Deddy Mulyana
Devie Rahmawati

Communication Technology and Society

Exploring the Multicultural and Digital World



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Preface

All of the articles in this book have been modified from articles originally published in international journals and national journals. The minor modifications - including formatting, titles, and subtitles – have been made with the aim of enhancing the style and accessibility of the content. Some recent data and new references have been added to a number of the articles in order to fill some gaps in the data and reflect advances in the field. In addition, some pictures that were not included in the original publications have been added for the sake of providing added interest and accessiblility. References to all of the original articles have been included at the end of the book.

In accomplishing this book we owe a debt of gratitude to a great many people too numerous to mention by name. However, there are some figures whose encouragement, support, and assistance have been invaluable and are worthy of note. First of all, we are indebted to several colleagues who read and commented on different articles when they were still in early drafts: Professor Carolyn Calloway-Thomas of Indiana University, the United States; Dr. Arielle Emmett, an international journalist and a former professor from the United States; and Mr. Michael Gill, a media professional from Australia who also once became a visiting scholar in the Faculty of Communication Sciences at Universitas Padjadjaran. We are also grateful to Mr. Thomas Baines of the United Kingdom and Mr. Peter Morse of New Zealand. Both are English language specialists living in Bandung who have proofread different early drafts of the articles in the book. Our gratitude also goes to Ms. Sarah Aisha, S.Psi., MA., a lecturer in our faculty who has edited the book prior to its publication. Last but not least, we would also like to thank Dr. Aqua Dwipayana, a national communication specialist and motivator, and Pak Ventje Suardana, a successful yet humble entrepreneur, who have both been instrumental in the publication of this book.

We hope that this book can enrich the literature of communication studies in Indonesia, and that its insights might prove valuable for foreign academics, scholars, and even laypeople interested in Indonesian society and its culture. We think that this book is particularly imperative for Indonesian academics, postgraduate students, and researchers who want to improve their qualitative research skills, especially in writing papers or journal articles based on fresh data derived from the research field.

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Devie Rahmawati

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Knowledge Sharing Dynamics among the Dota 2 Online Game Players at Internet Cafes

Devie Rahmawati, Deddy Mulyana & Dyah Safitri

Since the emergence of high-speed internet, online games have been growing rapidly. In contrast to internet-based games which are enjoyed alone, online games are able to tie all circles of parents, young people, and children. Reports from the steamspy.com site, said that online game players in Indonesia are estimated to reach nearly 4 million people with 90% active users. This activity then encourages the birth of a virtual community that allows individuals to learn and share knowledge (Chen & Liu, 2012). Rheingold (1993) defines virtual communities as "social aggregations that emerge from the Internet when enough people carry on those public discussions long enough, with sufficient human feeling, to form webs of personal relationships in cyberspace".

Currently, one of the most popular online games is Dota 2 (*Defense of the Ancients*). It allows users to connect, interact, create teams virtually and accommodates many players at a time. This game allows two teams with five fighters each to defend their team arena. With the interaction in the virtual world, the behavior of online game players of Dota 2 becomes interesting to study because of its borderlessness in the space of virtual conversation. Dota 2 has become one of the most popular games in Indonesia (Jap et al., 2013). The phenomenon of online games cannot be separated from the concept of virtual communities, namely, internet users who repeatedly connect and interact with others through information and communication technology. This collection of virtual communities will make individuals build and nurture relationships in the same coveted, shared world of values, and goals.

As members of competitive online game communities, many people enthusiastically join the community to search, retrieve, and gain knowledge to solve problems in the games they face. They can easily interact with each other without limits of space and time and work together to gain information and knowledge in the virtual community. Community members will continue to connect in deeper relationships to gain knowledge and share it with each other. The key to success in interaction is knowledge sharing. Community members not only seek, retrieve, and share knowledge to improve their skills, but they also strengthen their understanding (Alaimi, 2011; Alsharo 2013; Angela 2013).

This study aims to explore the flow of knowledge among 152 players of online game Dota 2 in the cafes of Jakarta, Bogor, Depok, Tangerang, Bekasi (Jabodetabek) Indonesia. Based on observations, this study is limited to Dota 2 game players, which means it can not reflect the life dynamics of different game players.

This study is intended to answer three main questions: what is the motivation behind the virtual Dota 2 community members to share knowledge among fellow players?; how knowledge sharing

patterns are used?; how the process of sharing knowledge is done so that the community can become a skilled and cohesive team in playing online games?

Exploring Knowledge Sharing in Playing Games

Knowledge sharing

King (2008) explains that knowledge sharing is critical for organizations that assume knowledge as an asset to achieve competitive advantage. The focus of knowledge sharing is the individual who explains, encodes, and communicates knowledge to other individuals, communities, or organizations. This sharing behavior can be distinguished into the sharing of explicit knowledge (written or coded) and tacit knowledge (which is in the mind of the individual). Individuals may have different tendencies to share explicit and tacit knowledge. They may consider explicit knowledge, such as reports and memos they have, to be owned by organizations that pay them to produce documents, whereas they may assume that the knowledge they have in their heads is their own, making it difficult to share.

Sharing knowledge in the online world is a communication process between two or more parties involved in the preparation and acquisition of knowledge. Although communication exists in many forms, knowledge sharing can use technology. Sharing knowledge can be a serious challenge for a community as well as an organization. A sense of community refers to a feeling of relationships and togetherness among community members who belong to a collective entity. This concept according to Koh and Kim (2003) shows the perception of homogeneity to other members and the dependence of other members to be acknowledged. The sense of virtual community is defined as the feelings of individual members within the virtual community.

Conditions affecting the sharing process of knowledge include trust (Aliakbar 2013; Chen et al., 2014). Trust is known as a factor

of effectiveness in the practice of sharing knowledge. Trust also underlies knowledge sharing through the mechanisms of mutual trust and influence between members of this community. Trust in others, ability, goodness, and integrity relate to the tendency to give and receive information and to improve performance in a distributed community.

Another condition is kinship (familism) that refers to the individual who knows the other and can help each other through interaction. In a virtual community, individuals become familiar with each other, often participating in interactions with others. Joining the community allows individuals to gain a sense of belonging through the process of interaction and learning values from each other.

Online game Dota 2

Gao (2005) calls online gaming as an internet-based game and is played against other users virtually. In this virtual game, players interact with other players virtually from different places around the world. Usually these players believe that the role they play in the game can attract new players and keep players long enough to keep playing these online games.

Dota 2 is made by Valve Corporation and introduced to the public in July 2013. Dota 2 game involves two communities of five players who each attack the Ancient large buildings that are at the heart of the team's defense. Each player can independently control his character with his own ability. There are 113 characters called heroes with their own designs, advantages and disadvantages. Heroes are divided into two main roles as carry and support. Carry usually starts the game and can later become more powerful at the end of the game and can lead the team to victory. While support has a shortage and high damage but still can help the team to win the game.

Dota 2 constitutes a very popular but very complex online game. It is deemed a laboratory of contestation between humans

and computers (Artificial Intelligence). With millions of users worldwide, Dota 2 has an active competition for professional players through various leagues and tournaments. Greatest competition was made by Valve and with a total prize of millions of US dollars. Each of these big games is usually broadcast on the internet as well as television networks and seen by millions of people. These Online games can easily reach teenagers, adults, men and women in Indonesia who enchant the charm of online games. With over 15 years of age, Dota 2 has adjusted itself to the marketing needs all over the world.

Observing the game players

This research uses an interpretive approach with an ethnographic method, more specifically what Robert LeVine terms *person-centered ethnography, that is, an* antrophological endeavor to develop ways of describing and analyzing human behavior, subjective experiences, and psychological processes which resemble the actual experiences (Hollan, 2001).

Ethnography is an empirical mode of study conducted by observing a phenomenon in a natural setting. It relies on participatory observation in its implementation. Ethnographic research into the qualitative domain requires the primary data from humans involved in research phenomena. Because it concerns humans, researchers become the key to research success. The three authors had slightly different roles in the the research, the first author being the main researcher (conducting interviews most frequently), but all the results being discussed and written by the three authors. Without using any software researchers analyze and interpret the informants' gaming knowledge and experiences and categorize them into a set of themes. This theme analysis emerges from the exploration of the data based on associations, similarities, and differences across sets of data (Gibson & Brown, 2009).

The study was conducted over three years, by actively participating by playing together while conducting in-depth interviews with game players. The study involved 152 players of Dota 2. It was conducted at internet cafes in Jabodetabek Area. Five main cafes similar in size were observed during the study. Consent was gained from the owners of the cafes. The vast majority of the players were male adolescents. More specifically, 15 players were attending elementary schools (SD), 42 players were attending junior high schools (SMP), 47 players were attending senior high schools (SMA), 30 players were attending colleges, and 18 players were employees. Of all the players, there were only two female players. The majority (116) of the research participants were from the middle class; the rest were from the upper class and the lower class. Based on purposive sampling, the selection of the study participants was not representative of the entire online gaming community in Indonesia. In that case, this study does not seek to make any generalization that applies to the Indonesian online gaming community.

The data collection procedure involves observation of individual behaviors and activities in research locations. Besides that researchers conducted face-to-face interviews with research participants based on unstructured and open-ended questions so as to elicit the views and opinions of the participants. Interviews were conducted only after researchers themselves played several times on different days in each cafe and got to know the players. The observation and interview were usually done in the afternoon and in the evening, after school activities. Both research techniques were flexible, partly depending on the mood of the informants. In many cases the observation was conducted first followed by interview. In others, the interviews were conducted followed by observations. On average the visit to the research sites 2 – 3 times a week, each time lasting 2 – 5 hours. Researchers recorded all the information from participants using audio, notes, and video. All the data was trascribed before being analyzed.



Playing online games (Source: beritasatu.com)

Analyzing the Research Field

The drivers of knowledge sharing

Based on the analysis of the data, trust and familiarization are the driving factors of knowledge sharing among Dota 2 players. The results of this study corfirm other research findings (Aliakbar, 2013; Chen et al., 2014) that trust has become a significant factor in the process of sharing gaming knowledge. Concerning trust, the divine factor (which shows the skills of playing Dota 2 games in a higher level) is dominantly discussed. *Dewa* (god) is a game player that is considered the greatest and then used to teach the knowledge of playing Dota 2 like how to design strategy, dodge the enemy, choose heroes to win the game. The way of transferring knowledge from god to copo (or cupu-a title for Dota 2 players whose game-playing skills are still limited) varies. Some teach direct skills by giving advice; some quietly give direction how to play well. Others give tips on winning games through the chat room provided by this game.

"Some are arrogant, want to be loved. There is the supportive type who helps persistently for the team to win. The gods usually want to teach. If there is a snobbish copo, he will be insulted and cursed. There are various gods in Dota 2, the whiz who never show off or is not chatty. There is the god who teaches, there is also the god who speaks harshly and likes to insult. Those are three kinds of gods." (Informant 12)

Many participants mentioned, in addition to learning from players at god level, the flow of knowledge is also obtained directly when players are still copo learning the game strategy from youtube. Youtube.com was chosen because it contained instructions on using visual tools that can be easily implemented when they play.

"I often play Dota 2, I like to read people's blogs. I like brainstorming in forums and I can comment. On Youtube, it also exists. For newbies, there are also tutorials, but sometimes newbies finally know from friends." (Informant 33)

As a team-based game, establishing cohesiveness is not only done during game play. Various efforts are made to build solidity so that the game can take place better because understanding can already be built with a better bond. The trick is to hang out together in the cafe or outside the cafe. In the cafe, this hangout can be interpreted as playing Dota 2 together so they can easily shout to set the strategy to win the fight. Building confidence outside the game is done by hanging out together, eating, walking to where they agreed.

As a driver of knowledge sharing, cooperation becomes one of the key factors to win the game. When a player is selfish the game can be damaged. Sharing knowledge will work well if there is closer cooperation. This situation was described by one of the informants:

"In E-Sport like Dota 2, cooperation is important, selfishness is unreliable. The five-man brain is contrived for one person. To win, cooperation is needed, the two are encouraging each other. You

can make the team to cooperate or not, based on the match played, whether you are the god player or the ordinary player. Even based on the hero that is played close cooperation is also needed." (Informant 13)

Sharing knowledge in the online and offline world

The flow of knowledge also occurs online and offline, usually online when the god category players join into a team with a cupu or newbie. Sometimes the strategy direction of the game is sent through chat, but it depends also on the gods, whether they will help or even insult the cupu players. Clearly, the flow of knowledge will depend heavily on the will of the 'gods'. From the side of the cupu players, the willingness to acquire knowledge is also an important factor, not because the newbie then casually plays and even harms the team. In addition to online, knowledge-sharing environments also appear offline when they can learn from each other the strategies that have been done as to why, for example, lose the fight. Next they will play again and discuss the strategy that will be tried in the next game. As one of the informants explained:

"Started by my friend. Initially I was introduced to first offline games, then I was introduced to the internet cafe. In playing Dota 2, I was taught by seniors who have god-level because he often plays in internet cafe. In 2013, I just really learned Dota 2. When we meet offline, more at the mall, we talk about better strategy of play. The solidity is important." (Informant 56).

Sharing the online world

Barker (2015) said that knowledge consists of two aspects: explicit and implicit. In this study, the online game players in the cafe transmit knowledge that are both explicit and implicit. Explicit knowledge is such as techniques to use the keyboard to get maximum results and to set the steps in the game, transmitted

explicitly through voice and text. Meanwhile, implicit knowledge occurs in various situations.

When players join a team in which not all of its members are from Indonesia, some Indonesian players share knowledge not verbally but in writing to all team members. As an illustration, NM, one of the informants said that in a heated game, other players from the Philippines do a lot of communication that is directing and blaming. In such situations, NM usually will not react. The silent communication done by NM is read well by other Indonesian players within the same team, by choosing not to do the same communication activity. That was what Behnke (2010) called horizontal information exchange. The ability to send and receive messages in this implicit communication is an instance of the high-context communication of Indonesian society.

In the context of the cultural taxonomy of Hall (in An, 2003), Indonesian society belongs to the category of high-context culture society. In high-context society the message conveyed is implied. It takes an understanding of the beliefs, values, social norms and practices that apply to the community to be able to interpret the meaning of communication messages. Messages are often doubly meaningful. Although the team in this game has no previous ties (Chen et al., 2014), low bonds do not become an obstacle in the transmission of knowledge as any other virtual community (Chen et al., 2009). According to NM, after performing silent communication in a situation that is heating up, then the players' fellow Indonesians interpersonally communicate with each other through private conversations in the application (private chat). In this personal chat new players freely set the game strategy.

The same experience and feeling among the Indonesian players has made the players from Indonesia keep a distance from others when they have to be in a team that contains players from other countries, such as when dealing with players from the Philippines. This condition is of course a social dilemma (Chen et al., 2014), considering the cohesiveness of the team

becomes the key to the success of winning the game Dota 2. Completeness of technology infrastructure (Gaines, 2017) such as headsets, chat rooms both general and personal, are unable to open communication between players in a team from different countries. Psychological comfort and cultural closeness are key words of openness and communication comfort between players.

Sharing the offline world

Communities characterized by informal communication spaces are capable of encouraging wider exchange and dissemination of knowledge (Hew, 2006) that did not fully occur in the context of this study. Communication among game players is formed in informal nuances, but in practice, cultural proximity becomes the determinant of informal communication that leads to the knowledge transfer that occurs between the players in the Dota 2 team. This study found that players are not only increasingly dependent on computer technology to be able to connect to each other as suggested by Usoro et al (2007), but the effort to continue communicating outside the online world became one of the determinants of the power of a Dota 2 online game team.

According to some informants, the professional Dota 2 team is homogeneous when the individuals who are members of the team come from the same cultural background with a high degree of closeness. A team of professionals wants to ensure that knowledge exchange proceeds optimally when players understand each other's characters, behavior and attitude among the players. The intensity of meetings outside the online world becomes crucial.

Li (2010) mentions that research on the theme of intercultural knowledge in virtual communities is still relatively low. In this study, researchers found that the Dota 2 virtual gaming community has enabled the transfer of knowledge about the origin culture of each game player. The team's routine or referred to as community

practice by Li and Kuo (2013), consists of players from different corners of the city and even continents, which makes players have new knowledge about the cultural origin of players from different countries. This knowledge is continuously transmitted among the players with each other. Finally comes a unique understanding of each player's culture. This knowledge makes the players develop their own wisdom when it comes to interacting in one game with players from different cultures. Knowledge of culture makes players have a personal and communal control mechanism when dealing with intercultural players. This situation was described by one of the informants:

> "When playing with the Pinoy people, we are already aware of how noisy they are. Although sometimes we get angry when we see them like cursing in the language that is not clear. We laugh at the way they behave." (Informant 88)

In the offline realm, there has never been a stereotype of Filipinos for the Indonesian people in general. The most popular negative stereotype is the Malaysian society, which began in the history of Indonesia's confrontation with Malaysian in 1966 (Reinhardt, 1967). Since the issue of confrontation was echoed by the first President of the Republic of Indonesia, Soekarno, the people of Indonesia have kept feelings of hostility towards Malaysian society. In a soccer game for example, Indonesia's victory would be meaningless if it was not the victory of defeating Malaysia. Uniquely, in the online games, players from Indonesia, almost entirely feel much more comfortable and positive if it should be part of the team with Malaysian players and when dealing with players from Malaysia. The players claim to know and understand the nuances of 'discomfort' when they heard the word "Malaysia" in the offline world. However, the condition is not 'contagious' in online life. This happens because the experience and knowledge in the online world shows different nuances. In addition, there is a comparative community that is the player community of the Philippines, which is considered

much more disturbing than the players from Malaysia. This new cultural knowledge is formed only in the community of Dota 2 online game players. As one informant related:

> "Yeah, we always know that Malaysia is annoying because of the ball, badminton, etc. However, in the game, it is very different. Malaysians are calmer, not talkative. They still use English. Unlike Pinoy, who talked on and use their language." (Informant 9)

In a virtual community the same purpose, reference and passion become the adhesive and the elements that speed up the exchange of knowledge (Hsu, 2015; Wang & Wei, 2011). For three years of research, it was found that there are three main objectives of players incorporated in a virtual gaming community.

The first objective, they want to learn to know a game. Given that playing Dota 2 is in a team, when an individual first plays, then the new player is deliberately looking for friends who can physically interact directly. According to the players, usually when all players first learn to play Dota 2, they deliberately play in the cafe to find a partner in a team that can interact face to face. This situation was described by one of the informants:

> "This is confusing when learning alone. Dota 2 is hard if not taught. So I went to the cafe. There, there must be players as well. I'll approach, see, and keep asking them. If it were so, I'd be quicker to understand it." (Informant 101)

As expressed by Iskoujina and Roberts (2015) the process of disseminating knowledge does not just happen, but through the process of transformation, articulation, interpretation and absorption of knowledge. For new players, linear knowledge in game technology machines is less able to accelerate the absorption of knowledge. Outside of the game, individuals can have controls to determine duration, transfer rhythms and content knowledge of Dota 2 techniques and tactics. Meanwhile, when a new player plunges into a Dota 2 game and is in a team known only in the virtual world, players find it very difficult to catch up with time constraints, fast game rhythms and knowledge

content that is not necessarily according to what you want to know as a beginner player.

The second objective is that they want to feel the warmth when together in the gaming community. If the knowledge transfer process that occurs in every game is done, according to many players, it makes their life becomes more meaningful. The player feels like a new person, with different transfer of knowledge. Jubran and Sumiyana (2015) say that one's desire for knowledge is to want to influence others in a positive way through the sharing of knowledge.

The presence of other players, in the virtual online gaming community, whose activities are knowledge sharing, makes each individual feel a person of dignity and self-esteem. This personal satisfaction encourages players to share knowledge with other fellow players. In addition, always with other players, players feel they have 'life' friends. Sharing knowledge becomes the entrance to awakening a family atmosphere amongst the players. The desire to continue together according to the players' narrative has become the driving force behind the transfer of knowledge among players in a team.

The third objective is that players want to make sure that they will have multiple networks that can support them when they want to have a partner playing in the Dota 2 game team. This situation was described by one informant:

> "I was looking for backup troops. If at any time my gang is not avalaible, I already have a lot of backups, that is, people who are indebted to me because I ever taught them to play games. This is more comfortable to play in a team with people we know." (Informant 127)

Effectiveness and efficiency in a game is one key to victory. To achieve these two conditions, then playing with a friend who is known is the capital of victory. Therefore, the players always try to take the time to spread knowledge to the new players. So they can ensure the availability of human resources to achieve the goal of the game.

The proximity of culture and knowledge-sharing activities

Wei (2009) stated that cultural differences become one of the barriers of the process of knowledge exchange. This study revealed that cultural differences did not become an obstacle to the process of disseminating knowledge. The key to this is mutual respect between players. Language becomes a bridge of communication among cross-cultural players. The willingness and the ability to use language that is understood by everyone such as English enable the players to spread knowledge to strangers who are newly known in cyberspace. The use of the same language (English) makes cross-cultural players quickly build a common vision and bond as a team, even in short meetings. The process of knowledge exchange is not solely due to the same vision as Wang and Wei (2011) said, but cultural sensitivity among players is the driving force for the exchange of game strategy knowledge among cross-cultural players.

According to Topchyan (2013), the internet with its anonymity character makes the inidividuals in the virtual world have equal status with each other. It is able to reduce stereotypical behavior as well as all the negative effects of cultural differences. Through this research, it appears that anonymity with the special identity of gamers, does not really become the mask of the culture of each player's origin. The communication expression they display during the game becomes a new knowledge that culminates in a certain stereotype for each individual and a particular player's cultural community. Technology is not entirely capable of eliminating the negative social impact of interaction among players in the virtual gaming community team. If a new knowledge can provide positive values when the knowledge is shared (Zakaria et al., 2013), then in this study, the transmission of knowledge also affects the formation and dissemination of non-positive values to fellow gamers within the team.

It is understood that social interactions by individuals belonging to virtual communities are driven by consideration of profit or loss (Liao et al., 2013). However, profit or loss is not

a major aspect. Players always play, even though the situation is not ideal. No one condition is considered to be detrimental, which then makes the player stop his desire to play together in a Dota 2 virtual game team.

A player tells other players when they have to deal with strangers and do not feel comfortable, but that does not stop players from playing games. The player is still playing without communicating the slightest with the stranger in the team and just focusing on the existing game. This strategy still succeeds in making a team of players who really do not know each other and enable them to win the game without communication and transfer of knowledge to each other.

In the context of this research the online game players of Dota 2 chose to be able to have a teammate they knew. Proximity built outside the online world makes the knowledge transfer process run more optimally. As one informant put it:

> "It's like this, even though the player can enter the local server, Asia or the world, we can make an appointment with friends to play with. So we are happier if there are friends that we know. We are more confident to play, because we can communicate more smoothly." (Informant 72)

The players in the gaming community said that a strong team is when they already know the personality traits of each other. Characters influence a game strategy. Players with aggressive characters are placed in certain positions. Likewise with individual players who have sensitive characters. The players adjust each other's role in the online game with the personality of each player.

The decision to accept someone in the virtual community is also determined by age. The game players who have entered the category of adolescents and adults (junior high, high school and college) avoid the formation of teams along with young category players who are still sitting in elementary school and labeled as kids. This situation was described by one of the informants:

> "Playing with the boy kids makes me dizzy. They are very unstable. They continue to move the game. They are not committed. And although only one person plays, he is accompanied by people from one village." (Informant 11)

As revealed by Kumi (2013), participation is a vital activity in the online community. This condition encourages the players to have a committed team. In contrast, the presence of players who are not committed to being in an online community and then sharing knowledge becomes an obstacle to the establishment of a complete online community.

What We Can Learn

From the study conducted it can be concluded that: First, the Dota 2 online player community not only live in the online world. Instead, the process of managing and sharing knowledge is done both online and offline. This finding is rather different from what is said by Chen and Kinsuk (2009), that close relationship in the online world is a condition to overcome the barrier of knowledge exchange. This research reveals that the players actually build a close relationship in the offline world. The key to a team's success comes from relationships in the real world. This condition applies to players who play for casual activities and professional activities for a championship. The online world that is in the hands of man (Iskoujina, 2010) does not make players then always be in touch with the online world through mobile phones or gadgets. The players choose to play together in a room like a cafe that allows them to continue to gather and exchange knowledge in real life.

Secondly, the cultural character encourages the process of sharing knowledge dominated by interaction in the offline world. In the context of communal culture, players promote togetherness as a modality of building a team that successfully achieves its goals. Cultural differences are not an obstacle to the process of disseminating knowledge. The key to this is mutual respect

between players. Language becomes a bridge of communication among cross-cultural players.

