knowledge, and a low level of interest will make them have little knowledge, especially about COVID-19. The cognitive aspect is the starting point for changing attitudes in the respondents. This change in attitude becomes one of the crucial aspects of a threatening situation.

The two patterns in the search for health information related to COVID-19 show that respondents have different coping strategies when facing threatening situations. Lambert (2007) states that information seeking is a stress monitoring and coping strategy that several people choose. Knowledge will provide the respondent with the provision to take the path of least risk when faced with a critical situation. In this case, individuals play an active role in finding information about COVID-19. Respondents who choose stress coping techniques by avoiding COVID-19 information will usually be more passive in participating in prevention and decision-making.

Questions 9-15 attempted to explore how independent individuals sought health information and chose the sources used. Question nine showed that 79% of the respondents could access COVID-19 information freely, 15% were neutral, and 6% disagreed. Question number ten showed that 89% of the respondents sought information related to COVID-19 from various media, 10% expressed doubt, and 1% expressed disagreement. Question number eleven is about the respondents' openness to discuss COVID-19 information with their closest people. The results showed 69% of the respondents agreed on the question, 28% were neutral, and 3% disagreed. Question 12 asked about respondents' preferences for certain media to access COVID-19 information. 43% agreed to the question, 31% answered neutral, and 26% disagreed. Question 13 dealt with the level of freedom in accessing COVID-19 information. 86% responded they agreed, 13% stated neutral, and 1% disagreed. Question 14 asked about the specific time provided by respondents in accessing COVID-19 information. 51% said they did not allocate particular time to seek COVID-19 information, 32% answered neutral, and 17% agreed. The last question related to

a discussion about COVID-19 information to check the truth. The results showed that 75% agreed to discuss the information obtained, 22% were neutral, and 3% disagreed.

Respondents took several actions in seeking health information, according to their respective preferences (Lambert & Loiselle, 2007). Respondents were fully aware that they had the freedom to access information related to COVID-19. This freedom led the respondents to choose the way to access information. Most of them agreed that they had access to COVID-19 information from various media. The tendency to access multiple sources indicates that respondents want more information or attempt to validate the information from other sources. Despite accessing COVID-19 information from various media, respondents did not explicitly indicate their preferences for specific media. The research results showed that only 43% of the respondents preferred certain media, while the rest were doubtful and disagreed. The number of doubts and disagreements of respondents revealed that most of them did not have specific media preferences to access COVID-19 information.

Galarce, Ramanadhan, & Viswanath (2011) maintain that in the state of emergencies, such as a pandemic, people tend to collect information from the news, official government information, or health institutions immediately through television, radio, or the Internet. Respondents no longer relied on information from medical practitioners directly as primary information in response to unexpected situations encountered. Instead, respondents accessed information from various media and validated it. Respondents also made validation efforts by discussing information with the people closest to them. The discussion with the theme COVID-19 was conducted by 75% of respondents to convince themselves about the correctness of the information that has been accessed.

People in Surabaya's health information-seeking behavior (HISB) is a form of adaptation to threatening situations. Following the first context in HISB, HISB is carried out to reduce fear or as a form of coping stress over the situation at hand (Lambert & Loiselle, 2007; Galarce, Ramanadhan, & Viswanath, 2011; Zimmerman & Shaw Jr, 2019). Respondents in Surabaya admitted that they need in-depth information in dealing with COVID-19, although a small number feel uncomfortable if too much COVID-19 information appears in the media. Knowledge of COVID-19 obtained through information would make it easier for respondents to deal with emergencies encountered by their closest people (Alamiyah et al., 2021).

Knowledge related to COVID-19 could help respondents if they have to make medical decisions regarding swab tests, self-quarantine, or even vaccines when they become available. This condition follows the second context: participation or medical decisions may be involved in HISB (Zimmerman & Shaw, 2019). Knowledge helps in making the best decisions with the lowest risk. The last was related to the context of the three HISB about the correlation of knowledge and positive prevention behavior. The positive attitude shown by respondents in seeking in-depth information may lead respondents to the respondents' awareness of taking precautions by following the health protocols that have been implemented.

Conclusion

Overall, the respondents in this research were young adults in Surabaya searching for health information related to COVID-19. They accessed COVID-19 information on various themes, although they prefer in-depth information. However, the large number of COVID-19 information circulating from various sources did not guarantee that young adults in Surabaya were comfortable in this condition; some groups were fine, and some felt uncomfortable, with almost

the same percentage, with a ratio of about 40:50. Furthermore, some people feel disturbed and even afraid to access COVID-19 information.

The media used in accessing COVID-19 information by respondents (the people of Surabaya) are various and dominated by smartphones with the Internet network service. This data proves that young adults use a smartphone as the main source of information. All respondents accessed the Internet (news portal, social media, website, etc.), but some also used television, printed media, and radio as alternative health information sources. Some did not have preferences for certain media to access COVID-19 information. In addition to accessing COVID-19 information in various media, respondents also discussed COVID-19 information with their closest people to validate the truth.