Third, the aspects of trust and kinship made online and offline have become important factors to share knowledge. To strengthen the trust players did a hangout together either in the cafe or outside the cafe to build the trust. Knowledge sharing will be more natural if it becomes an integral part of team togetherness. Trust can also be built through a number of steps such as those with better Dota 2 mastering skills who share knowledge with copo or cupu through various means such as chatrooms or direct directions and advice. On the side of players who are still copo, knowledge can also be obtained through Youtube or blog of gods players to see a match strategy that can be played. Here is where knowledge sharing can take place. Although not directly, there is flow of knowledge from the better player to the cupu or newbie.

Fourth, the patterns that occur in the sharing of knowledge in general is the better flow to the newbie or copo. The means of knowledge streaming can be done online through the chatroom or directly when they play in a team in the cafe. In addition, other means used is to upload a video to Youtube or write on the blog so that knowledge can be utilized by many players of the game Dota 2.

Fifth, the skills in game play will naturally continue to improve as they continue to practice. In this case, knowledge sharing can be channeled between team members and learned from those who have better skills. This knowledge includes various tricks and how to avoid the enemy, dodging the attack, or rising again after almost destroyed and winning the game. When there is a skill gap, players with better knowledge (gods) will transfer knowledge to newbie players in one team. Knowledge sharing will be smooth when there is a willingness from the knowledge owner (god) to share his knowledge while the recipient of knowledge (copo/ newbie) is also open to receiving his knowledge. They should use good language and do not insult or curse each other.

Sixth, the flow of shared knowledge becomes meaningful when they (god and copo) are in one team. Coherent cooperation between them will make the flow of knowledge also run naturally. They will finally understand the strategy of using heroes to the maximum and dodging the enemy to win the game.

McJournalism in Indonesia's Cyber Media

Muslikhin & Deddy Mulyana

This study aims to reveal the practice of applying the principles of McJournalism by cybermedia in Indonesia. McJournalism is a theory introduced by Bob Franklin based on George Ritzer's McDonaldization theory (Franklin, 2005). McDonaldization is a theory developed by George Ritzer by taking the principles of successful McDonald's fast-food restaurant management in America and has even gone global (Caldwell, 2015).

There are four principles in McDonaldization, namely efficiency, calculability, predictability, and control. Efficiency is the search for the best means or tools to achieve goals. Predictability is anything that can be predicted so that there are no surprises. Calculability is emphasizing something that can be counted, measured, or calculated. In calculability, quantity takes precedence over quality. A product can be replicated elsewhere

around the world. Control is exercised through nonhuman technology rather than human technology. Technology replaces the role of humans in the production process (Ritzer & Stepnisky, 2018).

The concept of McJournalism, which was introduced in 2005 with the object of newspaper studies, has now become relevant for analyzing cyber media in Indonesia. There are some reasons why McJournalism is very relevant as a basis for studying cyber media in this country. First, the number of cyber media in Indonesia has reached more than 43,000 (AMSI, 2019), giving rise to fierce competition for readers and advertisers. To succeed in competition, innovation and strategies are needed in the production and distribution of media products, one of which is by utilizing technology (Orosa et al., 2020).

Second, to win the competition, cyber media forms a network or networks that are members of the media business groups that are generally owned by conglomerates (Tapsell, 2017). The purpose of network formation is for efficiency. The parent network is generally located in Jakarta with members in various areas, like fast-food restaurants such as McDonald's. Some cyber media that have networks in various cities in Indonesia include Tribunnews.com, which has 48 online media (Tribunnews, 2020); Antaranews.com has 33 online media (Antara, 2021).

Third, the cyber media business model in Indonesia is uniform, that is, the content produced can be read by readers without paying or for free. The model of creating content without paying is chosen so that the media gets readers because if they must pay, readers will choose media that provide free content that is widely available on the internet (Silva & Sanseverino, 2020). Cybermedia income with this business model comes from advertising. Advertisers will consider traffic from cyber media to advertise. The higher the traffic, the bigger the chances of getting ads. As a result, cyber media will create content that is of great interest to readers to generate high traffic, using a clickbait strategy (Bazaco et al., 2019; Ramon; Tulloch, 2019).

The demands of generating high traffic to get advertisements, ultimately affect the work process in news gatherings. To pursue immediacy, many cyber media ignore journalistic codes of ethics such as accuracy in the newsgathering process (Diekerhof, 2021). Cybermedia in Indonesia, to prioritize immediacy and exclusive presentation to win the competition, often ignore journalistic principles such as prudence, accuracy, and verification. verified), check, and check (Bangun, 2018). An example of a media case that neglects journalistic principles occurred when on June 3, 2020, 33 cyber media in Indonesia incorrectly reported the Civil Court of Justice (*Pengandilan Tata Usaha Negara/PTUN)* decision regarding internet restrictions in Papua (Press, 2020).

Research on McJournalism has been conducted by some previous researchers. Dean Cummings researched the impact of applying the principles of McDonaldization in the news production process at a broadcasting news corporation in the United States. They make Multimedia Journalists (MMJ) an important part of the future employee structure in newsrooms (Cummings, 2020). Mulyadi researched political news on television in Indonesia, the results of which explained political news was packaged in a tabloid-style, by applying the principles of McJournalism. The impact is that the appearance of news becomes uniform, such as it is full of drama and is given musical illustrations (Mulyadi, 2015). Kshetri examines the forwarding of McJournalism principles in newspaper management in Nepal. The study concluded that newspapers in Nepal, for the sake of efficiency, use more news sources from news agencies than their coverage (Kshetri, 2010). Other researchers stated that the slow journalism model was born in cyber media as a form of resistance to McJournalism. Besides, the development of slow journalism is a sign of the end of the McJournalism era (Andersen, 2020; Carretero & Bargain, 2016; Drok & Hermans, 2015). Meanwhile, Bahiyah Omar, although not explicitly using the term McJournalism, states that remediation practices are carried out in production, consumption, and immediacy in online media in Malaysia (Omar, 2017). Based on

the description above, it appears that there has been no research on the application of McJournalism principles in cyber media, at least in Indonesia. This is what is new in this research, namely the application of the principles of McJournalism in the production and distribution of cyber media news in Indonesia.

The object of this research is Tribunnews.com cyber media. The choice of objects is based on two reasons. First, Tribunnews.com is a cyber media that has the largest network in Indonesia spread across 24 cities with 51 portals or websites (Tribunnews, 2020). Tribunnews.com is the regional press division of the Kompas Gramedia Group or KKG (Kompasgramedia, 2020). Media in the KKG is divided into three groups, namely regional press with the Tribun brand, national media with the kompas brand, and entertainment media that are members of GridNetwork with 54 portals (GridNetwork, 2020). Second, Tribunnews.com is the number one cyber media in Similiarweb ranking (SimilarWeb, 2020).

The question in this research is how does Tribunnews.com apply the principles of McJournalism in its journalistic practice?

Relating Cybermedia to McJournalism

Cybermedia is all forms of media that use the internet and carry out the journalistic activity and meet the requirements of the Press Law and the Press Company Standards set by the Press Council (Press, 2020). This definition provides an understanding that not all forms of media that use the internet as a vehicle are cyber media. There are a requirement for a form of media to fall into the cyber media category, namely carrying out journalistic activities and press company standards. Journalistic activities in the press law are activities of seeking, obtaining, possessing, storing, processing, and conveying information in the form of writing, sound, image, sound, and image, as well as data and graphics as well as in other forms using printed media, electronic

media, and all kinds of channels available. Meanwhile, press companies are Indonesian legal entities that carry out press businesses including print media companies, electronic media, and news agencies, as well as other media companies that specifically organize, broadcast, or distribute information (Press, 2020). Cybermedia has a different character from other media. Foust explains the characters of cyber media are audience control, nonlinearity, storage and retrieval, unlimited space, multimedia capability, and interactivity (Foust, 2017).

Ward describes the characteristics of cyber media as consisting of immediacy, multiple paginations, multimedia, flexible delivery platforms, archiving, the relationship with the reader, interactivity, and linkage (Ward, 2002). Meanwhile, according to John Vivian, as quoted by Rizkiansyah and friends (Rizkiansyah et al., 2020), the characteristics of cyber media are navigability, interconnectivity, site map, and loading time. Spyridou and Veglis by summarizing the thoughts of other experts describe the characteristics of cyber media, namely; a) increase the volume of news and information; b) provide sheer flexibility nonlinear); c) provide the possibility of reciprocal communication and interaction; d) define 'community in terms of common goals and interests; e) question the role of traditional gatekeepers; f) blur the boundaries; g) alter the relationship and the role of the producers and receivers; h) enhance news diversity, immediacy, and analysis (Spyridou & Veglis, 2016).

Competition between cybermedia in Indonesia is very tight, because of the large number of cyber media that reaches more than 43,000 (AMSI, 2019). To be able to win the competition requires a strategy in managing cyber media (Kumalasari, 2018). Cybermedia publishers who cannot adapt to the digital era will go bankrupt (Hendartyo, 2019). One of the strategies used to win the competition is to apply the principles of McJournalism initiated by Bob Franklin (Ruswandi, 2006; Omar, 2017)

There are four principles of McJournalism adopted from McDonaldization, namely efficiency, calculation, predictability,

and control (Franklin et al., 2005). Efficiency in practice in cyber media is to make the news easy to read by readers. This can take the form of making a title that is sensational and arouses the curiosity of the reader or what is known as a clickbait title (Bazaco & García, 2019).

There are eight types of clickbait, namely exaggeration, teasing titles that arouse readers' feelings (inflammatory), titles that always use capital letters, punctuation especially exclamation marks (formatting), titles that contain untrustworthy material, obscene (graphic), written in the title with no relevant news, only implied (bait-and-switch), the title is not clear (ambiguous), and the title of the article is wrong (Biyani et al., 2016). Chakraborty et al (2016) as quoted by Pramesti explained, clickbait titles or headlines have characteristics such as the number of words in the title averaging 10 words; headlines have long clauses; the title is bombastic which is marked with the words "wow", "astaga", "ckck", "yuk"; title using an exclamation point (!) or question (?); titles exploit the reader's curiosity (Pramesti, 2020). Apart from creating a clickbait title, another way to make the news easy to read is to put up photos that attract the attention of readers, the news is short and not in-depth so that it is quickly finished reading.

The application of calculations in the media is done by prioritizing traffic or the number of readers who open the website rather than the quality of its content. This is done because the higher the traffic, the greater the cyber media income from advertising. Besides, cyber media will produce as much news as possible, especially for news materials that are trending or are in high demand by readers. The goal is that when readers search for content via search engines such as Google search, Bing will appear on the first page of the search.

Predictability is reflected in the existence of standardization in cyber media products. The form of standardization in cyber media is that the news is short, one news story is broken into

several pages, the news is uniform, the news title puts forward clickbait (Hadiyat, 2019; Ramon & Tulloch, 2019)

The principle of control in cyber media is carried out by applying communication technology, using social media analysis programs, Google Analytics to control journalists and readers. Through this technology, most of the work of cyber media journalists is taken over. Smartphones with camera facilities, voice recording devices, and internet connections have made journalism work that was previously done by many people, now it is only done by one person. With the existence of smartphones, cyber media journalists must have multitasking and multiskilling skills in their journalistic activities. The implementation of control is also carried out by utilizing media platform algorithms such as Google Trend, SEO, Google Search, CrowdTangle from Facebook, and aggregators in journalistic activities ranging from planning coverage, coverage, news writing to news distribution (Smyrnaios & Rebillard, 2019; Lee & Chyi, 2015).

The discussion of managerial economics in communication media is a study that has intersections with some sciences, namely communication science, management economics, psychology, and semiotics. There are three perspectives or levels in economic studies of communication media management, namely micro, macro, and mezzo. The micro or individual level is analyzing language use. The question at the micro-level is how to use language or conversation efficiently. At the macro or political economy level, it is about analyzing how the media system is optimized to best serve the public interest. Meanwhile, the mezzo level analyzes how the media optimizes the development of production and distribution of media products intending to maximize profits (Rimscha, 2020).

Cybermedia income sources can be grouped into six sources, namely paid articles, sponsored links, paywall, the share of expert opinions, Pay Per Click/PPC (Adsense) networks, and banner ads. Paid articles or also known as advertorials are articles in cyber media sponsored by a product. Sponsored links are links that

appear on articles in which some products provide sponsorship in the publication of the article. A paywall is a subscription system that attracts payments from users or readers. Only subscribers can access or read the content. The PPC (AdSense) network is an advertisement provided by an Adsense management ad agency such as Google and is posted on web pages. Cybermedia owners only provide a place for AdSense managers to advertise. Banner ads are advertisements that are placed directly by advertisers on news sites. These advertisements are usually in the form of banners (Korobka, 2020).

Selecting Informants and News Stories

This research has a subjective approach (Mulyana, 2018; Griffin et al., 2019) with a constructivist paradigm, which intends to interpret how cyber media in Indonesia applies the principles of McJournalism, namely efficiency, control, predictability, and calculability. The object of this research is Tribunnews.com, a cyber media that has 51 news website networks spread across 24 cities in Indonesia. Tribunnews.com is a cyber media under the KG Media media group, one of the largest media groups in Indonesia (Tapsell, 2017; kompasgramedia, 2020). The descriptive qualitative method is used in this research because it will examine in-depth and holistically the implementation of Mcjournalism at Tribunnews.com (Bungin, 2015; Tracy, 2020). Data were collected by semi-structured interviews with 10 informants ranging from editor-in-chief to reporters as shown in table 1. Interviews were conducted face-to-face and recorded.

Table 1: Research Informants

NO	Name	Information
1	DD	Editor in Chief
2.	YS	General Manager Content
3.	VS	General Manager - Operation
4.	YT	Deputi General Manajer Content

5.	SA	Content Manager
6.	DA	Editor
7	PR	Uploader
8	IH	Reporter
9	CA	Reporter
10.	EK	Reporter

The population of this research is news that is distributed to the Tribunnews.com FB account during December 2020 – 2021. The sampling technique is carried out purposively, namely, news that is shared every Wednesday, the best time to share content to FB (Ferreira, 2021), and those which get comments from 10 readers. Referring to these criteria, the number of news stories used as data is 187 with details as shown in table 2.

Table 2. Number of news stories analyzed by title

Number	Week	Number of News Stories
1	December 2020, Wednesday Week 1	21
2	December 2020, Wednesday Week 2	17
3	December 2020, Wednesday Week 3	22
4	December 2020, Wednesday Week 4	25
5	December 2020, Wednesday Week 5	19
6	January 2021, Wednesday Week 1	23
7	January 2021, Wednesday Week 2	28
8	January 2021, Wednesday Week 3	20
9	January 2021, Wednesday Week 4	22
Sum		187

The data analysis process follows the steps developed by Creswell: First, processing, and preparing data from interviews with informants and 187 news stories that were distributed to the Tribunnews.com FB account. Second, reading the data to find common themes about the implementation of McJornalism's principles. Third, coding and organizing data from interviews and news collected to fit the research problem. Fourth, coding applied

to describe the implementation of McJournalism principles at Tribunnews.com. Fifth, showing how McJournalism's principles will be presented in the report. Sixth, interpreting the data on the implementation of McJournalism principles in Tribunnews.com presented in the report (Creswell & Creswell, 2018).

Analyzing Tribunnews.com

Efficiency takes many forms.

The implementation of the principle of efficiency so that the news on Tribunnews.com is easy to read by the audience takes various forms.

First, the headline leads to clickbait. In the view of the administrator of Tribunnews.com, making clickbait headlines is not a problem, because every journalist hopes that the news they write will be read by the audience. According to informant DD, all cyber media in Indonesia applies clickbait to news titles. The goal is to bring in visitors, who are the main targets of cyber media corporations.

> "No journalist writes articles and is given a title in the hope that no one will read it. Clickbait is it is. It would be wrong for you to write this title; it does not have any contents. In cyber media, the target is like that." (Informant DD).

For Tribunnews.com, visitors are very important because they are related to traffic. The more visitors, the higher the traffic. As a cyber media whose main income is from advertising, clickbait titles are used to increase traffic so that more advertisers will enter (Bazaco et al., 2019; Ramon & Tulloch, 2019; Koroba, 2020). Clickbait is used for the benefit of bringing in visitors. Because all cyber media are chasing visitors. Tribunnews.com uses seven forms of clickbait in its news titles with details of exaggeration 45 titles, teasing 10 titles, inflammatory 50 titles, formatting 70 titles, graphic 5 titles, bait-and-switch 5 titles, and ambiguity 2 titles.

The clickbait wrong form was not used because it was against journalistic norms, namely reporting the truth, facts, as stated by informant DD. This is in line with the journalistic element, namely serving the truth (Kovach & Rosenstiel, 2017).


Kasus Video Syur

Begini Tampilan Michael Yukinobu Saat Penuhi Panggilan Polisi sebagai Tersangka Video Syur

Michael Yukinobu de Fretes alias MYD atau Nobu mendatangi Polda Metro Jaya ditemani oleh pengacaranya yang menggunakan baju putih.

Seleb 50 menit lalu

Figure 1: Example of an inflammatory title.

Published on Tribunnews.com, January 4, 2021, uploaded at 11:00 WIB.

The title in figure 1 is categorized as clickbait inflammatory because it arouses the readers' feelings to know how Michael Yukinobu, a suspect in a pornography case, looks when he fulfills the call of the Polda Metro Jaya for examination.


Home Seleb Gosipi

Kebohongannya Terbongkar, Barbie Kumalasari Disemprot Evelyn Hingga Ribut, Iis Dahlia Turun Tangan

Sabtu, 21 November 2020 22:04 WIB

Figure 2: Examples of titles that are exaggerated or exaggeration.

Published by Tribunnews.com on December 21, 2020, at 22:04.

The title in figure 2 is considered an exaggeration or excessive because the content does not match the title. The content of the news is about a gimmick in the form of a debate among gossip

performers on television. The debate is then broken up by the host. Readers only know that the uproar between Barbie Kumlasari and Evelyn happened on a television show after reading all the news.

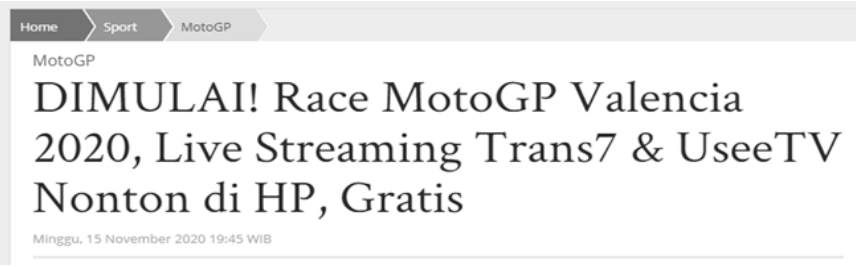


Figure 3: Example of a formatting title, using capital letters and an exclamation mark.

Published by Tribunnews.com on November 15, 2020, at 19:45 WIB.

The title in figure 3 includes formatting, using capital letters and exclamation marks. An exclamation point in the Big Indonesian Dictionary (KBBI) Online is used after expressions and statements in the form of exclamations or orders (KBBI, 2016). The exclamation mark after the word starts gives an exclamation that the MotoGP MotoGP race in Valencia has started and that you can immediately watch the live stream

Second, making bombastic, provocative, and long titles. Titles on Tribunnews.com are long, with a word count between 10 -12 words. By reading the title, Tribunnews.com readers already know the contents, because the title is a summary of the news content. The headline is also a news headline. The considerations were expressed by informants one and four, to attract readers. Besides, Tribunnews.com news content is also distributed through Facebook social media.

> "Now, here comes the problem, that an interesting title often has a provocative connotation. In my opinion, so, the point is orderly and disorderly. If you want the titles to be orderly, that's easy. Just flat.

Tribune is not like that. Tribune journalists were not trained to do this. They were educated to find interesting things from an event. So, maybe if I can understand that people have been consuming mainstream mass media for decades." (Informant DD).

"But if for example, we look at the Facebook platform Tribunnews, most of the titles are important which are long and have interesting descriptions. It is like a call to action. For example, the description, wow ... this is the most popular place ... So, it attracts users to click." (Informant YT)

Third, putting up interesting photos. All news on Tribunnews.com is given a photo to illustrate or describe the news. Photos are placed after the headline. Large size, one-third of the news page. Based on research conducted by the Tribunnews.com information and technology (IT) team, as disclosed by informant four, the placement of photos in every news story is preferred by readers who are mostly millennial generation and generation Z. The results of the Tribunnews.com IT team research are in line with Stillman's opinion which states that millennial and Z generations prefer images (Stillman & Stillman, 2017).

Fourth, one paragraph on Tribunnews.com contains one sentence. Besides, the distance between the paragraphs is tenuous or not tight. According to informant two, this method was carried out, because based on experience and research, 95% of readers use cell phones to read the news on cyber media. If a paragraph contains many sentences, it will be difficult to read them.

"It has been researched. We have proven it, and it is true. If that person wants to read, the sentences are pile up, one sentence according to the rules of the Indonesian language. One paragraph consists of several sentences, it is difficult to read on mobile phones." (Informant VS).

The opinion of the two informants is in line with a survey conducted by UC Browser, a mobile internet software service provider in 2016. In the survey, 95% of Indonesians read the news on cyber media using cell phones (Kure, 2016).

Fifth, distribution of news through social media in which the number of users in Indonesia according to the We Are Social Hootsuite survey which was released in January 2019 reached 150 million people (Fachrizal, 2020). Tribunnews.com uses all popular social media accounts in Indonesia such as Facebook, Instagram, Twitter, YouTube, Line to distribute its news. This method is done because there has been a change in readers accessing news on cyber media. Readers no longer make news portals their main source of news. A survey conducted by DS Research in 2017, on the behavior of the Indonesian internet community in consuming news from the internet, shows that Facebook is used by 70.85% of internet people in Indonesia to find new news. Next is LINE Today's aggregator as much as 50.64% (DailySocialID, 2017). DS Research's research is in line with research conducted by the Indonesian Research Institute or LIPI which states that 60.6% of generation Z access news related to politics through social media (Setyowati, 2018).

Sixth, creating a network for content distribution. The news produced by Tribunnews.com is not only published on one website but also the member portal of the TribunNetwork. At the end of the news, a statement is written that it has been published on the network member portal.

Calculation: Production of news to generate traffic.

The application of calculation principles in cyber media is carried out in two ways, namely producing as much news as possible and pursuing the highest traffic. For cyber media such as Tribunnews.com, the quantity of news produced takes precedence over the depth and completeness of the information. In one day, Tribunnews.com produces 700 to 1000 published stories. Producing a large amount of news can be done by breaking an event into various angles, so that a lot of news can be generated from an event.

Apart from breaking the angle, updates on an event that is being of concern to readers are always provided, even though such updates are not many. This situation has consequences that will reduce the quality of the news produced, especially in terms of the completeness and depth of the information displayed (Ambardi, 2017).

The goal is to increase the number of news published so that the opportunity to enter the first page of search engines such as Google Search or Bing is greater so that it will have an impact on traffic and the number of visitors to the Tribunnews.com website. In addition to increasing news production, news writing must also pay attention to search engine algorithms such as keywords that are widely searched for in news headlines and bodies. This step was taken because the behavior of readers in accessing news was mostly through search engines such as Google Search and Bing rather than directly entering news portals. In a survey conducted by the Reuters Institute in 2020, 72% of readers access cyber media news through "side doors" such as search engines, social media, aggregators, and email. The percentage of accessing cyber media news through search engines is 25% (Newman et al., 2020).

The Reuters Institute's research is also reflected in the profile of readers of Tribunnews.com. SimilarWeb data from June - December 2020 revealed that 83.79% of readers accessed Tribunnews.com via search engines, the remaining 10.34% accessed directly through the website, and 4.50% via official Tribunnews.com social media accounts (SimilarWeb, 2021).

Chasing traffic is the main goal of Tribunnews.com in making news. This step was taken because Tribunnews.com's main source of income was advertising. Advertisers on cyber media make traffic the main reference in choosing cyber media that will be used as a place to advertise (Wendratama, 2017). There are some ways to catch up with traffic in making news. First, making a headline that is interesting and leads to clickbait. Second, publishing more stories that readers are looking for. According to informant five,

to find out what information readers are looking for, information that is currently a trending topic, editors are always monitoring Google Trend, and which are trending topics on Twitter (Pramesti, 2020).

> "While the news is being sought after, we use Google Trend. What is trending on Twitter, not just Twitter trending? What's trending on YouTube, just open what's trending on YouTube." (Informant SA).

Third, as disclosed by informant six, editors also take advantage of viral information on social media to be written into news, after going through the confirmation process.

> "When we write the news, we take it from some of the news stories that are viral on social media, the highest on Google Analytics. But there are also those of us who write based on planning. Some translate interesting foreign news. But we use more items that are viral on social media or are high on Google Analytics." (Informant DA).

Fourth, reporting unique things that have high human-interest value. This unique news source comes from social media, and search results from the editorial team in the field. In the era of social media, unique news and human interest have high shareability. Human interest and shareability are news values that are considered by editors in producing news. Shareability is the ability of news to be shared by readers via social media (Harcup & O.Neill, 2016).

> "Our reporters cover the field, the SOP is looking for something unique, that is interesting. Our journalists are asked to look for something unique. We provide it with the knowledge or ways to find unique things." (Informant YS).

Predictability: Uniform website appearance and format

The application of the principle of predictability in Tribunnews.com is reflected in the emphasis on the standardization of 51 websites of Tribunnews.com network members spread across 24 cities in Indonesia. There are some forms of standardization

carried out by Tribunnews.com. First, the naming of websites that belong to members of the network is uniform. Apart from naming the typology, the letters and colors used for the website name design are the same. The only difference lies in the location where the cyber media is published. For example, those published in Bandung, West Java, are named TribunJabar. Meanwhile, those published in Semarang are named TribunJateng as shown in figure 4.

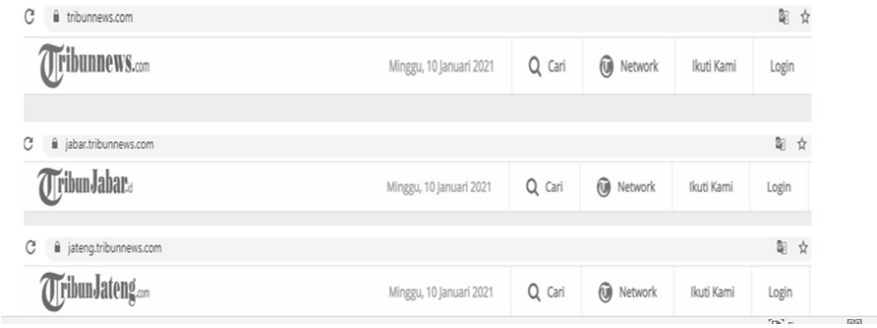


Figure 4. Uniform naming and typology of Tribunnews.com network members' websites.

Second, the appearance of the homepage of the website is uniform on the 51 members of the Tribunnwes.com network as shown in figure 5. After the name of the website are the channels available on the website. Then there is a photo of the latest event or news placed in the middle of the website page. Apart from the home page, the appearance of the news page is also the same, namely, the headline is an average length of 10 to 13 words. Each news page is equipped with a photo with the size of one-third of the news page placed under the news headline that leads to clickbait with the same typology.

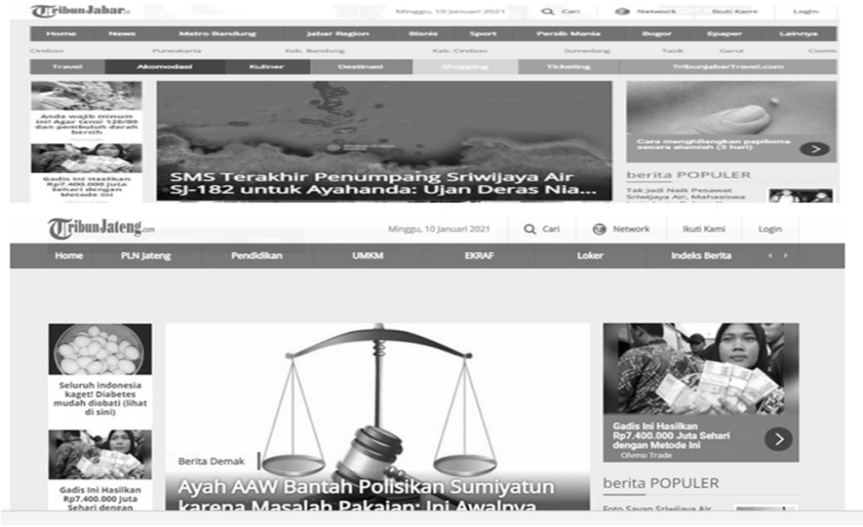


Figure 5: Uniform homepage, typology of Tribunnews.com network members

Third, the news writing format is uniform, one paragraph only has one sentence. The distance between paragraphs is tenuous. One news item is displayed on several pages of the website, so if readers want to know the entire news content, they must click the "next page" sign or page number at the end of the unfinished news as shown in figure 6.



Figure 6. Uniform news writing format

What Tribunnews.com and its network members do is a form of formal rationality of predictability, which is characterized by uniformity. In predictability, there are no surprises, everything appears in the same form. There is no difference between Tribunnews.com published in Jakarta and 51 websites of network members located in 24 cities throughout Indonesia, all the same from the appearance. The impact felt by readers is that there is no variation and diversity in the appearance and content of the website, resulting in demystification and dehumanization of the experience in reading news portals (Ritzer & Stepnisky, 2018). The Tribunnews.com management, as explained by the informant two, such a model was carried out for efficiency. To reduce the boredom of readers, each Tribune Network member portal has regional-specific content, for its readers.

Controls: Multitasking, Search Engines, and Social Media

The application of the control dimension to journalists and readers at Tribunnews.com is carried out by utilizing smartphones, search engines, and social media analysis programs. The use of smartphones in journalistic work processes, starting from taking pictures, recording voice, writing, and accessing internet networks, makes journalistic work now only done by one person, rather than by two or more people. Journalists at Tribunnews.com must have multitasking abilities; they must be able to write news, take videos and photos, and send them directly from the field to the newsroom via smartphone.

> "The field reporter, now a multi-talent. You must be able to type fast, take photos and videos... After they get the news, they go to the office. They make it at the office. Then we change it to real-time. Get the news directly written and sent." (Informant YS).

In the era of media convergence and the development of educational technology, journalists are expected to have the ability to do many things or multitask and have a lot of skills or multiskilling. Journalists who are referred to by media companies

become super journalists so that their journalistic work processes become more efficient. To become super journalists, journalists must master communication technology (Spyridou & Veglis, 2016).

In addition to mastery of communication technology, journalists must also master the workings of search engines such as Google Search and Bing, and master various social media analysis programs and Google Analytics to support journalistic work processes (Bossio, 2017). Journalists at Tribunnews.com must understand how to write news so that they enter the first page of search engines when readers search for information. Because if the news from Tribunnews.com is on the first page, the opportunity to be read is very large, so it will bring traffic.

Mastery of social media analysis programs and Google Analytics are used to guide journalists in their journalistic work processes starting from searching, writing, and distributing news. In searching for news, Tribunnews.com journalists must understand what information readers are looking for, what issues are trending topics or trends. Tribunnews.com journalists must provide the information needed by these readers so that the number of website visitors continues to increase.

Providing the information needed by readers, as done by the journalists of Tribunnews.com, is a communication phenomenon that occurs in cyber media whose purpose is not only for reader satisfaction, but also to pursue traffic. The communication phenomenon itself can be understood using a communication model, which according to Soreno and Mortensen is an ideal description of what is needed for communication to occur (Mulyana, 2019). The communication model that occurs between Tribunnews.com journalists and readers is the uses and gratification model. In this model, readers will actively seek the required information provided by the media to get satisfaction (West & Turner, 2019). For the satisfaction of readers, Tribunnews.com must provide various kinds and a lot of information. The

goal is, when the audience is looking for the information needed, they will get it on Tribunnews.com.

Control through social media is also carried out for the distribution of news produced by Tribunnews.com. This method is done because social media has become a channel for readers to access news sourced from cyber media (Newman et al., 2020). For this reason, journalists must understand the behavior of social media users when distributing news to social media so that the results are satisfactory (Bossio, 2017). Such knowledge includes when readers use social media a lot, or social media prime time, where each social media platform is different. IG prime time is 11 am to 1 pm (11 am to 1 pm) and 7 - 9 pm. Meanwhile, the prime time for FB is at 1 and 4 in the afternoon (Ferreira, 2020).

> "There is prime time on Instagram. 7 am to 10 am. Every hour, everyone must share two Instagram stories and one uploaded video. During prime time, it should be more specific to posting. Apart from 7 to 10 am, prime time in IG is four in the afternoon to seven in the evening." (Informant CA).

From the data on the social blade, from 27 December 2020 to 12 January 2021, for example, an average of 24 Tribunnews.com news was shared with the IG @Tribunnews account which is the official account of Tribunnews.com (SocialBlade, 2020). Besides on IG, news from Tribunnews.com was also shared on Facebook and Twitter. The profile of Tribunnews.com readers who access news from FB is 32.94%, Twitter is 19.14%, and Instagram is 1.50% (SimilarWeb, 2021).

Concluding Remarks

`This research concludes that Tribunnews.com has applied the four principles of McJournalism in its management of news. The application of the efficiency principle is carried out in the following forms. First, the headline leads to clickbait. Tribunnews.com uses seven forms of clickbait in its news headlines, namely

exaggeration, teasing, inflammatory, formatting, graphic, bait-and-switch, and ambiguity. The clickbait form that is not used is the wrong one. Second, make a bombastic, provocative, and long headline. Third, put interesting photos in each news. Fourth, one paragraph on Tribunnews.com contains one sentence and the distance between the paragraphs is tenuous or not tight. Fifth, the distribution of news through social media. Sixth, forming a network or network as a means of distributing content.

The principle of calculation is carried out by producing as much news as possible. In one day 700 to a thousand articles were produced. Also, news that is produced is the one that is currently viral or that which is being sought after by many readers. Tribunnews.com also reproduces news stories that have high human interest value and can be shared on social media.

The predictability principle is applied by naming and displaying websites that belong to members of a uniform network with the same design. The only difference lies in the location where the cyber media is published. Also, the format of writing is uniform on all network member websites.

The principle of control is applied by utilizing communication technologies such as smartphones, search engines, and social media analytics programs in the process of journalistic work when producing news. By utilizing this communication technology, journalists at Tribunnews.com are required to become super journalists who can do many tasks and have many abilities.

The Contestation of Cultural Claims in Online Media between Malaysia and Indonesia

Albert Yaputra & Deddy Mulyana

Throughout their history, Indonesia and Malaysia have gone through countless political or cultural ups and downs in their relationships. Under the sovereignty of Sriwijaya, Majapahit, and Malaka, Indonesia and Malaysia were united under one political leadership and achieved greatness in economics. Conflicts between Indonesia and Malaysia have been caused by the construction of Indonesian culture in Malaysia. These performances, by mass and social media, have been dubbed as cultural heritage claims by Malaysia. Moreover, in the past, Indonesia and Malaysia have been involved in a number of conflicts regarding territorial borders, for example the shifting of border monument several meters from its original position in Temajuk Village, Tanjung Datu, Paloh, Sambas, West Kalimantan Province. As a territorial border marker of Indonesian Republic, a

43-meter lighthouse is now erected in that location in protected forest of Mt. Datu hillside.

Cultural claim conflicts between Indonesia and Malaysia have been well-documented in various mass media coverages both in Malaysia and Indonesia. Media in both countries apparently have different idealisms in their ways of communicating news. These differences are reflected in the news provided by Indonesian mass media. One of the largest mass media group in Indonesia, Kompas, via Kompas.com, delivers the news with somewhat mild headline, "Pengakuan Malaysia Atas Tor-tor Tak Usah Dipermasalahkan", published on Kompas.com - 19/06/2012, 16:41 WIB. While mass media in Malaysia, Malaysiakini.com, uses "Octoberfest 'halal', tapi reog pula haram" as the headline published on 9 October 2017, 1:49 pm.

News published in Indonesian and Malaysian media are nothing but an indication that cultural conflicts occurring between Indonesia and Malaysia have become the main highlight of mass media in both countries. Instead of becoming the harbinger of peace and communion, mass media are one of the culprits for heightening the conflict. This is caused by the news in the media that clearly defend their respective countries.

Surprisingly, the mass media as the accused party have the same view as other informants that fundamentally there is no such thing as cultural claims and they exist only to serve mass media interests to find exciting news to publish. In other words, something cannot be considered as news if it is not interesting. However, if the news regarding the conflict pop up in social media, that is an entirely different matter, as Medo, the representative of Indonesian mass media stated: "Social media have different contexts. Everybody can express their opinions without clarification. In other words, they express conjectures."

Those opinions illustrate that either conventional or Internet-based mass media presents news writers' construction of reality. The reality presented by media is not always the proper and

precise depiction of actual events, because, as mentioned above, they have their interests, be it their own interests or interests that are influenced by the policies of their respective countries of origin. Claims over Indonesian culture alleged to Malaysia are one of the forms of media construction of reality for the performances of Indonesian culture in Malaysia by Malaysians of Indonesian descent or Indonesian people that have settled for quite a while in Malaysia. Reality constructions presented by conventional and convergence media generate responses from both sides, particularly from some of Indonesian people who have expressed displeasure regarding the performance.

This study is based on the Peter L. Berger and Thomas Luckmann's social construction theory (1966) and Fredrik Barth's theory of ethnic boundaries or situational ethnicity (1969). Those two theories are deemed complementing each other. Social reality, according to Berger and Luckmann (1966) is a dialectic process happening in simultaneous processes: (1) externalization (self-adjustment) with sociocultural sphere as a human product; (2) objectification, which is a social interaction happening in intersubjective sphere which is institutionalized or undergoing institutionalization; (3) internalization, which is a process where individuals identify themselves with social institution or organization in which they are a member.

Berger and Luckmann believe that basically a culture or a set of norms, values or rules constitute a social construction cultivated in a human mind, but lacks human freedom and without a special claim of objectivity, as is indicated by the intercultural conflict between Indonesia and Malaysia about what is meant by "Indonesian culture." This social construction also applies to any mass media (whether printed or electronic) and even the online media without exception.

In delineating the contested claim of a culture between Indonesia and Malaysia, some scholars argue that ethnic identity is fluid. Thus Barth (1969) contends, for instance,

> "the cultural features that signal the boundary may change, and the cultural characteristics of the members may likewise be transformed, indeed even the organisational form of the group may change---yet the fact of continuing dichotomization between members and outsiders allows us to specify the nature of continuity, and investigate the changing cultural form and content."

Barth (1988) argues that markers exist which function to distinguish one's own ethnic group from others, in spite of interaction and contact among groups. These markers do not necessarily have to be unique, such as cuisine or language, but they have to be seen as having originated from their cultural heritage, whatever cultural element the marker may take. It is in this context, mass media, as explained by McQuail (2012), with the spirit of 21st century, not only function to distribute information and ideology, but also position itself as a medium that sheds light to people, a supporter of and bridge for formal education, a public library and a place from which education about information and popular education are obtained. In today's world the mass media as meant by McQuail also incorporates the online media. In the context of this research, this education also pertains to cultural education in a broad sense. Neuman (2003) said, the expectation on today's media is greater than ever especially in the prevailing Internet-based information technology that enables everyone to have access to information. Media convergence happening in today's information technology era erodes the line between public and media institution, as well as the dispersive individual networks. With this technology, everyone can be a source of information and express public opinions.

Investigating the Online News Reports

Methodology is a perspective and principles of thinking about symptoms researched, approaches used, scientific methods taken, including data collection, analysis, and conclusion. Bogdan

and Taylor (1988) briefly explain methodology as *the process, principles, and procedures by which we approach problems and seek answer*. In this research, the researchers employed a qualitative method with a case study approach. This method is the most appropriate method to explain the problem in Cross-cultural Communication between Indonesia – Malaysia because as explained by Geertz (1973), this description about complex processes and their significance must be given in a context. This ability to provide rich portrait in this way is the main benefit of a case study approach. The readers should feel that they are involved in the research, see what the researchers have seen, and conclude what the researchers have concluded (Daymon & Holloway, 2002).

Qualitative research requires naturalistic data. Researchers go to the real word to understand people's subjective experiences. For the whole analysis of the data. In other words, as Mulyana (2018) contends, qualitative research methodology does not rely on mathematical logics; rather, it relies on the actual utterances, gestures and other social actions. In the context of this research, a case study method enables the researchers to describe the cultural disputes between Indonesia and Malaysia. Raco (2010) contends that a case study can help researchers to conduct profound study on individuals, groups, programs, organizations, cultures, religions, regions or even countries. A special understanding of past cases will help individuals, societies and communities to understand and resolve present and future problems at hand. According to Mulyana (2018), a case study is preferred to investigate contemporary phenomena without manipulating the phenomena.

Yin (2014) provides more technical limitations emphasizing on characteristics of a case study. He argues that generally, a case study is best used if the main question is related with how and why, when the researcher has little to nothing control over the events in question, and when the research focuses on

contemporary events (today's events) in a real world context. According to Yin (2014), a case study adds a unique value to our knowledge related to individuals, organizations, social, and politics. From those limitations, it is understood that the limitations of a case study include: (1) its research targets could be humans, events, backgrounds, and documents; (2) the targets have been thoroughly examined as a totality based on their relevant backgrounds or contexts with intention to understand any relation between the variables.

Thereby, through a case study this research aims to understand the construction of conflict in Malaysian and Indonesian mass media reporting on Indonesian cultural claim disputes with Malaysia. Interviews were conducted with 16 informants, 10 from Indonesia and six from Malaysia that represent government, academia, media and society. This study was conducted from January 2017 to August 2018.

Indonesian Culture vs Malaysian Culture

News related to Indonesian cultural claims by Malaysia can be traced to the year 2007 up to 2018. News.detik.com has the most publications in this regard. For example, using "Rasa Sayange" as the keyword in Google search results in 83,600 links, while "Reog Ponorogo" comes up with even higher numbers, with 150,000. Using "budaya Indonesia yang diklaim Malaysia" as the keyword results in 147,000 links. The writing media greatly varied, from Internet-based mass media, blogs to scientific ones, such as theses and scientific journals. However, "budaya Indonesia yang diklaim Malaysia" keyword only shows 9,300 links when filtered by news category, and they are mixed with other news that has the word "Malaysia" in its headline.

Publications on Indonesian cultural claims by Malaysia have existed since 2009. However, according to one of the articles

published by Kompas.com, news on Indonesian cultural claims by Malaysia has been published for five years, since 2007. That publication included statements from Vice Minister of Education and Culture, Department of Culture, Windu Nuryanti, who said: "From 2007 to 2012, Malaysia has claimed at least seven times of Indonesian culture as their own. "We have long history of claim disputes, seven times according to my record." Windu said in Kemdikbud building, Jakarta, Tuesday (19/6/2012). According to Windu, it started in November 2007 when they claimed Reog Ponorogo. In December 2008, Malaysia claimed "Rasa Sayange" as their own, followed by *batik* which they claimed in January 2009. "They also claim *Tari Pendet* from Bali and *angklung*, a musical instrument." That news is written by Indra Akunto, a Kompas.com journalist. That publication clearly stated that Indonesian government believe that there have been several claims over Indonesian culture by Malaysia.

On 23 August 2009, three years prior to the publication above, liputan6.com, through liputan6.com: reported on "clarification" from Malaysia that there was no any intent of cultural claim, as implied in an article titled "Setelah Pendet, Kuda Lumping pun Diklaim". That article wrote:

> "Until today, no statement is made by Malaysian government officers or private institution that broadcasts the tourism advertisement that they have claimed Tari Pendet. Malaysia seems to 'blame' it on Discovery Channel, that broadcast the advertisement without consent from Malaysian government."

Also stated in that article that *Tari Pendet* was used to complete Malaysian tourism advertisement with "Malaysia Truly Asia" as the tagline made by Indonesian production house in Bali. The use of iconic Balinese dance enraged people, because it was broadcasted after *Reog Ponorogo*, named differently as *Tari Barongan* by Malaysia. There is a written agreement between the Indonesian government and the Malaysian government that the use of culture which has no official status must include written consent for commercial use.

News about the claims of some Indonesian cultural elements by Malaysians generally only repeat the news that has been published in previous years, because it is triggered by recurring events. News quoted from rmol.co reported on *Rasa Sayange* folk song that was performed by Malaysian dancers for "Pekan Kerjasama Pendidikan Tiongkok-ASEAN Ke 8" in Kuala Lumpur, Malaysia. In fact, the performance received different responses from the authorities in the Indonesian government. A representative from Kemenpora, Arbi Eko Nurjanto, hoped that the media did not exaggerate it, while the representative of the Ministry of Tourism and Creative Economy, Anang Sutanto, responded to the performance of the song with disappointment and anger. However, he also acknowledged the timidity of the Indonesian government in protecting the cultural property rights owned by Indonesia.

News about cultural claims in 2017 and 2018 are repeats of previous news, as events in 2015 are repeating itself as Indosport.com press releases via indosport.com, and okzone.com site via the page okezone.com preach about the same thing about *Rasa Sayange* folk song being sung at the opening of SEA GAMES in Malaysia. The event was again responded with anger by the people of Indonesia.

Some of the news aired by Internet-based media in Indonesia about the performance of several cultural elements from Indonesia by some parties in Malaysia, have been presented with a provocative packaging. However, in the content of the story, not all of them reported that those cultural elements have been claimed by Malaysia. Like the news reported by liputan6.com which stated that Malaysia itself has never claimed that the culture is theirs.

As for Indonesian media itself, the news of conflict is more focused on crisis events, such as violence by migrant workers or political cases and other strategic cases, if they have important news values. Even if there is news about the conflict of cultural claims, its purpose is solely for warming the situation. In general,

the media themselves do not feel any significant conflicts. The news of cultural claim disputed is published largely by the factor of proximity, Malaysian culture, language and geographical factors with Indonesia, that make it interesting to be raised as news, as opposed to reporting something happening in Laos which is definitely far-off in terms of distance, culture and language. This closeness makes people who consume media feel close to the events being reported.

Representing the Indonesian media in Malaysia, Agus from Antara Kuala Lumpur illustrates that what is reported in Indonesia about the claim of some Indonesian traditional arts by Malaysia, does not occur in Malaysia because for Malaysians, the event is not really that important. When the Indonesian press picked up the news about upside-down Indonesian flag, the Malaysian side regard it only as a human error. The press in Malaysia is not as free as the mass media in Indonesia because it is still largely controlled by the government, so, any negative reports will bring the press workers into the realm of law.

The same is also stated by Hakimi from Bernama Malaysia, that for the Malaysian press, the issues of cultural claims do not exist, because, like other informants' opinions, the culture is performed by Indonesians who have long lived in Malaysia. So is the case with Batik, like other countries, Malaysia also has batik, Samoa has one, Fiji has one, even Australia also has one, but each pattern and design are different. In other words, what the Indonesian community is concerned about, is not considered important by the Malaysian press, because what is alleged by some of Indonesian people is not true.



Batik, part of Indonesian culture or Malaysian culture?
(Source: kompas.com)

From what is observed from Internet-based Malaysian mass media, only Malaysian site, Malaysia Kini, via https://www.malaysiakini.com/letters/116189, published the news about why Indonesian is angry over Malaysia Truly Asia commercial show featuring Pendet Dance as one of the cultural elements that Malaysia offers. On October 29, 2009, there was an article that the perception of the term "Malay" is what angers Indonesian people. In the article it is written that:

> "In Malaysia the definition of 'Malay' is a political construct which is spelled out categorically in the constitution. A Malay is 'a person who professes the religion of Islam, habitually speaks the Malay language (and) conforms to Malay custom'. Given the vagueness of the definition, it is easy to see why Malaysians tend to think that almost anything Indonesian is automatically 'Malay'. All Indonesians speak Malay/Indonesian, the vast majority of them are Muslim, and therefore, 'Indonesian' equals 'Malay', with the exception of some items which are explicitly not Muslim, like the Balinese 'pendet' dance."

The quotation clearly illustrates, that there is indeed a cultural difference between Indonesia and Malaysia. This cultural difference gave rise to different interpretations of the word "Malay", where for Malaysia, people who meet the criteria of *Melayu* in the Malaysian constitution are considered as *Melayu*, including those in Indonesia. While for Indonesia, Malay has a narrower meaning and tends to refer to one tribe of hundreds of tribes in Indonesia.

Referring to the article, it is not surprising that for Malaysia presenting Indonesian cultural elements in their important events is not a mistake, and cannot be considered as cultural claim, because in their view, Indonesian cultural elements flourishing in Malaysia and brought by Indonesians automatically become part of Malay culture and thereby become part of Malaysia. In other words, there is no need for any cultural claim, as it already exists in their country.

This situation is further supported by the second article published in that daily newspaper when at Miss Grand Malaysia 2017, one of the participants donned a costume inspired by *Kuda Kepang*, an article in malaysiakini.com written by Mohd Hazmi Rusli (PhD), a senior lecturer from Faculty of Sharia and Law, Universiti Sains Islam Malaysia and a visiting professor at the School of Law, Far Eastern Federal University, Vladivostok, Russia.