The existence of two different attitudes in seeking health information about COVID-19 has been discussed in previous researches. Some people looked for as much information as possible to deal with the stress and crisis they were facing, while others avoided and limited access to information related to COVID-19 to reduce their fear. This difference was how individuals chose to deal with situations of crisis and uncertainty. Further research related to HISB can be done by looking at the influence of patterns of seeking health information, especially Covid-19 on factors that are usually influenced (cognitive, behavioral, physical, and affective). This research will certainly provide new insights on HISB research related to the Covid-19 pandemic.

References

- Alamiyah, S. S., Arviani, H., & Achmad, Z. A. (2021). Mothers' Medical-based Experience as the Most Sought-after Online Information by New Mothers During Pandemic COVID-19. *The Journal of Society and Media*, 5(1), 78–98. <https://doi.org/10.26740/jsm.v5n1.p78-98>.
- Almuttaqi, A. I. (2020). Kekacauan Respon terhadap COVID-19 di Indonesia. *The Insights*, 1-7.
- Antunovic, D., & Patrick, P. (2016). 'Checking' and googling: Stages of News Consumption among Young Adults. *Journalism*, 19(5), 1-17. <https://doi.org/10.1177/1464884916663625>
- Arviani, H., & Febrianita, R. (2020). E-Health communication on Instagram: content analysis of alodokter. *Journal of Communication Studies*, 5(1), 1-12. DOI: <http://dx.doi.org/10.20527/mc.v5i1.8019>
- Babbie, E. (2013). *The Practice of Social Research*. Wadsworth: Cengage Learning.
- Basnyat, I., Nekmat, E., Jiang, S., & Lin, J. (2018). Applying the Modified Comprehensive Model of Information Seeking to Online Health Information Seeking in the Context of India. *Journal of Health Communication*, 23(6), 563-572. DOI: 10.1080/10810730.2018.1493058.
- Djalante, R., Lassa, J., Setiamarga, D., Sudjatma, A., Indrawan, M., Haryanto, B., et al. (2020). Review and analysis of current responses to COVID-19 in Indonesia: Period of January to March 2020. *Progress in Disaster Science*, 6, 1-9. <https://doi.org/10.1016/j.pdisas.2020.100091>
- Faizal, A. (1 Sep 2020). Sempat Jadi Provinsi dengan Kasus COVID-19 Tertinggi, Bagaimana Kondisi Jatim Kini?. Retrieved from <https://surabaya.kompas.com/read/2020/09/01/07271771/-sempat-jadi-provinsi-dengan-kasus-covid-19-tertinggi-bagaimana-kondisi-jatim?page=all>
- Fatoni, M. (29 Sep 2020). Peta sebaran kasus baru COVID-19 Selasa 29 September 2020, berikut data rinci 34 provinsi. Retrieved from <https://jogja.tribunnews.com/2020/09/29/peta-sebaran-kasus-baru-covid-19-selasa-29-september-2020-berikut-data-rinci-di-34-provinsi>
- Galarce, E. M., Ramanadhan, S., & Viswanath, K. (2011). Health Information Seeking. In T. L. Thompson, R. Parrott, & J. F. Nussbaum, *The Routledge Handbook of Health Communication* (pp. 167-178). New York: Taylor & Francis.
- Ghersetti, M., & Westlund, O. (2016). Habits and Generational Media Use. *Journalism Studies*, 19(7), 1-20. <https://doi.org/10.1080/1461670X.2016.1254061>.
- Hurlock, E. (1996). *Psikologi Perkembangan : Suatu Kehidupan Sepanjang Rentang Kehidupan*. Jakarta: Erlangga.
- Lambert, S. D., & Loiselle, C. D. (2007). Health Information Seeking Behavior. *Qualitative Health Research*, 17(8), 1006-1019. DOI: 10.1177/1049732307305199.
- Melani, A. (October 17, 2020). Peta sebaran corona COVID-19 Surabaya per 16 Oktober 2020. Retrieved from <https://surabaya.liputan6.com/read/4384773/peta-sebaran-corona-covid-19-surabaya-per-16-oktober-2020>
- Putri, A. F. (2019). Pentingnya Orang Dewasa Awal Menyelesaikan Tugas Perkembangannya. *Indonesian Journal off School Counseling*, 3(2), 35-40. doi: <https://doi.org/10.23916/08430011>.
- Soeriaatmadja, W. (September 3 2020). With world's lowes testing rate, Indonesia is far from the COVID-19 peak. Retrieved from: <https://www.straitstimes.com/asia/se-asia/with-worlds-lowest-testing-rate-indonesia-far-from-covid-19-peak#main-content>
- Walliman, N. (2011). *Research Methods: The Basics*. Routledge.

Zimmerman, M. S., & Shaw Jr, G. (2019). Health information-seeking behavior: a concept analysis. *Health Information and Libraries Journal*, 37(3), 1-19. DOI: 10.1111/hir.12287.