The author reminded us that the costumes are valid for use by Malaysian participants, as they are a cultural heritage derived from the time of the reign of the kingdoms of Sriwijaya, Majapahit and Malacca, where Indonesia and Malaysia were united under one political power. The article also explained that the protest by a small part of Indonesian society is inappropriate, because Indonesia and Malaysia come from the same ancestor that is the Malay ethnic group. Furthermore, the article also compared Indonesia with other countries whose ethnics groups also thrive in Malaysia such as Chinese, where the ethnic culture is well developed in Malaysia and enrich Malay culture in Malaysia.

The limited article on Indonesia's protests against Malaysia that showcases Indonesian culture, for Malaysians does not seem to be considered an important issue to be reported. Two articles found on Malaysiakini.com page above illustrate that in the view of Malaysia, Indonesians do not fully understand and remember the history of relations between the two countries in the past. On the other hand, it is also seen that the protests by a small group of people in Indonesia are not based on complete information and expressed without confirming the truth or the underlying facts of the news broadcast. In other words, the aim is *news value*, not the truth of the news.

Today's mass media, other than as a source of information and ideas, is also expected to be a means of education and knowledge resources. But in practice what is displayed by the media is not free from various interests. The reality that media displays is not the reality; the media are loaded with representations of reality.

The media coverage of reality called "cultural claim" by small groups of Indonesians is inseparable from various interests, as evidenced by the construction of the news presented by several Internet-based mass media. News coverage on liputan6, on August 23, 2009 for example, presented news with a provocative headline, "Setelah Pendet, Kuda Lumping pun Diklaim". The title clearly accuses others of committing an offense against Indonesian culture. In fact its content describes the Malaysian clarification of the use of Pendet dance without the Malaysian government's approval.

The claim and the use of Indonesian culture by Malaysia and for Malaysian tourism commercial purpose is seen by Indonesian media, especially Internet-based mass media, as taking or stealing that culture, while in fact this conflict has characteristics of ambiguity, built upon language usage. Based on the social construction theory as formulated by Berger and Luckmann (1966) the Indonesia culture deemed being stolen by Malaysia has been constructed by Indonesian people differently compared to the way it has been socially constructed by Malaysian people.

In other words, using Fredrik Barth's theory of ethnic boundaries (1969), the ethnic boundaries between Indonesia and Malaysia have blurred, although at times they are separable.

News headlines presented in all media used as samples in the research tend to employ adverse language to illustrate social reality that happens in Malaysia when Indonesian traditional cultural elements are performed there. A more provocative title came from Tribun Pontianak, on 20 August 2017, "Berikut Daftar dosa-dosa Malaysia ke Indonesia". By using the word 'dosa' (*sin*), they imply unforgivable actions, as according to KBBI (Indonesian Dictionary), sin is an act of violating God's law, or simply wrong actions. That article presented detailed categories of wrongful act Malaysia has done to Indonesia, from song, territorial, river, cultural art, and food claims. It constructs the reality of the use of Indonesian culture, as the kick starter to dig up more actions that are considered wrongful by Indonesians.

Everyday reality, using the social construction theory (Berger & Luckmann, 1966), represents the results of social construction formed by societies, in this case Indonesia mass media that tries to construct a conflict between the two countries through one-sided reporting, without confirming with Malaysia's side of story. Similar news is also published by Brillo.net, an online news site. They reviewed several books that address the dispute between Indonesia and Malaysia. One of the books reviewed is written by Genuk Ch. Lazuardi: *Maumu apa, Malaysia?: Konflik Indo-Malay dari kacamata seorang WNI di Malaysia*. The book presented a view from an Indonesian who has long lived in Malaysia and introduces many Indonesian cultural arts in Malaysia. These artists of Indonesian origin insisted that the arts they introduced are theirs, Indonesian people, not Malaysian government. In his book, Lazuardi also wrote that the cultural claim dispute only appears among government officials, and does not represent the people of Malaysia.

The article in Brillo.net also reviewed the book; *Indonesia-Malaysia Relations: Cultural Heritage, Politics and Labor Migration*

written by Marshall Clark and Juliet Pietsch. The article cited the views of Malaysians who are generally unconcerned about the frequent "conflict". The Malaysian view of the book is in line with some informants' view that the conflict does not exist and that the disputed culture is not the property of one country. The book also presented the opinions of Malaysian media, which consider the 'conflict' between Indonesia and Malaysia is only a media game, and Malaysians are not concerned with the issues fussed by the Indonesian media and regard the news from Indonesian media as a form of entertainment.

This view is in line with what the representatives of Indonesian mass media have argued that media news is made for commercial benefit, rather than describing the true reality. This condition is in line with the concept of reality construction by the media, where the construction of reality by the media is formed based on or intertwined with the following:

a. The alignment of mass media toward capitalism, where in the context of the relations between Indonesia and Malaysia, the Indonesian mass media is seen in favor of the system of capitalism. The construction of news about some arts and cultural elements by certain parties in Malaysia is reported for commercial purposes, where the basic assumption is that the more sensational the news, the more interested the public to consume.

b. There is also a media that reports the performance of Indonesian art and culture conducted by a group of Indonesian citizens who have lived in Malaysia for a long time. Yet, the report constitutes the false partiality toward general public, as conducted by some online news sites, reporting the Indonesian people's reactions to the event.

c. In the end, the news is inseparable from the economic interests of the mass media. This can be seen from the amount of media that takes part in spreading the news. Not all mass media in Indonesia are interested in reporting Indonesian cultural arts shows in Malaysia as an overly crucial

issue. Coverage of conventional media generally conveys brief reporting without repeating the same news.

Referring to the concept of ethnic boundaries as formulated by Barth (1969), ethnic identity or ethnic culture, whether Indonesian or Malaysian, as claimed by both countries, is dynamic and may change over time. To reiterate, Barth contends that the cultural elements of an ethnic group do not necessarily have to be distinctive, such as cuisine or language, but they must be having originated from their cultural heritage. The self-conception, as part of ethnic identification, does not automatically fit the identification given by outsiders.

As expressed by the informants from both Malaysia and Indonesia, the events of Indonesian culture show by Indonesian citizens who have long resided in Malaysia is not an event that needs to be disputed and constructed as an inter-state conflict. As represented by mass media representatives from Indonesia, the media are more interested in reporting the tragedies experienced by Indonesian migrant workers in Malaysia, compared to the cultural "claim" news which has less obvious sources.

Unsettled Cultural Conflicts

When examining the media coverage deeper, the construction of reality presented by the media generally is only seen from one side of the Indonesian viewpoint, and not much seen from the Malaysian side. It is expected that the media of the 21st century function as a source of information and ideas, education and the source of cultural exchange between Indonesia and Malaysia. The social reality of Malaysia's "cultural claim" also does not fully reflect the thoughts of the Indonesian people; the conflict is driven more by a small group of Indonesians who are not very clear about their allegiances but are more driven by economic interests.

Unlike the media in Indonesia, the Malaysian media do not consider the event of art and cultural performances originating from Indonesia as an important issue, so it does not need to be reported in a wide-scale manner. In contrast, they see that Indonesian mass media as exaggerating the reality that occurred. Although the concept of *serumpun*, makes Malaysians embrace the culture that comes from Indonesia, they also see that the news about Indonesia cannot be separated from the Indonesian press system that tends to uphold freedom of opinion and is influenced by capitalist interests. The concept of *serumpun* is strongly embedded in the Malaysian government and society. As culture is fluid which can be adapted and transformed according to its environment, so the allegation of claims is not necessary and should not have happened.

Mapping Disinformation During the Covid-19 in Indonesia: A Qualitative Content Analysis

Devie Rahmawati, Deddy Mulyana, Giri Lumakto, Mila Viendyasari & Wiratri Anindhita

Disinformation and propaganda on social media have attracted the public (Seo, 2014). As we know, disinformation had existed since 1946, where Allport and Postman (1946) in Pulford (2019) explained that rumor travels when events are important in individuals' lives and when the news received about them is either subjective or ambiguous. It reminds us of our current Covid-19 pandemic.

According to Ali (2020), everyone was scared and worried about their own lives. In the meantime, Covid-19 news was ambiguous and made sense of rumor. Scherr et al (2021) assert that vague news impacts negative information. In our contemporary digital world, we call this misleading news disinformation (Arthur, 2017). We can discern that the confusion of news consumption that happened in World War I is repeated today. It is indeed relevant to our present Covid-19 pandemic (Viswanath et al., 2020).

Rumors *en masse* are challenging to handle. Therefore, social media platforms like Twitter consider themselves aggregators of information such as disinformation in the Taliban war propaganda (Bahar, 2020). Unfortunately, the prevalence of social media platforms has amplified the circulation and outreach of disinformation. Two core elements of social media, namely web 2.0 and User-Generated Content (UGC), complicate the information environment. The flow of UGC on the web foundation has so long supported the spread of information (Zajc, 2015). However, this mechanism approves disinformation circulation on the public timeline. Disinformation has affected many aspects of our life such as politics (Freelon & Wells, 2020), law (Craufurd Smith, 2019), health (Chou et al., 2020), social life (Rampersad & Althiyabi, 2020), and on technology (McDougall et al., 2019).

While most users swamped themselves in the types mentioned above of disinformation, they were left in awe by pandemic rumors. In times of panic, when life matters most, words can become believable (Jamil & Appiah-Adjei, 2020). Research by Guo and Zhang (2020) explained that rumors travel during the time, and individuals' lives are at stake. Guo (2020) explains that rumors may become conceivable when the news about them and the ongoing events are ambiguous. Therefore, half-baked news reporting gave prominence to ambiguity (Koivisto, 2015). Thus, people seem incapable of comprehending the news.

Sunstein (2014) classifies the spreading mechanism, namely, social cascades and group polarization. Cascades mechanism ensues as people rely heavily on each other's thoughts and conduct. For example, when one feels a lack information, the person might approve the views of others. A social cascade could develop when a group of early movers or influencers, or bellwethers, express verbally or physically to signal others to follow. The second mechanism, group polarization, relates to the homophily nature of groups. It is when like-minded people assemble. Once the group members conduct an in-depth discussion of rumors, they would believe it. Not to complicate

the definition, either disinformation or rumors pose similar characters. Cummings and Kong (2019) verified that rumors and disinformation displayed and delivered malicious intentions to persuade people to misleading information.

Academics, governments, and private sectors had disinformation in the SARS outbreak in 2003 (Aaltola, 2012). They have failed to warn us of the disinformation circulation danger. One main factor is the presence of social media platforms and private group chats. They have been overrun by pandemic disinformation daily. At the same time, the public was left to understand and identify rumors by themselves. Financial and social constraints already burden the masses themselves. The chaotic and toxic social media landscape could lead people to give up thinking about and looking for facts (Mansur et al., 2021). Society can be easily misled by make-believe information during the Covid-19 pandemic. Some actual events supported this proposition. For instance, three 5G masts were set ablaze in some parts of the UK. The UK society believed that 5G frequency has been causing coronavirus (Warren, 2020). Likewise, In India, many people started to consume cow dung and urine. They believe these animal leftovers were an alternative cure to coronavirus, even cancer (Nath, 2020). Simultaneously, Indonesian society got the disinformation through WhatsApp groups saying onion could cure Coronavirus or dates fruit may contain coronavirus from bats (Patrick, 2020).

Therefore, Indonesians face quite ample numbers of disinformation during the Covid-19 pandemic. The Ministry of Communication and Informatics, through their website in 2020, detected and fact-checked more than almost 400 coronavirus-related hoaxes (Kominfo, 2020). The total of hoaxes news about Covid-19 numbers was collected from early January to the end of March 2020. It suggests that there were 6 to 7 hoaxes on average circulating daily during these three months. Alongside the distribution of these hoaxes, the public encounters confusion. With more than 150 million Internet users, they used 8 hours on

the internet daily through their smartphones. Most Indonesian news or information sources come from YouTube, WhatsApp, and Facebook (We Are Social, 2019). Most Indonesian attitudes and traits create particular concern because of unreliable news or information sources. Therefore, disinformation may spread even faster during the pandemic through social media. In line with the research of Mansur et al (2021), the spread of fake news through social media goes rising because people do not understand the content of the news.

Disinformation may circulate when false information is consciously shared by someone to cause disadvantages to others (Krafft & Donovan, 2020). The sharer knows precisely the information is incorrect but intentionally shares it regardless. At the same time, mal-information occurs when factual information is shared to cause damage, such as when someone has intentionally distributed the half-true information to the public to spark curiosity. On the other side, the interest usually focused on the private life behind the phenomena (Wardle & Derakhshan, 2017). Therefore, Bradshaw and Howard (2018) reported disinformation as part of computational propaganda in The Global Disinformation Order from the Oxford Internet Institute. The countries covered in this report were 70 countries in 2019. In March 2019, on Presidential Election, there were 453 hoaxes on average, and there were 15 hoaxes found daily (Kominfo, 2019). Since then, disinformation has become part of our social media life in Indonesia. During this Covid-19 pandemic, hoaxes in the form of rumors have widely spread on social media.

Based on previous research, the researchers aim to map the distribution of disinformation related to the Covid-19 pandemic. The researchers are trying to find variations of disinformation from January to March 2020, according to the Kominfo clarification report. Furthermore, the researchers analyzed hoax content using content analysis techniques. The content analysis is carried out through rumors theory. The purpose of this study is to analyze the mapping of disinformation related to the Covid-

19 pandemic.

Content Analysis

This research is a literature review with the subject of a report from the Directorate General of Informatics Applications, Ministry of Communication and Informatics of the Republic of Indonesia with the title Hoax Issue Report in 2020. To map disinformation during Covid-19, the researchers used qualitative content analysis (Schellekens et al., 2020). The analysis was carried out to examine current trends and patterns –the Covid-19 pandemic– as an empirical basis for monitoring shifts in public opinion. This analytical technique is useful and meaningful because it relies on coding and categorizing the data related to disinformation in Covid-19 events based on the Republic of Indonesia's Ministry of Communication and Information in 2020 about the Covid-19 hoax report. This study uses a qualitative descriptive method with a content analysis technique as the data required descriptive explanation. The following are the categories and sub-categories of data analysis:

Table 1. Categories and Sub-categories of the Data
(source: Kominfo, 2020)

No.	Categories	Sub-categories	Code	Meaning
1.	What: The subject of the hoax's utterances or sentences	People	PEP	A subject is a person.
		Action	ACT	The subject is an activity or action.
		Phenomenon	PHE	A subject is an event.
		Place	PLA	The subject is a location or venue.
		Medicine	MED	The subject is drugs or medical entities.

No.	Categories	Sub-categories	Code	Meaning
2.	Who: The object or the things discussed in the hoax's utterances or sentences	Figure	FIG	The object is common people or laymen.
		Very Important Person	VIP	The object is a well-known figure.
		Others	OTH	The object is discussed other than the things in the sub-categories.
		Alternative Medicine	ALT	The object is an alternative cure or practice.
		Public Places	PUB	The object is/are public places.
		Commercial Places Health	COM	The object discussed is/are commercial venues.
		Facilities	HFA	The objects discussed is/are health facilities.
		Technology	TEC	The objects are technological tools, devices, and systems.
3.	Context: The setting, meaning, and message of the hoax's utterances or sentences.	Health	HEA	The message of the hoax conveys health issues caused by Covid-19
		Security Measure	SEC	The meaning of the hoax conveys the action of preventing and resolving the Covid-19 spread.
		Politics	POL	The meaning refers to political and legal issues toCovid-19 prevention action.
		Racism	RAS	The setting and message of the hoax indicate racial prejudice.
4.	Scope: The targeted place mentioned or implied in the hoax	Local	LOC	The place mentioned or implied refers to local neighborhood or district

No.	Categories	Sub-categories	Code	Meaning
		International	INT	The place mentioned or implied refers to foreign countries and locations
		National	NAT	The place mentioned or implied refers only to Indonesia.
		Regional	REG	The place mentioned or implied refers to the province.
5.	Media: The social media platform utilized	Facebook	FAB	The hoax distribution social media platform is Facebook.
		WhatsApp	WHA	The hoax distribution social media platform is WhatsApp.
		Twitter	TWI	The hoax distribution social media platform is Twitter.
		Internet	NET	The hoax distribution platform is the Internet.
		Instagram	IGM	The hoax distribution social media platform is Instagram.
		YouTube	YOT	The hoax distribution social media platform is YouTube.
6.	Rumors: Types of rumors implied in the hoax	Dread	DRE	The rumors implied in thehoax incites fear and uncertainty.
		Wish	WSH	The rumors implied in the hoax incite optimism.
		Wedge	WDG	The rumors implied in the hoax provoke conflict.

Table 1 shows the content analysis procedure carried out through six categories: what, who, context, scope, media, and rumors. Therefore, we determined the unit of analysis based on six categories starting from the smallest unit to the largest unit. Data collection was carried out through reading according to the sub-category in Table 1. The data that has been obtained were then classified based on the code of each category. Data collection

was carried out through the process of reading and recording the data related to disinformation in Covid-19. Qualitative content analysis has developed rigorous coding and analysis techniques to obtain validity and reliability (Lebed, 2019). Therefore, this study focuses on creating a bigger picture of the Covid-19 phenomenon embedded in the context (see Table 1). Thus, the procedure carried out is based on Fraenkel and Wallen (2007); namely, the study aims to map the categories of disinformation Covid-19. Then we define the terms what, who, context, scope, media, and rumors into sub-categories. The data we get is through the official website of the Ministry of Communication and Informatics of the Republic of Indonesia. Then selected data is folded into a corpus to facilitate analysis using codes.

Presenting and Discussing the Results

The research reveals that during the Covid-19 pandemic, hoaxes were mentioned mostly by common people (165, 46%). While in the following position, there are action-related hoaxes (62, 17,3%). The gap between PEP and ACT could become an indication that Covid-19 rumors were directed to human-to-human infection. The rumors elaborated mostly on suspected people contracting Covid-19 and the death toll from Covid-19. Simultaneously, action-related rumors like social distancing, regional lock- down, and rapid testing seemed to be the second priority. This phenomenon may relate to the continuum of emergency during a pandemic disaster. In line with Stanley et al (2020), Covid-19-related hoaxes distribution mentioning people were clearly on the alert phase. The alert phase refers to how people and officials respond to the increase in pandemic cases. Thus, during this phase, the Covid-19 hoaxes prevailed and were widely distributed. Human to human infection is a reality during this phase. Society was afraid, but some hoax purveyors spread dread by circulating false human-to-human infection claims

through social media (Susilo et al., 2020). In addition to society's fear of their life from the Covid-19 virus, peculiar phenomena (PHE) were also visible (57, 15,9%). In this analysis, abnormal, mythical, or even illogical phenomena happened, for instance, a talking infant claiming eggs could cure Covid-19 (348;) allegedly mass burial of Covid-19 victims (347); 5G bandwidth was the cause of Covid-19 spread (260); Coronavirus was found on toilet tissue (206); some Chinese citizens converted to Islam as they were cured of Covid-19 (127).

Referring to what Ali (2020) defined as rationalizing rumors, these irrational messages circulating during the pandemic are no strange phenomena. During the pandemic, people's minds were positively charged and burdened with fear and worry. Therefore, irrational rumors were not there to be analyzed. Instead, these false claims become rationalization, even fascination for some people. Although indirectly related, hoaxes mentioning medicine (MED) had undergone rationalization (34, 9.5%). Some of the medicine hoaxes were rationalized as alternative cures (see Table 2).

To compare with, Table 3 shows the number of Covid-19 hoaxes related to the subject of sentences, speeches, and even pictures, which are high (157, 52%). More than a half of the Covid-19 hoaxes were aimed at the general public (58, 16.2%) They know their lives are also at stake during the pandemic. Society may share the belief in saving themselves during the alert phase rather than caring and focusing onfigures, such as the President, artists, and religious figures.

Table 2. Numbers of Disinformation Based on What Category

No.	Code	Σn	%
1.	People (PEP)	165	46
2.	Action (ACT	62	17.3
3.	Phenomena (PHE)	57	15.9
4.	Place (PLA)	41	11.4
5.	Medicine (MED)	34	9.5

Table 3. Numbers of Disinformation Based on Who Category

No.	Code	Σn	%
1.	Figures (FIG)	157	52.2
2.	Very Important Person (VIP)	58	16.2
3.	Others (OTH)	38	12.6
4.	Alternative Medicine (ALT)	32	10.6
5.	Public Place (PLA)	30	10
6.	Commercial Place (COM)	26	8.6
7.	Health Facilities (HFA)	14	3.9
8.	Technology (TEC)	4	1.1

Based on the content analysis results in table 4, most of the hoaxes contexts associated with Covid-19 were about health. This phenomenon was as expected. During the pandemic, people would seek health advice, information, and healthcare. The health- related context from the hoaxes were more than 60% (234). Though placed second, the context related to security measures (80, 22,3%) is also indirectly related to health.

Table 4. Numbers of Disinformation Based on Context Category

No.	Code	Σn	%
1.	Health (HEA)	234	65.2
2.	Security Measure (SEC)	80	22.3
3.	Politics (POL)	23	6.4
4.	Racism (RAS)	22	6.1

Referring to table 4, the hoaxes from HEA and SEC are as follows:

1. Health-related
    a. There was a suspect symptomatic individual in Kraton Batang Regionalhospital (223)
    b. Tom Hanks was confirmed dead after contracting the Covid-19 virus (216)

c. Daniel Radcliff had contracted coronavirus (192)

d. Coronavirus had been spreading in Jakarta because of pork consumption (175)

e. Wet tissue can replace your mask (155)

2. Security measures

a. The closure of Gianyar road in Bali (350)

b. Sukabumi region required a letter of health notice to enter (344)

c. The Pondok Indah Mall closure because one Covid suspect had entered it (333)

d. A market in Cianjur had to be closed because of Covid-19 (322)

e. Closure and disinfecting in a market in Madiun East Java (286)

Both health-related and security measure hoaxes eventually related to each other when someone has allegedly contracted Covid-19 while entering commercial venues. These places would soon be reported as having a closure or disinfection prevention by spraying disinfectant solution. While politically-laden and racist rumors also had something frequently apparent. The POL and RAS hoaxes' findings related to; 1) government policy and action; 2) and Chinese ethnicity accusation. Some examples are as follows: Prabowo went away during the Coronavirus pandemic (309), the Indonesian Ministry of Foreign Affairs announced a lock-down action (277), The medicine that the President purchased from China was dangerous (334), and Chinese tourists entered freely and took transit flights in Indonesia (173).

Further, the majority of local scope hoaxes usually suggested closedown or disinfection spraying activities. The regional context rumors were 157 hoaxes or 43.7%among the 395 hoaxes. These local regions represented almost the entire Indonesian archipelago. For international scope rumors range from countries

like China, India, Italy, Singapore, and Australia (121, 33.7%). These countries usually have high reports on Covid-19 victims. Most of these international rumors have been contextualized linguistically to Bahasa Indonesia. In other words, they have been translated. Finally, in the third position, national-context hoaxes have also been circulating during the early stage of the Covid-19 pandemic in Indonesia (52, 14.5%).

Based on content analysis, there were two leading platforms rumors about Covid- 19 spread. The first was through Facebook (142, 39.6%) and slightly lower was through WhatsApp (122, 34%). Both platforms hold almost 70% of the rumor distribution. Other platforms that had been detected to spread these rumors were Twitter (48, 13.4%), Internet or online news portal (27, 7.5%), Instagram (10, 2.8%), and YouTube (10, 2.8). Regarding the numbers of disinformation based on rumors, more than half were about dread (67.1%) as the report of hoaxes tracking from Hoax Issue Report in 2020 used in this research was at the on set of the Covid-19 pandemic in Indonesia. Rumors conveying fear of Covid-19 contraction and even death were common from January to the end of March 2020. These were the months in which Covid-19 had been globally spread. And during these months also, many countries had been conducting many security measures to prevent Covid-19 infection. From the need to regulate social distancing, washing hands, using sanitary hand spray to regional lock-down was apparent. These activities would have indicted the fear of Covid-19 infarction.

Along with dread rumors, wishful (70, 19%) and wedge (48, 13.3%) rumors circulated in social media. Wishful rumors during the Covid-19 pandemic contained hope and dreams of remedial treatment and alternative medicine. Wedge rumors provoked or incited hate toward political preferences, religious belief, ethnicity, or character assassination. So those people who received this wedge rumor could feel angry or hate toward the person or things implied. Though both rumor numbers were indistinct to dread rumors, either rumors were circulating to

the shroud, even more, the toxic information ecosystem during Covid-19 pandemic

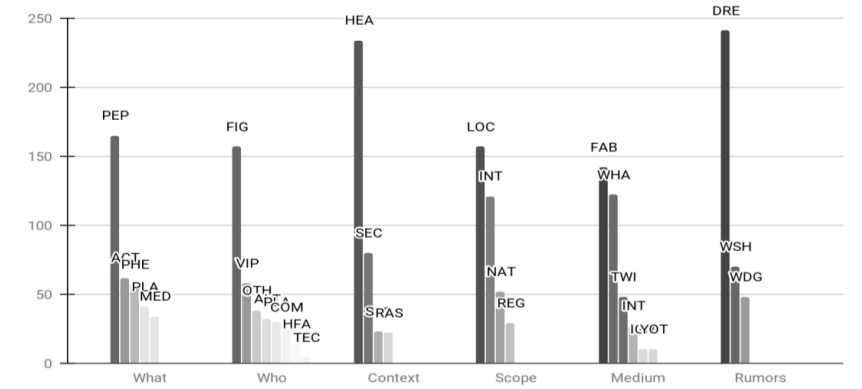


Figure 1. Mapping of Hoaxes

Figure 1 shows 359 Covid-19 pandemic hoaxes in Indonesia from January to the end of March 2020 in each category (see Table 1). This mapping can convey the number of hoaxes for each category and sub-category during the three months of observation. Based on figure 1, the HEA and DRE sub-categories show a high level of hoaxes. HEA relates to a health issue, and DRE is a dread issue. The most common hoaxes from the analysis in January to the end of March 2020 were about health issues targeting fear- mongering and implying the general public in local areas with Facebook and WhatsApp as a distribution platform. The second most common hoax of the analysis is alternative medicine and treatment for Covid-19 by implementing global and national security action activities regulated and influenced by key figures from the information distributed through various platforms. The least that can pose a potential danger are hoaxes that incite hatred and sentiment against political preferences, ethnicity, and religious beliefs that threaten harmony at the regional level through various social mediaplatforms. Therefore, a gap is needed in the accessibility of online health information through increasing eHealth literacy to the public (Paek & Hove, 2012). Paige, Krieger, and Stellefson (2017) research shows that

older adults with low eHealth have high trust in Facebook but low trust in online support groups. So, it is not surprising that the level of hoax spread about Covid-19 via Facebook reached (142, 39.6%), much higher than Twitter.

This study's number of hoaxes cannot describe hoaxes' impact during the ongoing pandemic in Indonesia. However, these numbers can give a glimpse into a situation where rumors or hoaxes are intoxicating the public social media timeline. So, this study's results are in line with Collins et al (2020) that one of the potentials is to spread disinformation through social media. Rumors that spread fear and uncertainty circulated massively, especially among the surrounding communities. This research also occurred in Indonesia, China, and Russia, namely spreading rumors online (Pulford, 2019).Social media platforms like Facebook and Twitter or group chat apps like WhatsApp contribute to scams' constant danger. The need to educate people with digital and medialiteracy is imperative (Spires et al., 2018). Lack of skills checks can lead to the way people recognize and distribute. Failure to understand information can also be the cause. Lack of critical thinking in education also tends to contribute to a lack of identification of information. This phenomenon worsened during the Covid-19 pandemic, while the government and journalists still struggled to verify and distribute reliable health information(Perreault & Perreault, 2021). This research also shows that disinformation mapping categories are important for society, especially social media users, to implement the eHealth literacy revolution (Malone et al., 2017)

In addition, hoaxes related to Covid-19 do not only damage the timeline of public social media. They have also crept into people's minds with fear. It is in line with the research results from Viswanath et al (2020) that disinformation amid the Covid-19 pandemic can cause public distrust of the government, media, and even information about each other from various sources distributed on social media facilitated by users. Meanwhile, the government and media also broadcast their version of Covid-19 information; as Allport and Portman (1946) in Pulford (2019)

illustrate, rumors spread in large numbers when data is widely distributed. They show how rumors about the Pearl Harbor attack developed rapidly after the newspaper published the tragedy. However, this study shows that rumors that have occurred in the era of technological advancement have accelerated the spread of disinformation on a large scale (see Table 4). 65.2% of Covid-19 disinformation related to health occurred, such as "wet tissue can replace your mask". This is due to panic anda lack of health literacy in the community. The information obtained is not analyzedfirst and is immediately disseminated (Chesser et al., 2015).

The fears implicit in the Covid-19 disinformation have projected people's emotional state because as Allport and Portman (Pulford, 2019) pointed out that when people have less information about their environment, they fail to objectively and impartially understand any information (Saurwein & Spencer-Smith, 2020). The misleading information on Covid-19 also shows this projection that people who fear their lives will contract the coronavirus will fall easy prey to disinformation (Shirish, Srivastava, & Chandra, 2021). During a pandemic, an emergency is supposed to alert the public, but disinformation exacerbates the situation. This has had a very significant impact on society. The impact is fear of the local situation, government regulations, and a mistaken belief in medicine and alternative medicine.

Therefore, the study indicates that it is time for the government, academics, and society to improve eHealth literacy (Li, 2018). e-Health literacy can empower people to understand health-related information better. Also, this study shows that inaccurate and misleading health information often occurs on the Internet, especially through Facebook. Therefore, people need the competence to take advantage of technology in improving eHealth literacy (Chesser et al., 2015). The study suggests that the government, especially the Ministry of Communications and Informatics, increase warnings about hoax news reports to

the public on the Kominfo website (Shirish et al., 2021). This is to increase public awareness and information literacy against disinformation during the Covid 19 pandemic so that the public can sort out which information is trusted and can be disseminated.

Research Implications

Based on hoax news reports published through the Ministry of Communications and Informatics website, the highest hoax contexts are health issues. In addition, the disinformation that spread during the Covid 19 pandemic made the public afraid and panicked. The implication of this study suggests several recommendations in response to the urgency of handling disinformation during the Covid-19 in Indonesia, such as initiating digital and media literacy in the national education system. The present study can provide a clearer picture to the government and the public about the spread of hoaxes during a pandemic. This research offers the government to work together and carry out fact-checking practices with local stakeholders, especially in rural areas. On the other side, local communities must monitor, check the truth, and clarify misinformation in their community. Further research is suggested to conduct a more thorough, longitudinal, and comprehensive study of disinformation mapping during the Covid-19 pandemic.

Fighting the Omni Hospital: The Suicide of Public Relations

Deddy Mulyana & Fiona Verity

During the period 2009-2012, Prita Mulyasari, a resident in Tangerang, Indonesia, was embroiled in a defamation dispute with Omni International Hospital. The legal case was instigated by the Hospital in response to a specific e-mail Prita sent to family, friends and colleagues about her healthcare experience that subsequently went viral. In this paper, we discuss health consumer participation, medical dominance and digital ethics in a context of changing social norms and expanding use of digital technology in Indonesia.

More specifically, we aim to explore issues of health consumer participation and medical power and privilege in Indonesia through critically examining an extraordinary Indonesian defamation case instigated by a private hospital against a health consumer. Colloquially known as the "Prita Case," it is named after Prita Mulyasari, a resident of the city of Tangerang, Indonesia, who

was charged, convicted and eventually acquitted of defamation after sending an e-mail to family, friends and colleagues that went viral. The e-mail entitled "The Fraud of Omni International Alam Sutera Tangerang Hospital" is about Prita's dissatisfaction with her healthcare experience and the hospital's complaint processes (Fidrus, 2009). A month later, the Omni Hospital issued both civil and criminal action against her on the grounds that she had defamed the hospital and medical staff (Lim, 2013; Onishi, 2009). Indonesia is a country which allows prosecution for defamation under both criminal and civil law (Human Rights Watch, 2010). Prita was arrested and detained in May 2009. She then spent three weeks in jail with her request to return home for one night to see her young family denied. During her incarceration she was placed in a small cell with others, that included hardened criminals, all the time unaware of the public outrage to her detention.

Prita was charged under a relatively new Indonesian civil legislation, introduced in 2008, with the purpose to regulate digital communication. In broad terms, the *Law Regarding Electronic Information and Transactions* (ITE Law) is to protect consumers from fraud and defamation in the context of digital technology usage. Under this law it is prohibited to "...knowingly and without authority distribute[s] and/or transmits and/or causes to be accessible Electronic Information and/or Electronic Records with contents of affronts and/or defamation" (ABNR Lawyers, 2012). Prita was also prosecuted under the *Criminal Code* Articles 310 and 311; with basis in the former colonial Dutch legislation to detain those who opposed Dutch authority. Here defamation is established if there is clear intention to harm "someone's honor or reputation" (Dibley, 2010). The Hospital argued that Prita's e-mail had defamed the honor and reputation of the treating doctors and the Hospital.

The defense argument was that Prita's e-mail was communicating to friends and family her personal experience of poor quality healthcare and lack of engagement in her healthcare. During her hospitalization, Prita queried the accuracy of blood

tests and treatment for dengue fever. She was subsequently treated at another hospital for mumps and post discharge communicated her experiences as a cautionary tale in the public interest, as seen in the following extract from her e-mail:

> Don't let my case happen to other lives. Especially children, elders and babies. Whenever you are taking a treatment be careful of the hospital's luxury and 'international' title, because the more luxurious the hospital is, and the smarter the doctors are the more frequent are patient tests, drug treatments and injections. (Prita's e-mail as cited in Palatino, 2010)

The court case was drawn-out with convictions, appeals and the overturning of convictions. In May 2009, the Tangerang District Court ruled in favor of the hospital in the civil lawsuit and Prita was ordered to pay Rp. 340 million (US$40,120) to the hospital. This catalysed deep public sympathy and stimulated a campaign to assist pay the fine in a project called "Coins for Prita" (Parlina, 2011). Subsequently the same Court acquitted Prita of all criminal charges [in June 2009]. This was the start of a complicated sequence of events as the case went to the High Court and then twice was heard before the Supreme Court. At the first Supreme Court hearing Prita was found guilty and sentenced to six months' imprisonment (with one year of probation) but was freed from paying the fine. Prita then lodged an appeal to the Supreme Court. A different panel of judges delivered a ruling that Prita was not guilty and she was freed of all charges in September 2012. This time the judges considered that Prita had conveyed an opinion, a right guaranteed by the Indonesian Constitution. *Article 28* of the 1945 Constitution guarantees "Freedom of association and assembly, of verbal and written expression and the like, shall be prescribed by law" (Indonesian Department of Information, 1986). In addition, the Court ruled that customer and patient complaints are protected by the *Protection of Consumers' Rights Law No 8 1999*.

Throughout, the case generated extensive and sustained public debate both in the Indonesian print and social media.

Ironically, given the nature of the defamation charge, Facebook and blogger activism was significant in mobilizing public support for Prita's acquittal (Hermawan, 2009; Lim, 2013). As Lim writes: "Tens of thousands of Indonesians joined a support page for Mulyasari on Facebook, shared their outrage on Twitter and donated money to pay her court-imposed fine" (2013). Various aspects of the Prita case have been explored in the academic literature; debates about the ITE Law (Human Rights Watch, 2010); the case as an example of internet based activism (i.e. Lim, 2013; Molaei, 2015) and as evidence of the need for changes in hospital administration and complaint management (i.e. Anshari & Almunawar, 2011; Low & Anshari, 2013).

In this paper, we focus on the intersection of health consumer participation and medical dominance in Indonesia in a context of changing social norms and greater use of digital technology. We argue that digital technology is changing health consumer participation and opening up avenues for challenge to medical privilege, however this development is set against the use of the law to reinforce this privilege and limit participation. The paper is divided into three parts. We begin with a literature review which canvasses relevant aspects of health consumer participation, medical dominance and digital ethics in Indonesia and the social constructionist ideas used in the paper. This is followed by a discussion of the paper's main themes. We conclude with final comments on health consumer participation in the Indonesian context.

Health Consumer Participation: A Historical Perspective

Health consumer participation in Indonesia has become more widely recognized as a contributor to quality health care since the1997 *Jakarta Declaration on Health Promotion in the 21st century* (Kim et al., 2001; Halabi, 2009). This is a recent turn

of events. Under the leadership of Suharto (1966-1998) there was little freedom of expression among the people to criticize the government in the New Order Era (Halabi, 2009). Unlike the situation in other countries, like Australia, where medical dominance has been steadily challenged (Willis, 2006), Indonesia is a country that embraces cultural values that support the wide social distance between (lower-middle-upper) classes of people (Kim et al., 2001; Mulyana, 2012). Historically people suffering and even in some cases dying because of medical malpractices, only reluctantly expressed their views or complained, let alone sued medical doctors or hospitals. In the situations where patients or their families did undertake legal action, they would find themselves facing the financial and institutional strength of the medical profession, as medical doctors would likely have access to more expensive lawyers. Medical practitioners continue to have an elevated status.

Digital technology is one factor changing the nature of health consumer participation in Indonesia. Indonesia is a country which has seen a substantial growth in digital technology usage, particularly amongst its younger population (Abud, 2012; Lim, 2013). In this context, digital ethics is taking on new importance as digital technology and new forms of communication expand (Plaisance, 2013). Cappruo defines digital ethics as pertaining to the "...impact of digital ICT on society and the environment at large as well as with ethical questions dealing with the Internet digital information and communication media (digital media ethics)" (Cappruo, 2010). As he notes, one of the central questions in digital ethics is what norms and values should guide "...the human right to communicate". Digital ethics is a contested area. Plaisance (2013) in exploring ethical frameworks for digital life, and following Goffman, makes the point that boundaries are blurred between a person's "front stage and backstage". He further writes that digital technology means that there is a "...relentless, permanent archiving of every digital movement" (2013). This has ongoing implications for freedom to express opinions and the

construction of digital etiquette and socializing digital ethics. There is also a distinction between digital ethics of the micro social world (i.e. how and what a digital user communicates and on what basis), and digital ethics applicable to the macro social world (Floridi & Sanders, 2003).

In this paper we draw on social constructionist ideas. Since the publication of Berger and Luckmann's 1966 classic text, *The Social Construction of Reality*, there has been a body of scholarly literature focused on the utility of social constructionist ideas for social analysis that includes health analysis. Conrad and Barker (2010) have neatly summarized the evolution of various strands of thought in this vein – from Goffman to Foucault which have laid down the intellectual tradition of the social construction of illness. The social construction perspective can be viewed as a holistic way to explore competing perspectives on health, illness, and health care. The social construction approach (terms often used interchangeably with the following terms: constructionist, interpretive, subjective, phenomenological, symbolic interactionist, humanistic, holistic, constitutive perspective) assumes that any phenomenon needs to be placed in its socio-political context. Within this approach, there are claims and counter claims as to the nature of social experience and reality that have roots in the cultural and social world.

Berger and Luckmann (1966) define the social construction of reality as a symbolic interplay between one's own consciousness and consciousness of other people. Knowledge of the social world and the reality of everyday life are seen as shared and intersubjective and relying on interactions and communication. More specifically, Berger and Luckmann argue:

> "The reality of everyday life further presents itself to me as an intersubjective world, a world that I share with others. This intersubjectivity sharply differentiates everyday life from other realities of which I am conscious. I am alone in the world of my dreams, but I know that the world of everyday life is as real to others as it is to myself.

> Indeed, I cannot exist in everyday life without continually interacting and communicating with others" (Berger & Luckmann, 1966).

For the proponents of the social construction approach, in the context of health care the biomedical perspective itself is viewed as a social or cultural construction shared by groups of medical professionals, mainly physicians. Yet, it can be deconstructed, since the biomedical perspective is not the only valid perspective that can be used to view reality (Conrad & Barker, 2010). Furthermore the biomedical approach to health, illness and health care has been criticized as ethnocentric and biased, that is, based on white middleclass male perspectives and experiences without taking into account the experiences of white women and non-white people. As Lorber (2000) suggests:

> "How could medical science be trusted, they asked, when so few women were scientists, when the diseases that killed men were the first priority in research, when women were not included in clinical trials, when women's bodies and experiences were ignored as data, and when women's second-class status permeated their treatment as patients."

People are continuously engaged in the negotiation of meaning about health and illness as shown in their verbal and nonverbal communication with others. As Marks et al (2000) point out, "People's accounts of health and illness are interesting and illuminating topic of study in their own right." Whilst mindful of the critical literature that a social construction approach can be used in overly simplistic and relativist ways (e.g. Hacking, 1999), we contend this approach is of value as a analytical tool in the information age, when a fast changing intersubjective world is created and recreated in no time at all (Conrad & Barker, 2010).

The focus in this paper is analysis of the single case of Prita Mulyasari, a married Indonesian woman with two children (at the time Prita was arrested they were aged three years and 15 months of age) and the issues raised throughout her court case. The source materials used in this paper are print media commentary on the case accessed through a Google search using the terms

'The Prita Case.' We use both journalistic accounts and the contents of letters to the editor. Since the beginning of the Prita Case in 2009, hundreds of thousands of related entries (news items, articles, media social contents, personal blogs, etc.) have been uploaded onto the internet. Consequently, it is difficult to sample such a volume of internet material for analysis.

Therefore in this paper we have chosen the internet content purposively to highlight not only the legal battle but also the power and ethical dilemmas in the Prita Case. Lim, in a study of social media in Indonesia, notes that "By and large, the subject matter of Indonesian online media very much mimics the taste and the bias of mainstream media" (2013). There are clear limitations in this method. It is primarily based on online accounts through English language papers such as *The Jakarta Post,* a national daily paper, and the *Jakarta Globe, Republika* and *Kompas* all Indonesian language daily papers with an online English language presence. No matter how subtle the language used, media reports contain personal, socio-cultural and ideological elements. In the Prita Case, journalists, producers, and editors relied on a set of assumptions (and pictures or images evoking such assumptions) from official and semi-formal accounts. These were from various sources: politicians, law experts, prominent figures, and other related organizations. As Dennis and Merrill suggest; "...journalistic objectivity is not possible" (Dennis & Merrill, 1996).



Prita Mulyasari

Analyzing the Prita Case

Tension between health participation and medical privilege

One of the aspects of the Prita Case, both evident in the court proceedings and the media, is the value accorded to health consumer participation. International standards and health policies establish that participation in health includes the right to voice opinions about health care; this is across a continuum from an individual's own health care to input in health policy and planning (Halabi, 2009). This is essential to improve the quality of health care. A consistent thread in media reports is the projection of the Prita Case as representing resistance to medical and legal power and privilege. This resistance is varyingly depicted; Prita is a consumer underdog fighting a self serving hospital industry, a patient challenging the power and privilege of doctors, a woman challenging paternalism and, as well, the restrictions in the *Law Regarding Electronic Information and Transactions* (ITE Law).

Prita's defense team argued that she criticized the Hospital as a health care consumer in order to caution others. This argument

is captured in this headline from the Jakarta Globe; "Prita Cites 'Right To Criticize' as Defense Attacks" (Andriyanto, *Jakarta Globe*, 2009). The following extracts, the first a letter to the editor, and the second a news piece in the *Jakarta Globe* illustrate the view that complaints are an important dimension of consumer participation.

> "What kind of hospital is it? It does not want to accept critiques, it just wants to accept praises. If you do not want to be criticized, do not open the hospital. The hospital is expensive, but it is unsatisfactory" (Maseko, 2009)

> "Speaking in Bali, the Minister for Women's Empowerment, Linda Gumelar, offered her support for Prita. The minister said the guilty verdict was "regrettable" because the e-mail in question was meant as constructive criticism for the hospital. "I hope that law enforcement will ... deliver a just verdict that champions the vulnerable," she said on Monday. "We don't want Prita to have to carry around the label of criminal in the eyes of her children and family." Gumelar said any criticism of public or private services should be welcomed and that Prita did not deserve her conviction. She stressed however, that the government should not interfere in the case, even if some officials disagreed with the court's decision." (www.thejakartaglobe.com, July 12, 2011)

The defense argument touched a nerve, as seen in the media reports on the public backlash against the Omni International Hospital for silencing health consumer participation. A journalist commentator in the *Jakarta Post* noted early in the court proceedings:

Prita was sued by the institution that was supposed to provide her with care and treatment and is now being sued by the state that is supposed to protect her, in a court that seems to have a perverse sense of justice. She's been taken away from her children for speaking up for herself and demanding the service that she deserved. (Royono, 2009).

In contrast, the Prosecution argued that Prita in her criticism

had defamed the honor of the treating doctors and the reputation of the Hospital. In Indonesia, historically, medical doctors have been considered an elite community (as elsewhere in the world) due to their educational status and wealthy backgrounds, and owing to an assumption that people in general need them to cure their ailments and prolong their lives (Kim et al., 2001). Not all media reports of the Prita Case are framed in supportive terms. The *Jakarta Post* prints a letter to the editor from a healthcare provider highly critical of Prita and calling her a 'terrorist'. The writer's words '*they did not appreciate our medical knowledge*' and use of '*terrorist types*' emphasize how a challenge to power is viewed by a person who occupies a position of medical 'expert' power:

> "I think Prita is not an innocent woman. I saw that she likes to cry and look sad, acting as a desperate mother in front of the press, but the negotiations between her and the hospital to reach an agreement have been very difficult and complicated. That means she is not easy to compromise with. I've worked in a big hospital, and I knew many kinds of patients. Some patients were very kind and very appreciative of our jobs, some were cooperative, but there were some who were very critical and always looking for the bad side. They didn't appreciate our knowledge as medical workers. They seem to know better than us, these kinds of patients we regard as "terrorist type". With my experience as a medical worker, maybe Prita is a person who can be grouped with terrorist type patients. Because the relation between doctor and patient should be built by trusting each other and if she had a problem, there is a customer service section that can help to solve the problem" (*Jakarta Post*, December 15, 2009).

The contrast between the above extract and comments in support of Prita, illustrate the different meanings that can be attributed to the same health care experience. Moreover doctors, nurses, health administrators and patients can be considered as separate cultural groups, each with distinctive roles and obligations (and cognitive style) affecting verbal and nonverbal communication. Across these groups will be different social,

ethnic, racial, or religious backgrounds, with different languages, worldviews, beliefs and values (Mulyana, 2012). A factor in misperception and miscommunication among healthcare practitioners, who come from different cultures but work in the same hospital and treat the same patients, is a lack of knowledge about how other conceptualize health and illness, and different views about the expertise of the health care consumer.

Due to their education and professional socialization, medical professionals (medical doctors, nurses) will encounter differences not only in defining what the patients suffer from, what causes the ailment and how to cure it, but also different perceptions of the 'appropriate' behavior to be displayed in their interaction, whether verbal or nonverbal. This includes differences in defining what are considered as ethical or unethical behaviors in their communication encounters. Unless the medical provider and the patient have understandings of these varying perspectives and willingness to adjust themselves to communication encounters where the health consumer themselves has expertise, misunderstandings may result (Barnlund, 1993; FitzGerald, 1996; Glass, 2010).

What is striking in the social and print media record is the relative silence of the voice of medical professionals in comment on the issues raised in the lawsuit. This is not to say their voices are absent but rather they are not accorded the same level of reporting as given to public views and those from human rights and advocacy groups. Some medical professionals do take the side of Prita, as seen in the following statement from a medical doctor; "*... the Omni International Hospital fails to handle its patient's complaints elegantly*" (Yarsi website). Others publically support the hospital. There is also evidence of medical professionals recognizing the expertise of the consumer and the need for improved patient/doctor communication, albeit in qualified terms. Statistics show that almost 98,000 patients die every year due to preventable medical mistakes. Despite legal obligations, a majority of medical doctors either fail to disclose a mistake or

disclose it in an incompetent manner, causing harmful outcomes (Hannawa, 2009). These medical mistakes are frequently referred to as a "hidden epidemic" reflecting the silence on these matters by doctors, patients and hospital administrators (Carmack, 2010).

The "Prita Case" brings home the complexity of interests in health care and power relations. At one level throughout the public debate were competing interpretations of health care participation. Voicing an experience of poor quality care was viewed by a more powerful party, with institutional backing, as defamation. This clash highlights the significance of cultural worldviews, beliefs and values in making meaning of experiences of healthcare and illness (Banks et al., 1991; Barnlund, 1993; Kreps & Kunimoto, 1994). The Prita Case was a power game in which many important figures and institutions were involved to reinforce their privilege, gain support from the public or challenge existing dominant power relations.

Interplay between legal and medical discourse and dominance in this setting

As discussed earlier, Prita was charged under relatively new Indonesian civil legislation introduced in 2008 with the purpose to regulate digital communication. The use of this law to prosecute a health care consumer illustrates the interplay between medical and legal power. In contrast, the challenge to the use of this law was on the basis of human rights and the implications for the country's democratic culture. Human Rights Watch observe; "The application of criminal defamation laws in Indonesia gives rise to a damaging, chilling effect on speech central to the effective functioning of a democratic society" (2010). The following extract in the *Jakarta Post* takes up this theme and the implications of the ITE Law for silencing dissent and criticism:

> "The PBHI, the AJI, the Press Legal Aid, the Institute for Policy Research and Advocacy (ELSAM) and the Indonesian Consumers Foundation, as well as a loose grouping of individual bloggers, released a joint public statement Wednesday saying Prita Mulyasari's detention

was a violation of human rights. Together with other organizations, they formed the Committee of Freedom of Expression Advocates on the same day. Tulus Abadi, chairman of the Foundation of the Indonesian Consumers Institution, said, "this sets a bad precedent for consumers, since the right to complain is protected under Law No. 8/1999 on Consumer Protection. "This case has killed consumer's right to complain and created a new fear about being critical," Tulus said" (*Jakarta Post*, June 4th, 2009).

Political figures within government and political activists are reported commenting on the power and privilege of the law and medical professions as shown in the following media extracts.

"Former Industry Minister Fahmi Idris, who appeared at the Tangerang court when Prita filed the judicial review, said the case showed the arrogance of law enforcers" (Dessy, 2011).

"AFP news agency said that the case illustrated a deep 'imbalance' in favour of the rich and powerful at the heart of Indonesia's legal system. "The powerless people, either politically or economically weak, are always at a disadvantage. There's always unequal treatment for them. This is supported by the corrupt behaviour of law enforcers,' he said." (BBC, December 29, 2009).

The world of law is a contested space. While the Omni Private Hospital sued Prita on the basis of defamation others including law experts, considered that the e-mail was in the public interest. The majority of prosecutors, judges, and lawyers in Indonesia, as anywhere else, embrace the objective (deductive) perspective that requires empirical evidence. According to social construction ideas, the statements of all people in a legal case (including judges) are merely interpretations. So a court is an arena of interpretive war where law practitioners compete with each other to make his or her own interpretation the most logical one before others based on what are called facts, false evidence, opinion, mistakes, logical, clear, fair, unfair, wrong and so on. Since prosecutors, judges, lawyers, witnesses, and defendants have their socio-cultural biases and interests, their statements and decisions are more or less

subjective. This was highly evident in the Prita Case where different teams of judges gave different interpretations and decisions on the same legal case. The Supreme Court in 2010 cites the evidence of a subject matter expert, and this is reproduced below:

> "Professor Dr Wirjono Prodjodikoro in his book on page 100 wrote the following: 'I feel, that if an offender defends themselves by raising the public interest defence or another defence, then almost always or perhaps always, the issue will then be about the truth or falsity of the charges laid upon the victim. In my view, according to Article 312, a judge's research about how the truth of an accusation can only be allowed if, among other things, the judge believes the research is necessary to evaluate the offender's defence that he/she acted in the public interest or was absolutely necessary to defend something" (Indonesian Supreme Court, 2010).

In the Supreme Court's 2012 final ruling, the judges counterbalance defamation with the right to express a view as a consumer, and on this the *Jakarta Post* reports Prita's lawyer as saying the following:

> "What is more important is the legal implication for Indonesian customers who want to get fair treatment in any litigating case. 'The verdict implies that customers' rights to express their opinions may be better protected in the future,' said Prita's lawyer, Slamet Yuwono" (*Jakarta Post*, 2012).

This ruling was that the ITE Law cannot be "used in isolation" from other legal frameworks, including those which sanction consumer rights which contradicted the earlier ruling made by the Supreme Court. Judges have to ascertain the 'truth' against legal guidelines for ethical and moral behavior. In a paternalistic and feudalistic society like Indonesia, what is primarily right is not the law, codes of ethics, or other formal legal regulations, as the clauses are subject to human interpretation. Moreover, the clauses are limited; they cannot capture and regulate all the nuances of the reality or the case scrutinized, especially in Indonesia where people are more likely to use high-context

communication in which they do not always mean what they say and do not say what they mean (Mulyana, 2012).

Macro digital ethics

The Prita Case is a window into the dynamics of resistance to medical dominance and mis-alignment of societal institutions (i.e. legal institutions, hospitals and medical practice) and new forms of communication in the digital age. Through digital communication, Prita's personal views about the care she received were now front stage and public. In the media and legal debate swirled conflicting views about digital technology use in Indonesian society and the extent to which institutions such as the law and health institutions are in step with wider social expectations. At a macro level were media and public reactions to the adequacy of laws such as the *Law on Information and Electronic Transaction;* whether these can have the desired legal impact and provide a system to guide digital ethics in a changing social context. The following extract published in kompas.com is an example.

> "According to a senior lawyer... "the Supreme Court was insensitive to the condition of society in fulfilling the appeal of the prosecutor in the Prita case." The fact that the society has a high level of awareness and masters the use of technology was not considered by the Supreme Court" (kompas.com, July 10, 2011).

Furthermore the interpretation of *the Electronic Information and Transaction* Law throughout the Prita Case was contradictory. This is partly due to the fact that this law is relatively new and seeking to regulate a world where digital communication is fundamentally changing the nature of private and public communication. As well the Case was highly politicized. It coincided with the Presidential election campaign and candidates took the opportunity to align themselves with Prita and her growing popular support. In the following extract in the *Jakarta Globe,* and at the time of Prita's original arrest, the Vice President is cited foregrounding Prita's identity as a 'mother' doing something relatively innocuous by sending an e-mail.

> "Vice President Jusuf Kalla asked the police to review Prita's imprisonment, calling it "unfair' and saying the police and prosecutors should have examined the case more thoroughly before detaining her. 'You cannot just put a mother in jail for sending an e-mail,' Kalla said" (Kurniawati, *Jakarta Globe*, 2009)

At a more micro level, the conflict between Prita, the patient, and the Omni Hospital is a sequence of miscommunication. Core is a misalignment of healthcare provider and patient perspectives. As for the management of the hospital, some experts considered that the hospital's action in taking legal action is an instance of failure of the hospital's public relations; at odds with notions of consumer sovereignty in the business world. In effect, given the public attention to the Prita Case the hospital had committed public relations suicide. According to social construction ideas, individuals are regarded as active agents who determine their own destinies, but situated in a social context where meanings are subjectively interpreted, internalized and reproduced. Based on this perspective, and using Wittgenstein's metaphor, all the rules, norms and values used by a group of people, including medical doctors and administrators are different games played through different languages (Philips, 1987). Therefore, we have to appreciate the social context to capture contested 'reality' and various models need to be applied to understand any phenomena under investigation. Indonesia belongs to a high context and collectivist culture where individual concerns and public issues are not sharply differentiated (Mulyana, 2012) This is one of the explanations for why the case was so politicized.

Lessons Learned

No matter how many times we accessed media reports using the search terms "Prita Case" we found that the authors took the side of the healthcare consumer Prita. We suggest this reflects the support for Prita as an underdog challenging medical

dominance and a health institution representing capitalistic profit making agendas. Digital technology is changing the face of health consumer participation and opening up avenues for such challenges. However this change is set against the use of Indonesian law to reinforce medical privilege and silence health participation, as the Prita case shows.

A significant implication of the research undertaken in this paper is the importance of exploring the nature of communication between physicians and patients in Indonesia, which is an underdeveloped field of inquiry. Estimates are that close to 1 million Indonesians travel overseas, especially to Singapore and Malaysia, to receive medical treatment (Ormond, 2015). It is speculated that a main factor causing this phenomenon is the relatively weak ability of medical doctors and hospitals to communicate with patients leading to patients' dissatisfaction with their treatment. Quality health care will be even more significant in the future, as regional economic integration occurs with the advent of the ASEAN Economic Community (ACE). Unless physicians and hospitals in Indonesia improve their communication competence with patients, it is plausible that the number of Indonesians going overseas to get medical treatment will increase in the future, while at the same time making prospective patients from other ASEAN countries reluctant to seek medical treatment in Indonesia.

Indonesian Students' Academic Engagement in the United Kingdom

Sarah Aisha & Deddy Mulyana

The enrolment of Indonesian students in tertiary-level education overseas has undergone growth. Statistics has shown that the number of students grew more than 25% from 31000 in 2006 to 39000 in 2013, although there was slight decrease in 2011 and 2012. Furthermore, it was forecasted that in 2024, the number of postgraduate students in six destination markets, including the United Kingdom (UK), will upsurge from 9000 in 2012 to 21000 in 2024 with 7.2% annual average change (*Postgraduate Mobility Trends 2024*, 2014).

Despite the fact that literature contains large numbers of research covering international students, very little research focused specifically on Indonesian students. Previous studies that have examined Indonesian students were conducted in the context of education in the US (Mukminin, 2012; Mukminin &

McMahon, 2013; Mukminin et al., 2013), Australia (Bahri, 2013; Novera, 2004), Taiwan (Chen et al., , 2015), and Korea (Mulyana & Eko, 2017). None of these studies have investigated the Indonesian students in the context of education in the UK.

The UK, as the sixth most popular destination for Indonesian students, has attracted 1650 students in 2013 (UNESCO Institute of Statistics, 2015), most of them postgraduates and under scholarships (Indonesian Education Attaché, 2015). The number increased 78,6% from 2008, where only 924 students were enrolled. According to the Postgraduate Student Mobility Trends in 2024 (British Council, 2014), it was predicted that the UK will host 3500 Indonesian students in that particular year, having the strongest annual average growth of 9,3%.

Indonesian students entering another country, especially with the purpose of study, have to adjust themselves not only to the social and cultural norms in general, but also to the new and unfamiliar academic environment. Several studies have reported that Indonesian students overseas faced difficulties and academic challenges during their studies. Mukminin (2012) found that Indonesian doctoral students in the US experienced a phase of academic shock at the beginning of their studies. In another work, it was also reported that issues related to *academic engagement* were also faced, including the amount of academic work required, unfamiliarity with classroom dynamics and faculty - student relationships, issues with peers and academic tutors, and language barriers (Mukminin & McMahon, 2013). Meanwhile, Novera (2004) particularly noted certain issues associated with classroom interaction and student-teacher relationships in a study of Indonesian postgraduate students in Australia. She linked these issues to cultural differences in teaching and learning practice.

The difficulties and academic challenges faced by Indonesian students in other countries might also be faced by those studying in the UK.

Conceptualizing Academic Engagement

Little consensus has been made concerning the conceptualization of student engagement. Although various definitions of students' engagement are offered in the literature, it mainly falls into two main categories (Liu, 2013). While the first is related to a micro level of analysis—the individual's resource investment, the second is concerned with the students' evaluation of their institution, a macro level.

Definitions that fall into the first category refer to students' involvement in learning. It involves aspects such as physical and psychological energy dedicated to academic experience (Astin, 1984), time spent and effort quality (Kuh, 2009), active sense of participation (Harper & Quaye, 2009) and motivation (Stefani, 2009). Meanwhile, the second category focuses more on how institutions shape learning experiences which mostly come from education monitoring and researching institutions. According to Quality Assurance Agency (2016), for instance, student engagement is *'about you getting involved raising your views and shaping your perspective.'*

Finn and Kasza (2009) believed that there must be a clearly defined boundary of engagement. However, from the notion above, it appears that the definition of student engagement still lacks consistency. Thus, it was argued that the nature of student engagement itself is a 'metaconstruct'—an integration of several areas such as motivation, behavioral participation, and self-efficacy—that is complex and multidimensional (Fredricks et al., 2004).

Views of student engagement

In order to understand factors that might hinder and facilitate engagement, it might be useful to look at its potential influencing factors. This will be covered by discussing different views of engagement which includes the behavioral, psychological, and inclusive perspective.

According to the behavioral perspective, students' engagement comprises students' involvement behavior and institutional practice influences. Kuh (2009), proposing the most prominent framework, divides engagement into five benchmarks: the degree of academic challenge, active and collaborative learning, interaction between student and academic staff, enriching educational experiences, and supportive campus environment. This framework was used as a basis for developing the National Survey of Student Engagement (NSSE) in the US (Trowler, 2010) which was modified into other instruments used in other countries, including the United Kingdom Engagement Survey (UKES) and Australian Survey of Student Engagement (AUSSE). Having international students as her sample, Sakurai (2012) identified institutional factors that promotes engagement, which consists of teaching that promotes understanding, course organization and alignment with other studies, purposeful course assignments, students' supportive climate, and also topic related to interest. However, although it seems that this perspective is the most accepted within the Higher Education sector, several limitations were identified. Whereas institutional support services are considered essential, the student's psychological state of engagement was excluded (Wefald & Downey, 2009). In addition, it also fails to recognize other influencing factors within the individual.

In contrast, the psychological perspective, takes into account the role of widely researched individual factors associated with engagement, such as motivation (Maulana et al., 2016; Reeve, 2012), personality (Poropat, 2009), and self-theories (Yorke & Knight, 2004). Mainly dominant in school literature, it views student engagement as an internal process that changes over time and differ in intensity (Kahu, 2013). Engagement is mainly divided into three complementary dimensions consisting of behavioral, cognitive, and emotional engagement (Fredricks et al., 2004). Behaviorally engaged students would usually obey behavioral norms, including attendance and involvement in learning, such

as asking questions. Students who engage cognitively would be invested in their learning and understanding, acquiring skills, and implementing self-regulation and deep learning strategies. Emotionally engaged students would experience affective reactions, for instance enjoyment or interest (Furlong et al., 2003).Trowler (2010) proposed that these dimensions can have amplitudes, from positive to negative. This means that it is possible for a student to engage negatively along a certain dimension while engaging positively along others. On the other side, Gibbs and Poskitt (2010) viewed that being engaged emotionally and behaviorally is necessary for cognitive engagement. Although this perspective differentiates the state of being engaged and its antecedents or consequences, it also has limitations (Kahu, 2013). First, it was criticized for lacking differentiation between the dimensions. As an example, effort could be related to both cognitive and behavioral dimension. In addition, the role of external factors, such as the influence of the institution as a context was ignored.

Finally, the inclusive perspective usefully provided a comprehensive understanding of engagement in higher education institutions by incorporating valuable elements from both behavioral and psychological perspective. A powerful framework was proposed by Kahu (2013) emphasizing that students' engagement experience is influenced by both individual and institutional factors. The framework points out the importance of relationships as a psychosocial influence, more importantly between the student and academic staff, as previous studies have shown. Okorocha (2007) argues that having good student – academic staff relationships is the most important factor within the university community. Similarly, Smith (2007) views it as the core of learning situation. Besides, Kim (2011) explained that academic staff's personal interest in students' learning and achievement also influences engagement.

In addition, the impact of structural elements within the university were also recognized, such as curriculum and

assessment (Barneta & Coate, 2005). It also recognizes that study disciplines differ in terms of teaching and learning, manifested not only in different learning approaches (Nelson Laird et al., 2008) but also in different 'cultures of engagement' (Brint et al., 2008).

Meanwhile, it is note-worthy that instead of viewing engagement as an outcome of one of those factors, the framework emphasizes the complex interplay between them. Engagement is seen as dynamic and situational, as there is interdependency between its different dimensions. Additionally, it also recognizes the possibility of engagement as breeding more engagement.

Despite providing a better understanding of engagement, this perspective also has its limitations. Liu (2013) challenged this framework as she found that being engaged might also involve negative emotional experiences, which was not captured in the affective dimension of the framework. Thus, this suggests that further development of the framework is still needed.

Research on academic engagement of international students in UK

In spite of the large amount of literature on international students, little is known about their academic engagement (Korobova & Starobin, 2015). Trowler and Trowler (2010) suggested that 'the value of engagement is no longer questioned', yet international students are considered among those who might experience engagement negatively. Thus, having a picture of their learning experiences might provide support in understanding their learning process where engagement would take place.

In the context of UK higher education, international students' intercultural experiences were suggested as playing a significant role in their learning (Turner & Robinson, 2008). Moreover, the intercultural experiences which includes their learning characteristics could be viewed as being incorporated in their personal background, perception of learning situation, as well

as their learning approach (Prosser & Trigwell, 1999). Thus, this suggests that the Indonesian postgraduate students learning experience have generally come from how they perceive their experience as well as their own learning habits in their own cultural group.

As international students carry their own cultural background, they have to adapt cross-culturally to the new academic environment. Therefore, some degree of learning challenges will be faced. However, these challenges arose not only due to cultural difference, but also due to the unfamiliarity with the academic requirements of UK higher education institutions (Brooks & Walters, 2011). This issue has been investigated by several researchers. Ryan (2005) for instance, argues that international students face 'academic shock' because of the challenges faced regarding different academic culture and expectations. Moreover, Gu (2009) explained that non-western cultural background students face various problems when they have to adapt to the western teaching style. These problems are related to lack of academic skills, unfamiliarity with different teaching and learning approaches, and tension in student – academic staff relationships. However, it is important to consider that the sample were mostly Chinese. Meanwhile, Carol and Ryan (2010) noted that several challenges were experienced by the majority of international students in UK regardless of their cultural background. These challenges include language difficulty, critical thinking, and independent learning. This suggests that Indonesian students studying in UK might also face similar challenges. However, it is also possible that the challenges and engagement are unique, as influenced by their cultural experiences. Therefore, to further understand the academic engagement of this particular cultural group, it is helpful to look at the existing research.

Research on Indonesian international students within a Western context

A limited number of previous research focusing on the experiences of Indonesian students within a western context, such as US (Mukminin & McMahon, 2013) and Australia (Bahri, 2013; Novera, 2004) reported that these students faced academic difficulties. Common themes that appear comprise those such as linguistic barriers, academic workload, and relationships with academic staff.

Linguistic Barriers

Issues related to linguistic barriers were experienced within the areas of writing, reading, speaking, and listening. Although Bahri (2013) did not explore the issue further, both Novera (2004) and Mukminin and McMahon (2013) noted that writing was one of the most problematic areas cited. This includes choosing appropriate words and deciding the flow (Mukminin & McMahon, 2013). Limited by the questionnaire to gather data, Novera (2004) assumed that it was because of the grammatical and syntactical structure differences between Indonesian and English. However, conducting a more in-depth study using semi-structured interviews, Mukminin and McMahon (2013) attributed it to the lack of skills. Meanwhile, reading difficulties arose as the materials were perceived as requiring them to have advanced English comprehension level (Novera, 2004). Additionally, lack of speaking and listening skills were also mentioned as hindering factors in class discussions and presentations. For the former, it was related to unfamiliarity with the topic, nervousness, low self-confidence (Novera, 2004), lack of practice as well as personality factors (Mukminin & McMahon, 2013). Whereas the latter was related to the pace of speech which results in difficulty understanding the topics being discussed (Mukminin & McMahon, 2013). Interestingly, Mukminin and McMahon (2013) stated that except for writing, other linguistic skills were reported

to progress gradually overtime which built self-confidence and courage to take part in class discussions. However, it was unclear on what period of study the data was taken, which makes it difficult to indicate how long it took for the skill to develop.

Academic Workload

In a study investigating doctoral students in Australia, Mukminin and McMahon (2013) reported that the unanticipated overwhelming amount of coursework due within a limited completion time caused shock and stress, besides the high level of difficulty. It has hindered some of the students' full engagement, more specifically during class discussions as they failed to understand the reading materials within a limited timeframe. Similarly, the issue of academic workload was also noted in Novera's (2004) study, although the participants' degree of postgraduate study was unspecified. It was reported that time management issues was faced as they were not used to completing assignments while also having to read a lot. Although both studies reported similar issues, at this point it is useful to consider that the academic workload might differ between different levels of study, as well as different disciplines.

Relationships with Academic Staff

In terms of student - academic staff relationships, unfamiliarity with the nature of relationship seems to be highlighted as an issue. Novera (2004) reported that students' felt awkward having to address academic staff using first names. In addition, Indonesian students were noted to show reluctance in asking for suggestions, advice, or help regarding challenges and obstacles (Mukminin & McMahon, 2013), and also giving critical comments (Novera, 2004). In western education context, the latter might be considered as classroom passivity whereas in Indonesian context it is a culturally appropriate behavior (Novera, 2004). Using the concept of power distance (Hofstede, 2005), this was attributed to 'power distance' difference in Indonesian educational system,

which is more formal and hierarchical. However, Mukminin and McMahon (2013) succeeded to capture the possibility of more frequent engagement with academic staff overtime, as the students reported to feel more comfortable with the informal nature of relationship after one semester.

Despite lacking consensus in terms of conceptualization, various views of student engagement are useful in providing hints to understand the construct. In general, students' engagement is an outcome of various interrelated influences, which might include an individual, institutional, and also sociocultural factors.

A limited body of research concerning international students' experience indicates that these students face problems that might hinder their academic engagement, including linguistic barriers. Although similar issues were also faced by Indonesian students in a western educational context, some problems might differ from other cultural groups due to different cultural experiences. Therefore, their academic engagement experiences might also be different.

Conducting Interviews with Indonesian Students in UK

This research used a qualitative method. The overall purpose of the study is to explore the academic engagement of Indonesian international students within the context of the UK higher education institution. The study attempts to establish patterns both shared across contexts and unique to a particular context (Greene, 2005). In other words, it also recognizes the centrality of culture. Thus, it can provide better insights to understand the academic engagement of Indonesian postgraduate students in the context of their courses of study in UK higher education institutions.

As Klingner and Boardman (2011) suggested, the data obtained through a qualitative inquiry could add 'depth and

breadth' to understand the influence of contextual factors not available through the quantitative inquiry. It offers potential to better understand in what context and under what circumstances the students are engaged or disengaged in. Semi-structured interviews with 13 participants were conducted to collect the qualitative data. Besides offering flexibility and adaptability in the process of exploring an issue (Robson & McCartan, 2016), interviews allowed the researchers to understand the students' perspective (Flick, 2014).

The research participants were Indonesian postgraduate students undertaking Master's studies in the UK. They consist of five males and eight females. Most of participants ranged in age between twenties and early thirties. Six participants were obtained in 2016 from a database provided in the scholarship recipients' social network group.The other seven participants were obtained and interviewed in 2017.

The interview schedule contained open-ended questions related to the participants' academic experience within their course of study. The interviews were held in Bahasa Indonesia since the participants felt more comfortable expressing themselves orally in Bahasa Indonesia, although on several occasions English was used to express themselves. Interview excerpts were translated to English. Most of the 13 interviews were conducted at the location of the participant's choice, either at university or their place of residence. The interview sessions took place from June 2016 to September 2017.

Although timing was considered in all interviews, the length varied as some interviews were longer than others. In most cases, the interviews were approximately twenty to forty minutes except for one that lasted for over seventy minutes.

The content of the data gathered varied across 13 interviews due to different academic engagement experiences across universities and disciplines. In order to find the general pattern of the data, thematic analysis was considered as an appropriate method to use. As a practical method, it offers flexibility in

analyzing qualitative data through themes that emerged during the interview (Braun & Clarke, 2006). More specifically, it involves exploring the data based on relationships, commonalities, and differences across data sets (Gibson & Brown, 2009).

All the participants were undertaking Master's Degree. Five participants were studying in two London-based Universities, while eight were studying in other universities outside London: Birmingham, Bristol, Glasgow, Lancaster, Leeds, and Manchester. The participants were majoring in diverse fields of education such as Engineering, Business, Education, Anthropology, Journalism, and Psychology. Seven participants started their course in September 2015, while six in September 2016.

Analyzing Students' Academic Engagements

This subsection presents the results of analysis of the semi-structured interviews with 13 participants to explore the hindering factors and the facilitating factors of academic engagement.

Hindering factors of academic engagement

After conducting thematic analysis of the interview data, three main themes emerged as factors that have hindered the academic engagement of the students: sociocultural, institutional, and individual factors. The theme 'institutional' was further sub-divided into: Intense Academic Workload and 'Expert' or 'Boring' Tutors while the theme 'individual' was categorised into: Linguistic Barriers and Uneasiness.

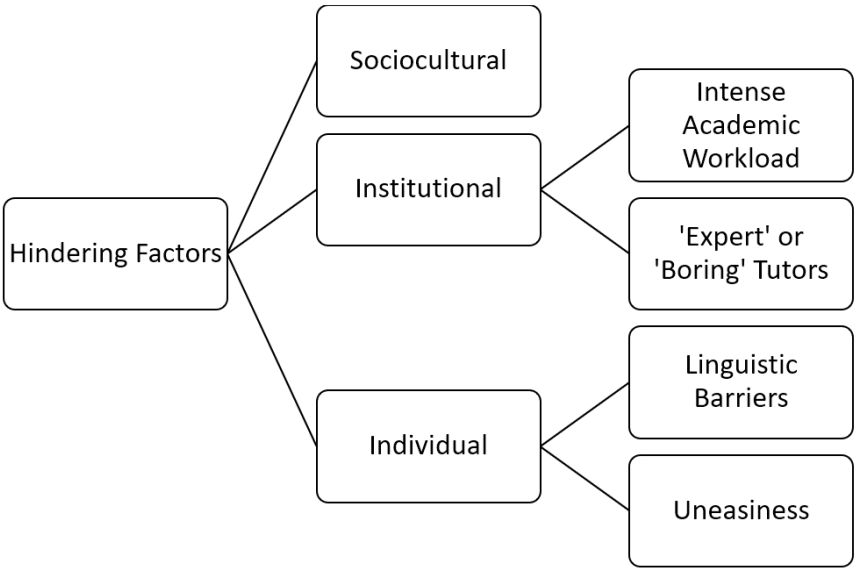


Figure 1. Academic engagement hindering factors

Sociocultural Factors—Adjusting to the new academic environment

While describing their engagement experiences, most of the participants talked about their transition to their new academic environment as challenging, especially at the beginning of the first term. They used words such as 'tough', 'hectic', 'dizzy', 'struggling', 'it needs courage and self-confidence', 'lack of guidance', 'tired', 'lonely', 'homesick', 'lost', and 'tense' to describe their transitional phase experience.

Having to adjust with a different academic culture was mentioned by most of the participants. More specifically, regarding the difference related to learning method, including the pace and the academic culture of reading and writing. A participant, for instance, pointed out that he needed to get used to the assignments and assessments given: *"The first term was challenging, [...] it was the time for adaptation with the life and learning method here. And there are also differences with,*

especially the assignments here and the assessment in Indonesia. In Indonesia, usually there are exams, but here it's 100% or 90% essays."

Hence, having to adjust themselves academically was not the only concern. In terms of social adjustment, some participants said that their challenge was related to not having social relationships, as they were the only Indonesian among other peers from other cultures, predominantly Chinese. For example, a participant described his experience: *"I was tense, I had a headache. First, because I had no friends here. And when I enrolled in my course, there were no Indonesians there. Then, here I hadn't got any close friends.*"

Institutional Factors

Intense academic workload. As each participant was enrolled in different course of study, the type of assignments also varied. Some had individual assignments whereas others had group assignments. Nevertheless, over a half of the participants talked about the challenge of having several assignments simultaneously given at the same time, which could include two or three assignments with deadlines close to each other. They talked about how it hindered them to work to their full potential as they had to 'juggle' between other activities, such as working on other assignments, attending classes, or learning other subjects. To illustrate, a participant expressed her experience in tackling her assignments: "*There were many (essays), and at the same time, there was group work… So, it wasn't the best actually. While working on it, ah, just finish it. […] What's important was for it to be done, so (I) could work on another one.*"

The 'Expert' and 'Boring' Tutors. Tutors, especially their way of delivering the lesson was mentioned by some participants as affecting their comprehension or interest towards the lesson. They said that they did not like a certain module because the

tutor's instructional practice was considered unsuitable for their level of understanding. In other words, the tutors taught them as if they already had good grasp of the subject. For example, a participant talked about why she did not like a certain module: "*The tutor was 'super senior'. So, he was too genius. He assumed that other people understood, everyone understood. Thus, in class it was next slide, next, you know this right? Next, ah, I don't need to explain this. So, he taught based on his intuition.*"

In addition, an uninteresting style of lesson delivery, such as 'boring' or using a 'flat tone' also affected the participants' interest. A participant explained that it made half the students in class fall asleep during the lesson.

Individual Factors

Linguistic Barriers. Unlike teaching and learning in Indonesian universities, the medium of instruction used in UK is English. Almost all the participants talked about linguistic barriers which have affected them during their study. The areas of linguistic skills mentioned include writing, speaking, listening, and reading.

Amongst the four skill areas, writing was the most frequent activity that the participants struggle with. The majority of participants stated that they faced problems when they had to write for exams or assignments. One participant stated, "*The journals were difficult to comprehend. This caused difficulties to write different academic essays.*" In particular, the difficulty mentioned was related to diction or essay structure.

In terms of speaking, some participants talked about their difficulty to express their thoughts in academic settings such as class discussions. One participant stated, "*We were required to give our opinions in our classes. It took us so much energy*". Another participant was aware of the difference of his English fluency in academic and daily settings, as he said that it was not as fluent as in the latter setting. Another participant attributed her difficulty to English as a foreign language: "*Probably because*

it's not, it's not our first, our first language, so […] it was really hard to talk, to convey my thoughts."

Besides writing and speaking, listening to lectures was also considered as challenging for some participants. One participant said, "The tutors spoke too fast that made me perplexed". In particular, certain accents have hindered them from comprehending lectures, as expressed by a participant: "*It's African English… It's so hard, right? The pronunciation, word per word. What was he talking about? Sometimes I couldn't get it.*"

More specifically, a participant who studied in Glasgow mentioned the thick, different, and strange accent of Scottish English that it took her much time to understand the language.

While these participants faced difficulty listening to certain non-standard English speakers, some other participants found listening to native speakers as more difficult. However, it was for a similar reason, pronunciation.

Additionally, reading journal articles was pointed out by a few participants as difficult for two reasons. Firstly, because they were not accustomed to reading as well as discussing reading; and secondly, because of specific terms contained in the articles. Thus, regarding reading skills, a few other participants emphasized that future Indonesian postgraduate students should prepare themselves for reading English materials, and develop reading strategies such as skimming and scanning so that they become used to it.

Feeling Uneasy. For a few participants, the feeling of uneasiness arose in large classes with people that they don't know well. They mentioned that it hindered them to convey their thoughts or take part in class discussions. One participant said, "*I was not confident to speak, especially when the class was large*". Another talked about his fear of being judged by his classmates that he hasn't known well while another mentioned about feeling intimidated, as she put it: *"In large classes it is really difficult. It's like the room was really big, there are many people, and […] hard to*

carry yourself. I think it's a psychological factor. It's so intimidating."

In addition, in terms of not taking part in class discussions, another participant mentioned that it was because he was still processing the information given by the tutor, as he said, *'My mind was still thinking about the previous point, I was like… dragged.'*

Facilitating factors of academic engagement

In terms of factors that have facilitated the academic engagement of the students, only two themes emerged during the interview data analysis, consisting individual and institutional factors. These themes were also divided into sub-themes as presented in Figure 2 below.

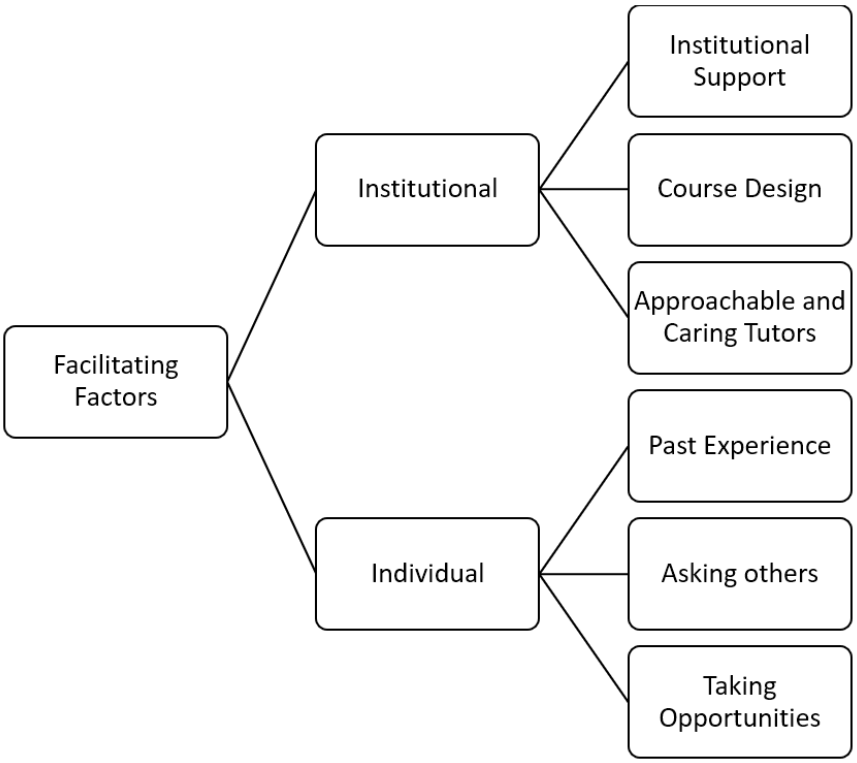


Figure 2. Academic engagement facilitating factors

Institutional Factors

Institutional Support. The presence of either academic or non-academic institutional support were mentioned by some participants as helping them through their studies. The academic support includes academic writing workshops, one-on-one tutorials, and easy access to computers and academic journals in libraries, to help the participants write essays. In addition, non-academic support provided by academic staff or counsellors has also helped several participants go through their studies, by talking and sharing about their performance, expectations, as well as challenges faced. To give an example, a participant described the support provided by his program director as well as the course director:

> "They gave suggestions so that your adaptation could be smoother… Then, the personal tutorial which was not about our study, in the beginning and middle of the course, it helped a lot. They gave us time slots… we just need to fill in our names, so we had a chance to come to them."

Additionally, one participant appreciated the fast internet, the many electric outlets, the vending machines, and the close distance cafeteria provided by the university. Another mentioned e-mails sent to her every week informing her non-academic programs, such as mindfulness classes, provided to support the students well-being.

Course design. Having group tasks has given several participants opportunities to collaborate and discuss course materials with their peers as they have group meetings outside class. In addition, having a system in which students were given responsibility to become a panelist was seen by a participant as a 'forcing' him to prepare himself more and take part in class, as he said: "*What helped was this, the schedule for becoming panelists was very good, because it was like we were forced to contribute*."

Approachable and caring tutors. Some participants mentioned that having a close relationship with a tutor made them feel more comfortable, as they could express themselves more freely without hesitation. A few participants emphasized that the tutor's personal approach is a significant factor for them while learning. For example, a participant talked about how his tutor influenced him to put in more effort:

> "The tutor contributes a lot in whether I learn the subject or not. If the tutor is interesting, easy to understand, and if he remembers your name, I'll give a lot of effort. I will really like the lesson. I mean, the personal attention he gives [...] So, it's actually a simple thing, but other tutors don't do it."

The characteristics of the tutors reported were those who not only talk about academic matters, but also about personal and life matters, such as family, future goals or other things such as holidays or how they were doing.

Individual Factors

Having previous experience. In general, for the majority of the participants, their second term was perceived as better compared to the first term. They explained that they 'have learned from the first term'. Some participants mentioned that they have learned learning strategies that work better for them in order to enhance understanding of the subject or meet the course requirements, as one of them put it, "*I understand better of what I should understand*," while another said, "*I could plan things better since I have experience from the first term, it helped a lot*."

Additionally, another participant pointed out that she could manage her readings better since she already had better comprehension by reading many materials during the previous term. While most participants emphasized that previous learning experience during the first term has helped them to adjust better academically, one participant stressed that it helped her socially, to interact with peers in her class by knowing what topics to talk about.

Asking others. At some point of their study, most of the participants have experienced facing problems while feeling unsure of how to tackle them. These include personal or academic issues, such as how to do a certain assignment, or inadequate understanding of course materials. Some participants said that asking other people have helped them faced their difficulties.

Academic staff and peers were the most frequently mentioned as sources they go to when addressing their academic concerns. In terms of the former source, a few participants mentioned that they asked them concerning reading recommendations for their essays. A participant asked for reassurance on whether his assignments matched the tutor's expectations. Another participant said that she talked with a student adviser when she had difficulties in doing assignments. In addition, asking peers in order to get insights or to have better comprehension was also mentioned by the participants. More specifically, the ones that they identify as *'smart'*, as described below:

> "...when I face difficulties I asked the boss, the highest level of the "food chain", the smartest in class. I started to ask him, but not too much."

> "To get academic assistance, I talked with doctorate students from Indonesia and other international students."

In fact, asking help from other sources was also mentioned. A participant said that asking former colleagues in the related field has given her insights for her assignments. Meanwhile, in relation to personal concerns that might affect her study process, asking help from a counsellor also supported her. In brief she pointed out, *"identify your problems, and find a person that might be able to help you*."

Eventually, asking around has also been the most cited suggestion for prospective Indonesian postgraduate students. Some participants stressed that it is important for these students to know what they will face, including 'the environment, the people, and the education'. Seeking information from various

sources could help them to 'survive' in the new environment. However, one participant emphasized the importance of considering the type of question asked, as she said: "*We cannot ask general questions or come emptyheaded. You're going to be slaughtered, because the academic culture is, you ask something that you don't know because you have done research before you asked.*"

Making the most of the opportunity. Not all Indonesians have the chance to get a scholarship and become a postgraduate student in the UK. Thus, some participants said that they have put in more effort or took chances to participate in class activities and discussions because they realized the opportunity and wanted to make the most it, as a student put it, "*I know I am here to learn.*" A participant talked about taking the 'rare' chance to speak in front of classmates from other countries, while another described his effort to keep coming to a class although it was not compulsory. In addition, a participant expressed that although she struggled, she put in effort as she wanted to make the most of the opportunity to access knowledge: **"***This is the chance for me to learn all of that, which I might not have access to in Indonesia. […] even though I was dog-tired, […] because this chance might not come again.*"

Additionally, a participant reported wanting to enrich her experiences by taking the opportunity to engage in extra-curricular activities, such as competitions and projects.

Findings from this study indicate that the most frequent activity students engage in is related to connecting ideas with their previous experience and real-world problems. This is unsurprising since connecting learning to real-world problems might support these students when they return to their home country as they are required to contribute to the acceleration of Indonesia's development. Besides, they also reported frequently working hard to master difficult content and meet tutor's expectations. This finding was also expected, as the condition of their scholarship requires them to put in effort to achieve

academic grades needed. Taking a psychological approach to describe the state of engagement (Fredricks et al., 2004), it was indicated that the students were most frequently cognitively engaged as they invest effort in learning and apply deep learning strategies. However, it might also suggest that they were behaviorally engaged while working hard.

On the other hand, it was also shown that the students engaged less frequently on activities related to interactions with academic staff. This issue was also highlighted in previous studies involving Indonesian students overseas (Mukminin & McMahon, 2013; Novera, 2004). However, it was indicated that other reasons lie beyond the unfamiliarity of the nature of student – academic staff relationship. Indeed, previous studies have pointed out the important role of intercultural experiences in learning (Turner and Robinson, 2008; Prosser and Trigwell, 1999). While there is possibility that having previous experience studying in Indonesia—a higher 'power distance' sociocultural context—might affect the students' academic engagement, other factors might also play a role. Based on the limited interview data available, students' interactions with academic staff that have occurred was indicated to be influenced by a more engaging environment, such as the opportunities of having individual tutorials. However, at the same time, it also seems to be influenced by factors within the students, such as motivation, manifested in having the initiative to engage themselves through those tutorials. Thus, this implies that engagement is also influenced by both institutional and individual factors, as proposed by Kahu (2013).



An Indonesian student in London, UK, with her family (Photo: Deddy M)

Interestingly, some of the participants frequently interact with peers while working on course projects and assignments yet not few reported the opposite. Based on the interview, it was indicated that some courses put more emphasis on individual work, while others had more group project or assignments. Thus, it seems to show the role of a structural influence within the institution, which will be discussed further in the discussion of the facilitating factors of engagement. Nevertheless, in general, Indonesian postgraduate students' academic engagement within their course of study seems to be dependent on other challenges and interrelated factors that might hinder or facilitate engagement.

Indonesian students overseas have to adjust themselves to a new social as well as academic environment with a different culture. Previous studies have documented 'academic shock' experienced by Indonesian students in a western academic context (Mukminin, 2012; Novera, 2004). In this research, some

participants reported feeling 'lost' and 'confused' at the beginning of the term, suggesting they have also faced 'academic shock'. Thus, this sociocultural factor might become a barrier to fully function as a postgraduate student within their course of study as they had to adjust themselves with the demanding academic requirements. Additionally, this finding is also consistent with earlier studies regarding challenges due to cultural differences faced by international students in the UK (Brooks & Walters, 2011; Ryan, 2005).

Previous studies taking the behavioral perspective have also stressed institutional influences towards engagement (e.g. Kuh, 2009). In his proposed framework, Kahu (2013) divided it more specifically into psychosocial and structural influences. The first psychosocial influence identified as a hindering factor in this study was related to academic workload. It was found that participants could not engage fully in their tasks or class activities when dealing with amount of academic workload simultaneously given within a limited timeframe. This was similar to the experience of Indonesian postgraduate students in Australia (Novera, 2004) and US (Mukminin & McMahon, 2013). Meanwhile, in certain circumstances, the tutors' instructional practice as another psychosocial influence also seems to contribute as a hindering factor. In Sakurai's (2012) study, teaching that encourages understanding was found as one of the factors that promotes academic engagement. In a sense, the finding in this study was broadly consistent with that of Sakurai's (2012) as some participants reported disliking modules delivered by tutors in a way that was boring or too difficult for the students' level of understanding. This implies that it has affected the students to be disengaged emotionally as they lost the sense of positive affect.

In addition, individual factors were also found as hindering engagement. Although the participants have passed the IELTS test as a language requirement to enrol in their courses of study, linguistic barriers were reported as an issue. Previous studies have pointed out similar barriers faced by international students

in the UK (Carol &Ryan, 2010; Liu, 2013). In line with Mukminin and McMahon (2013) and Novera's (2004) study, writing also tended to be the most problematic area for these participants, mainly because they were not used to the activity as it was not an academic culture in Indonesia. Furthermore, speaking and listening barriers were also reported to hinder engagement in class discussions and activities. However, it was unexpected that the variety of English accent and pronunciation were reported as the reason behind the issue. Thus, good English listening skills itself might not be sufficient, as the university community is increasingly becoming more diverse contributed by the globalization of higher education (Walker, 2015). This suggests that intercultural communicative competence also needs to be developed in order to support successful communication with people from other cultures.

Although less mentioned, feelings of uneasiness arose in certain circumstances, such as in large classes, was also reported to hinder engagement. Participants felt hesitant to take part in class discussions, despite reporting themselves as paying attention to the lesson. It suggests that these students might appear as disengaged behaviorally while engaging cognitively, which supports Trowler's (2010) proposal.

Overall, it was indicated that the participants were able to adjust themselves better in the second term. They reported that they have already learned from their experience during the first term and understood how the academic system works which enabled them to organize their learning better. This suggests that they have already integrated with the new sociocultural context which facilitated them to engage more in their course of study. This might also be supported by institutional and individual factors found in this study.

In relation to institutional factors, institutional support services as a psychosocial influence seem to play a significant role in helping engagement, as participants perceived benefitting from it, for instance in terms of writing essays. This indicates that

the participants' writing skills have improved overtime, which is in contrast to findings in Mukminin and McMahon's (2013) study. Previous studies (Okorocha, 2007; Smith, 2007; Kim, 2011) have indicated that another psychosocial influence, relationship between academic staff – student is the most important factor in learning within the university community.

In line with that of Kim (2011), it was also found that tutors adopting a personal approach might also facilitate engagement, as participants expressed enjoying the lesson more and willing to invest more effort. This might imply that affective engagement was bred, as they felt more comfortable interacting with the tutor, which rose their motivation to work harder. Thus, it seems to support the idea that engagement breeds engagement (Kahu, 2013). In addition, study discipline as a structural influence also seems to facilitate engagement. Similar to previous studies (Lam et al., 2014; Nelson Laird et al., 2008), teaching and learning also differ across the participants' courses of study. It was indicated that some participants had more opportunities to engage in learning with their peers while others do not. In addition, some that were given roles and responsibilities in class activities were also 'forced' to learn more about ideas and take part in class activities. This might imply that the students' academic engagement was also facilitated through courses that promotes collaboration and deep learning approach.

The main individual factor found to facilitate engagement was having the initiative to ask around from various sources and realizing to make the most of the opportunity. The former could be seen as a form of behavioral engagement, as students interacted with the university community to ask for information, advice or suggestions. As a result, asking around has facilitated them to engage in another area, for instance in relation to their assignments. Numerous research have investigated the influence of motivation and self-determination towards students' academic engagement (Maulana et al., 2016; Reeve, 2012). It seems the participants' initiative to ask around has been driven by their

motivation. In addition, realizing that the participants have to make the most of the opportunity also seems to indicate the role of their self-determination to maximize their learning experience.

Lessons Learned

This study has shed a light in enriching literature of Indonesian international students by providing a snapshot of Indonesian postgraduate students' academic engagement in the UK. In general, students were found to be more engaged in some areas and less engaged in others. Several interrelated factors were indicated to contribute in either hindering or facilitating their engagement. However, further studies are needed to provide a more complete picture of the engagement experiences and understand its dynamic and situational nature in various circumstances.

Indeed, the academic journey in this new sociocultural environment was found to be a challenge for these students. Thus, various strategies need to be done to enhance engagement by maximizing facilitating factors while minimizing hindering factors. Nevertheless, the responsibility relies on all parties: the students, the institutions and the scholarship provider. If all parties play their role, hopefully it will lead to optimized learning empowering these students to become impactful change makers for the betterment of the beloved home country, Indonesia.

Communication Patterns of Indonesian Diaspora Women in Their Mixed Culture Families in Australia

Sri Seti Indriani & Deddy Mulyana

Indonesian Diaspora living in Australia is not at all new as Indonesians have been going in and out of Australia for decades. Indonesians go to Australia for various reasons: trading goods, studying and even because of international marriages. Since the 1970s these international marriages have involved Southeast Asian women. Such intercultural marriages have increased significantly in the past 10 years especially in Southeast Asia.The phenomena also happened during the colonial period through World War II, particularly international marriages involving Filipino women and US military men. These women were known as 'war brides'(Constable, 2003; Fresnoza-Flot, 2017; Robila, 2007).

There is a diversity of terms referring to marriages between two individuals of different nationalities and ethnicities. This research is focused on 'international marriages', namely, marriages between individuals of different nationalities and

ethnicities, which may be preceded or followed by the migration of one partner to the country of residence of another (Fresnoza-Flot, 2017).

The number of Indonesian people who had officially become residents in Australia reached 63,159 people, or 0.3 percent of the total population of 21 million citizens (Wijaya, 2013). This is supported by Graeme Hugo who stated that more Indonesians are migrating to Australia and marry citizens there (Wijaya, 2013). There are many reasons why international marriages occur more nowadays. In the 21st century the development of transportation and communication technology makes it easier for people to move around (Robila, 2007; Venus, 2013). By the year 2000, communication technology through internet agencies gave access to email-order marriage trade, and the business of matching mostly Western men with women from Asia (Constable, 2003; Robila, 2007). Other possibilities relate on the increased mobility of people involved in tourism, business travel, short-term employment or international study (Jones & Shen, 2008). The people living outside their home country were referred to as Diaspora. The information above assumes that more Asian women were married to western men than Asian men married to western. This assumption is the reason why the research focused more on Indonesian diaspora women. Thus, Asian women have frequently been conceptualized in colonial, academic, and postcolonial studies (Khondker, 2005).

Diaspora is the term used to identify people who immigrate to another country. Indonesian diaspora constitutes Indonesians who live abroad. There are four types of diaspora in Australia; (1) Indonesian citizens who live abroad, but have Indonesian passports legally, (2) Indonesian people who have become Australian citizens by a natural process and do not own Indonesian passports, (3) foreigners who have parents or grandparents that are from Indonesia and (4) foreigners who have no blood relation with the native Indonesian people, though they have a sense of extraordinary support towards Indonesia (Muhidin &

Utomo, 2016). However, researchers have been arguing about the meaning of the Indonesian diaspora itself over the years. The Indonesian government, through the Presidential Regulation No. 76 of 2017, stated that the Indonesian diaspora includes whoever is living abroad, despite for a short period (Oktafiani, 2019). Diaspora is a continuously created, transformed, and maintained metaphor to redefine a nation's identity (Naufanita, Yudomo, & Soetjipto, 2018).

The explanation above assumes that Indonesian women living and marrying in Australia are Indonesian diaspora women. Having an international marriage means that the people inside the family need to be committed to accept differences from each other's background especially their nationality and language. These backgrounds also include beliefs, values, norms, and culture from where they come. This means that the diaspora women need to have competence in intercultural communication. Culture in its broadest sense is cultivated behavior; that is the totality of a person's learned, accumulated experience which is socially transmitted, therefore culture is communication and communication is culture (Atkinson, 2017). Intercultural communication also relates to value differences at the individual level, which can be confusing, as well as the social level which are often complemented by stereotypes. These values that the migrants take for granted often do not fit when they live in the new country.

Indonesian Diaspora women in Australia may face challenges in communicating meanings of verbal and nonverbal symbols which are different from one another. The verbal symbols are the language that they use. Welch (2006) stated that language is more than a medium for communication; it is a cultural resource. Language is able to give context to thoughts, interactions, and social identities. In brief, language is part of a country's culture (Atkinson, 2017). In this context, couples with different cultural backgrounds may be referred to as a mixed culture family. Members of these mixed culture families include the Indonesian

diaspora women, their partners who are native-born White Australians, and also the children. These members give their own interpretations and meanings to the exchanged symbols. They would then mutually agree on the interpretation of the symbols. Interpretation allows oral communication between two or more persons who do not speak the same language (Atkinson, 2017). Interpreting language is complicated due to differences in meaning (Atkinson, 2017). Such complex communication patterns may also be found in mixed culture families as the subjects of this study.

Intercultural Marriage in Perspective

Intercultural communicators inside a mixed culture family need a competence that grows within the family. Research by Tili and Barker showed that communication within international marriages was primarily influenced by personal growth, language fluency and the differences between high-context and low-context communication styles. The additional influence of self–awareness, open-mindedness, mindfulness, showing respect, self-disclosure, and face-support also emerged (Tili & Barker, 2015).

Rosenblatt and Stewart in relevant research about challenges in international marriages showed that the most significant challenge was when the woman lived in the man's home country where she would deal with specific areas of cultural differences (Rosenblatt & Stewart, 2004). It is likely that the Indonesian diaspora women also had to deal with cultural differences in Australia. These difficulties might begin in the early stages when they enter the new country, the worst stage taking place later which is called culture shock. Culture shock is a phenomenon that second language learners face when relocated to another culture (Delahoussaye, 2016). It is a physical, psychological, and behavioral reaction that often occurs when individuals are

attempting to live, work, or study in unfamiliar cultural contexts (Rise, 1993). This phenomenon happens when someone needs to adapt to a different background culture. Language differences may become their first obstacle in adaptation.

Tili and Barker examined the process of developing intercultural communication competence with particular attention to cross-cultural differences in communication patterns (Tili & Barker, 2015). Cross-cultural is a term when we compare two or more different cultures or cultural areas. The research showed that there were several differences in verbal and nonverbal communication patterns between the two cultures. Intercultural communication competence develops differently across cultures. This competence involves interrelated cognitive, affective, and behavioral components of intercultural communication. They are interrelated and influenced by culture-specific aspects.

Tseng suggested five general patterns of adjustment in marriage between culturally dissimilar partners. First, one-way adjustment, where one party adopts the cultural patterns of the other. Second, alternative adjustment, where both parties want their culture to be followed. Both cultures are applied as wholes or in some aspects. Third, mid-point compromise, when both parties negotiate a compromise at the mid-point of their differences. Fourth, mixed adjustment, when both parties mix the two cultures, and fifth creative adjustment when both parties give up their original cultures and decide to invent new behaviors for their marriage. Tseng suggested a new term as a new pattern of intercultural adjustment which he termed 'simultaneous adjustment', where both partners try to adjust to each other's cultures so that there is a mutual adjustment (Tseng, 2012). This research is about intercultural communication where Indonesian diaspora women adjust within the mixed culture families, which may relate to different communication patterns.

While many types of research explore problems around this issue, research specifically from the Indonesian women's perspective has hardly been found, especially regarding Diaspora

Indonesian women. Vast majority of research discusses the impacts of the diaspora on the development of their home country, the migration pattern of Indonesian diaspora globally, and the most study concluded that wherever they are, Indonesian diaspora maintains various forms of their cultural identity (Narottama & Sudarmawan, 2017). However, based on a phenomenological stance, one study from Indonesian diaspora women's perspective (Pratamawaty et al., 2018) indicates that of the seven Indonesian women married to white men, all the subjects admitted that they were treated as equal by their White husbands. In their marriages, these women redefined their gender roles to adjust themselves to the principle of equality as embraced by their husbands. The study found four patterns of this cross-cultural marriage equality: *the partial equality, the natural equality, the absolute equality*, and *the pragmatic equality*, although these patterns are not mutually exclusive.

Assuming that the Indonesian women in Australia married to men from different cultural backgrounds are very creative and innovative in adjusting themselves to their new cultural situation, the theory of Symbolic Interaction from George Herbert Mead (1863-1931) is used in this study to explore their language creativity.This theory emphasizes one of the essential human characteristics where humans are active in exchanging meanings of symbols (Mulyana, 2018).

This perspective argues that humans being are highly active in interpreting symbols to understand each other. These symbols comprise verbal symbols (language) and nonverbal symbols such as body language, ornaments used by the person, physical distance, paralanguage, and the use of time. Humans understand meanings through communication processes and modify these meanings through an interpretation which may lead to the change of their behaviors. In other words, an individual responds to a symbolic situation, where the meaning is a product of social interaction. The meaning of an object or behavior is not attached to the object or behavior. It is negotiated through the use of

language. The meaning interpreted by an individual can change from time to time in line with changes in the situation found in social interaction (Mulyana, 2018). To reiterate, the theory of Symbolic Interaction is deemed suitable to investigate how the Indonesian Diaspora women in Australia interpret meanings through their interactions within their mixed culture families, either with their husbands/partners or with their children.

Approaching the Mixed Families

This research used a qualitative method with a phenomenological perspective where symbolic interaction is one of its variants. The phenomenological perspective was used because it explores a phenomenon in detail experienced by individuals in their real-life situations. It concludes with a description of the essence of 'what' they experienced and 'how' they experienced it. Littlejohn and Foss (2013) describe that each individual interprets his/her own experiences in his/her lifetime until in one point of life where he/she understands the world or 'life' from his/her personal experiences (Littlejohn & Foss, 2013). Creswell (2013) explains some features of a phenomenological study where a phenomenon experienced by a group of individuals needs to be explored and discussed. This relates to the individual's experience and the meaning of that experience.

There are two considerations in the essence of an experience. First, every human experience is a statement of consciousness and second, every form of awareness is always an awareness of something. Creswell also pointed out the importance of researchers not to include their own experience of the phenomenon. Another feature suggested by Creswell is the way researchers collect data. Researchers get data through in-depth interviews and analyze all data obtained following a systematic procedure. The analysis starts with detailed descriptions of the "What" and "How" of the phenomena experienced (Creswell, 2013). Thus, the model of

research is inductive, resulting in a set of propositions or themes.

The participants of the research are Indonesian diaspora women who have lived in Australia for more than five years. Researchers used the purposive sampling technique to seek out participants with particular characteristics according to the needs of the research. In-depth interviews were conducted in Australia. Researchers interviewed and recorded 13 informants, where each informant was interviewed two or three times, each with the duration between two and three hours. To protect their confidentiality, their initials have replaced all names. Other data collection techniques included observation and documentation studies. Additional interviews and member checking were conducted through online social media and when some were visiting Indonesia. Most informants were interviewed in the Indonesian language (which then was translated into English for this research by the researchers) while two informants (MK and TT) were in English. At the time of the research, each informant had experienced married life with an Australian citizen. These informants consciously experience barriers to language differences in communication. Some informants generally do not have sufficient understanding of English, because they come from remote areas of Indonesia where they did not receive English lessons at their schools. There are even some informants who claim to initially "hate" English because it is difficult to understand English lessons at school.

Some of the informants have children from their previous relationships. Some of their spouses or partners were married before and had children. Table 1 shows demographic data on the participants.

Tabel 1 Participants' Demographic Data

No.	Intial	Imigration Year	Spouse/ Partner	Status Family	Children born in Australia	Children born in Indonesia	Notes
1.	**ES**	1990	Minority immigrant from the Netherlands	Extended family			Both have their own children from previous marriages, and the children do not live with them anymore.
2.	**MW**	2009	Native-born White Australian	Extended Family	1		Husband has children from previous marriages, but the children live with his ex wife/ partner
3.	**TSY**	1978	Native-born White Australian	Nuclear Family	1		
4.	**MT**	2011	Native-born White Australian	Extended Family		1 (immigrated to Australia after high school)	MT does not have a child from her current husband, but from her ex-husband. His husband has 4 children from previous marriage born in Australia but do not live with them.
5.	**TS**	1980	Native-born White Australian	Nuclear Family	2		

6.	**TSE**	1999	Native-born White Australian)	Extended Family	3	1	2 children born in Australia from her husband's previous marriage 1 child born in Indonesia from her previous marriage
7.	**TT**	1994	Native-born White Australian	Nuclear Family	4		
8.	**MK**	1999	Native-born White Australian	Extended Family	3		All 3 children are from her previous marriage
9.	**MMY**	2009	Native-born White Australian	Extended Family	1	1 (from her previous marriage)	
10.	**MYN**	2006	Native-born White Australian	Extended Family			Both have children from their previous marriages but do not live with them
11.	**MY**	2007	Native-born White Australian	Nuclear family	1		
12.	**MM**	2003	Native-born White Australian	Extended Family			Both have children from their previous marriages, but do not live with them
13.	**MF**	2002	Native-born White Australian	Nuclear Family	2		

The data analysis followed a systematic procedure discussed by Creswell (2013). The researchers began with a full description of the personal experiences of each Indonesian woman classifying and categorizing them into themes.

In the end, the researchers wrote a description of 'What' the

Indonesian Diaspora experienced regarding the phenomenon of communication used in the mixed cultural families in Australia, and 'how' they experience it. The researchers then wrote a descriptive composition about the phenomenon, which is the 'core' presenting the conclusions of the phenomenological research.

Data validation technique of phenomenological research could be verified by sending research results to informants and asking them to correct and give different inputs (Kuswarno, 2009). The researchers verified the results of the study when some participants came to visit Indonesia. Researchers discussed the results of this study, and received feedback from them. Researchers also conducted further discussions with other participants via email and online media such as WhatsApp.

Developing Themes of Mixed Marriage

Based on in-depth interviews with and observations of Indonesian diaspora women within their mixed culture families in Australia, researchers found typical verbal and nonverbal patterns of communication, this study focused more on the verbal communication. More specifically, their verbal communication is classified into five patterns, each being interrelated with one another: (1) pure English, (2) mixed language between English and Indonesian, (3) unstructured grammar English, (4) compliments/ appreciation words and (5) obscene words or swearing. The rest of the family, especially their husbands or spouses, also use the same patterns understood by each other. The symbolic interaction theory perceives humans as active in exchanging meanings of symbols (Mulyana, 2018). These communication patterns are built because human beings are highly involved in interpreting symbols to understand each other.

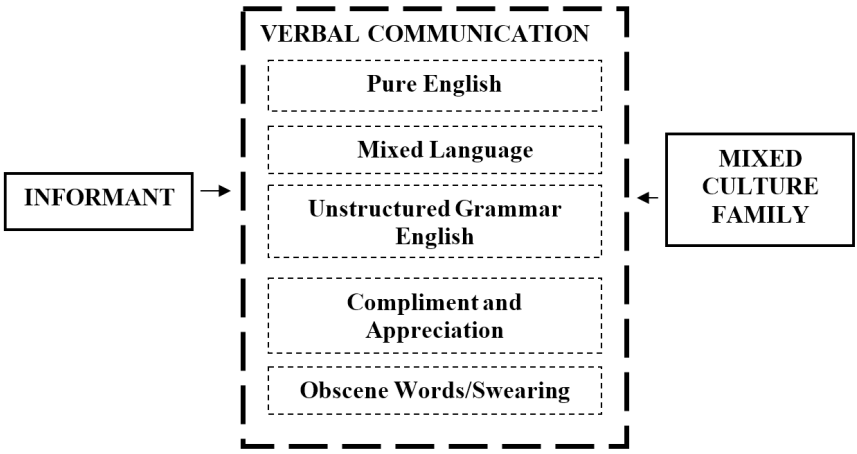


Figure 1 Model of Verbal Communication patterns within a mixed culture family

The use of these categories of verbal communication is also based on the situation, whether the informants were talking to their children, their husband or with other members of the family, or whether they were having frictions or not. Obscene words were more likely to be used in a conflict situation, while in a normal condition, compliments and appreciation words were used more. This model of communication to some extent involves intergenerational relations, although this study only focuses on their communication patterns as delineated below.

Pure English

Most informants who have children explained that they usually used English only when they communicated with their children. The informants who had young children were MK, MW, MY, MYN, and MF. Informants TSY and TT had adult children. They described having spoken English when their children who were younger. The use of pure English means that they do not mix with any other languages, especially the Indonesian language, in communicating with their children. The main reason they spoke pure English was that they did not want to create confusion for

their children. Some believed that having English as their first language was more important as the children lived and socialized in Australia. Some informants did not want to force them to have both languages side by side, but they decided to give that decision to their children themselves. The other reason was that when their children started school, their English skills would improve quickly. This resulted in a tendency to slowly forget their Indonesian language.

The parents in this mixed culture families seemed to make language as a priority. The role of grammar is quite important here. They are afraid their children will not get a proper language, especially in English.

> "No, I am not teaching him..I just want him to focus on his study. When he wants to do that, when he [her son] has it as a school language, then he can have that option. When mom comes here, Paul [MY's husband] gets concerned, because he doesn't want him to be confused, he wants him to do well in his English first before you know ... but um I am hoping as he gets older he wants to do another language but I know he can pick it up.. he is the type of boy that can pick it up and then he remembers." (MY)

MY has a son that is still in elementary school. Her husband and she agreed to have their son focus on English. They communicate with their son in pure English without mixing it with the Indonesian language. MY always spoke English with her son, even though they were gathering with Indonesian people at an event. MF also believed that it was useless to teach her children Indonesian, as the English language would be used on a daily basis. She also said that having her children speak English helped her to improve her own English skills.

TSY who gave birth to her son in Australia taught him English as his first language. She explained that the environment gave so much influence on how her son communicated. The English environment made it harder for the child to grasp the Indonesian language. She admitted that she and her husband spoke English

with their son. *"I use English, but back then when there were some guests coming to our home and my son was a bit naughty, my husband would say..'Don't be naughty' in Indonesian language and that was it*" (TSY).

TSY did not socialize much with the Indonesian community so she believed that her son didn't really have a way of learning the Indonesian language. Observation showed that TSY in her daily life had slowly forgotten her Indonesian language. She also had some difficulties in answering the interviews in the Indonesian language. She had forgotten most of her Indonesian vocabulary and made lots of pauses during the interview. Her accent was also more like an Australian.

MK, on the other hand, explained that she had no problems in speaking English and had always spoken pure English to her children. She stated when she grew up in Indonesia, her family made English as their main language. Based on that experience, she decided to do the same with her own children. MK explained that even though she inherited English, her Indonesian language was fluent because she grew up in Indonesia.

> "The problem is.. my family also communicate in English. Even though in daily life, Mom speaks in English. I grew up in an English environment. The kids will not listen enough, or sometimes if I say something in Indonesian, they just walk away you know." (MK)

MK once tried to speak Indonesian with her children but she failed completely. She realized that none of her children was listening to her and actually left her talking by herself. She admitted she didn't really try hard to teach the Indonesian language to her children. All three of them were born and grew up in Australia and had only gone to Indonesia a few times.

> "To communicate.. they can't speak Indonesian, the girls can't speak Indonesian. I guess because I don't have anybody else to speak Indonesian with at home. I don't really speak, but the culture? It's always there. Like um.. food, you know we actually introduce them to food, and to gatherings with the Indonesian community ... like 17

of August [the Indonesian Independence Day], Hero's Day, So they know." (MK)

MK also said that she didn't use much Indonesian because she didn't have any friends to talk in Indonesian within the family. She mostly socialized with Australian citizens. But she insisted that Indonesian culture was always in her heart and that she introduced Indonesian culture to her children through food and celebration of Indonesian holidays.

Mixed language

The mixed language here is defined as using both Indonesian and English together at the same time. Either the speakers use some words of a mixture of English and Indonesian in one sentence or responding to other one's sentence in a completely different language. Some informants in their mixed culture family didn't use pure English with their children; they believed that having to understand two languages was not a problem. This pattern is completely different from that used by MY, MF, TSY and MK who used pure English in their mixed culture family. The combination of Indonesian and English language was used more on a daily basis by MYN, TSE, MW, and MMY. This became possible as some of their husbands/partners had lived and worked before in Indonesia and also had been forced to study and learn about Indonesian culture and language and so it was likely that they understood their spouses when they spoke Indonesian. Observation showed that when they spoke the mixed language, they used more English than Indonesian. This was because they were living in Australia.

The intensity of using the mixed language is different from one family to another. Informants would speak Indonesian to their spouses/partners or children but they would get an English reply. The informants who used the mixed language more frequently were MYN, TSE, and MMY. Below are two examples of dialogues between informants and members of their families.

a. Dialogue one: This was a conversation between MYN and her son. They were having this conversation in an 'arisan' (an Indonesian traditional gathering) one day on Sunday.

MYN: Ethan… are you sure you want to be a lawyer?

E: I want to be in the army.

MYN: Ethan kamu mau jadi army? Kamu dimarahin kakak kamu aja nangis. (Ethan you want to be in the army, but you cry easily when your sister gets angry with you).

Dialogue one shows that the mother replied in Indonesian, and the son had a grin on his face, which indicated that he understood.

b. Dialogue two: A telephone conversation between an informant and her husband:

Y: Hai Fred.. yuhuu haiii

F: Yes. I can hear you chirping

Y: Ya Allah dengerin dulu genduuut.. Fred.. traktir dong…(Oh God, listen first fatty.. Treat me please)

F: Yes.. yes ok.. enjoy your meal

Dialogue two shows that the husband is responding in English to the Indonesian language.

The above conversation shows how the mixed language was used. Clearly, it was used more by the informants rather than the other members of the family. Some informants explained that when they used the Indonesian language, their children or husbands would understand and reply in English. They rarely replied back in Indonesian except in short sentences or just with one or two words. These women are highly active and creative in the way they communicate within the family. The mixed language used is not an obstacle in exchanging meanings between one another. They seemed to have compromised these mixed verbal symbols.

Unstructured grammar English

Informants with this communication pattern used the word 'broken English' to refer to unstructured grammar English. They admitted that their English skills were below average. They stated that they used English without any understanding of grammar. In other words, unstructured grammar English is the English language which doesn't go by the grammar rules. This communication pattern can be called 'syntactic absent', where the informants don't use the proper forms of the language. Nevertheless, they interpret meanings and compromise symbols. Although such language usage can cause some small friction due to misinterpretation, they still can handle these obstacles.

Most Informants didn't learn grammar because they are from poor families where they didn't get a chance to continue their education to a higher level. The other reason was that they had a lack of training in the English language in Australia. They learned English independently by listening to pieces of sentences from other people. Usually, the informants made their own rules and forced their partners or spouses to understand. They explained that the most important thing was that the message was understood. They also sometimes made their own terms, mixing two words from both languages, for example, if they wanted to say that something was too hot/spicy because of a traditional homemade chili sauce, they invented the word 'it is too *sambelish*', which is agreed upon by the members in the family or other Indonesian people.

Observation showed that when the informants socialized and communicated with the society, there seemed to be some difficulties in understanding, but when they communicated within the family, they had a mutual understanding. This demonstrates that there has been an understanding cultivated inside the family.

> "I don't care when I use broken English. The most important thing is that when I say something, although it is not grammatically right, … but I know he understands. So I shall say to him that I am going to

speak Indonesian, and you must also speak Indonesian. I want to know which one is better..me using English or you speaking Indonesian. He then said that because we lived in Australia, we had to speak English, but then I said to him back when we were living in Lombok, I never argued when he didn't speak Indonesian." (MYN)

The statement above showed that MYN's husband demanded that she spoke structured English. MYN felt that it wasn't fair, because when they were living in Lombok she never demanded her husband to use structured Indonesian language.

TT who had no English skill at all when she came to Australia, had a difficult time in her early years in Australia. She was thankful because her father in-law, who was in a wheelchair, came to her home and helped her children to do homework. She then realized that she couldn't just stand there and not do anything, so she started to learn English and asked her father in-law to teach her.

"There is nothing wrong with me. He is helping me. He is in a wheel chair.. and he is helping the kid., I am supposed to help. I can do that.. from now on… I am going out and I am just gonna talk. I don't care if everyone don't understand me….When he went home, and I call him up, and I say.. me. wanna speak English and he say, that's good. I remember he say… that's good.. and he say.. you speak me..and he was teaching me how to, and from that moment I say to myself I am going to do better." (TT).

While being interviewed, TT spoke English all the time, although her English was not grammatically correct. Compared with other informants, she was more fluent than any other. She had certainly upgraded her English skills. She explained that by going to work, she had developed her English skills even more. Now she is active in an organization that fights for women who experience domestic violence. She has an important role in this organization. She helps new Asian women who experience domestic violence. Even though her English skills have improved, she still spoke some unstructured grammar English here and there but she mentioned that her husband and children didn't mind and had never complained about it.

MMY also had some difficulties. She also had no English skills before she came to Australia. She only knew a couple of words which she had learned in the hairdresser shop where she worked in Bali. Her husband, John didn't mind it. He helped her in building her understanding of English and was very patient about it. *"If I don't understand, he would explain patiently, yah than every day he did it then I understand slowly. If I don't understand something, he will explain, he won't get angry"* (MMY).

MMY was always using a mixed language and unstructured grammar English most of the time. Once she went to KFC (Kentucky Fried Chicken) and ordered a meal. The employer there had some difficulty in understanding what she wanted to order and MMY also had a tough time explaining what she wanted. But eventually, by exchanging symbols they could understand each other.

Below is a conversation when MMY was telling about her experience on a trip to Banjarmasin to visit her friends. MMY and her husband hand in hand tried to explain how people shouldn't eat anything spicy if they intended to go on a plane unless they wanted to get a stomachache.

John: Don't dine chili when you are going on a plane. MMY knows that, don't have chili, she was going huhuhu all the way from Surabaya to Banjarmasin. [John is her husband]

MMY: Because me hungry, and time I want eat.. nasi Padang (Padang rice) in Surabaya and sakit perut (stomach ache).. when landing.

John: When we landed, she got to go and hopped on a bus. She was jumping up and down and when we arrived she ran straight to the toilet hahahah

MMY: The pramugari… (stewardess) you sit down. You sit down.. and the toilet ngantri! (queue)

John: Yes the toilet was full

The conversation showed that MMY tried hard to explain in English with unstructured grammar. Her husband didn't mind at all and helped her to go through the story. At that time the people that were listening consisting of three Indonesian people and one Australian laughed at the story. It seemed difficult to understand what MMY was trying to say but they understood the storyline.

MK is one of the informants who had no problems in speaking English. She explained that she was used to using English when she was a child in Indonesia. Her parents spoke English with her as their daily communication. Even though she had no problems in speaking English, she still had difficulties in using structured grammar. Below is a story she told her husband and a few of her friends when they were having dinner. She was talking about her family.

> "I guess because my Mom has a Chinese and Dutch, but my father is a real Indonesian. Back then this is my understanding. My mom tries to keep the culture as Indonesian from Daddy, and Daddy always speaks in a very high you know Javanese. Which sometimes I say, what does that mean.. kromo inggil. And we went through it, all this writing and all this culture. That is my understanding, Daddy has already this influence, and we must embrace to other you know English is a very universal language it's very important." (MK).

The sentences in her story above are rather difficult to understand as she didn't use structured grammar. She used the present tense most of the time while she was actually talking about something in the past. In spite of the unstructured grammar English she used, her husband and friends could understand what she meant, this confirmed that meanings are shared in reciprocal interaction between persons (Aksan, et al., 2009).

Appreciation and compliments

Most of the informants admitted that the best thing in communicating with their partners or spouses was that they never

hesitated in thanking or complementing them for something that needs to be appreciated. The words "thank you" and "please" were the words they mostly used. They always appreciated something even the smallest effort by saying 'thank you' and never forgot to say 'please' when they asked favors.

> "Foreigners always say please and thank you. Sometimes I forgot to say please when I ask my husband's favor, and my mother-in-law advised me about it. She reminded me in a friendly way. She said … is that what you always say to your husband? What mom? You didn't say please.. oh yeah sorry sweety honey please, that's all right he said. And after that, I became more aware of it ." (MM).

Appreciation here also includes respect in differences, especially differences in religions, beliefs and also culture. When they would visit someone's home, they would also call in advance to make appointments. This is also a form of appreciation for one another. MW remembered how her mother-in-law was not very pleased when MW suddenly appeared at the door of her home without making an appointment beforehand. Her mother-in-law told her that she had to inform her of a visit in advance as a matter of consideration that if she didn't do that it would be assumed that she was not respecting her mother in-law's privacy.

> "Even to our mother-in-law, it is so different, in Indonesia, if we want to go to our sister's or brother's house, we usually don't say anything, we just barge in. I was thinking why do I need to make appointments first anyway. In here, we can't do that, I have been scolded many times by my mother-in-law because of this. She said 'How come you just coming here without telling me without calling me or without an appointment'. Dear me I thought to myself, this is more than getting an appointment with a doctor. But that is how the culture is here." (MW).

MM explained how her mother-in-law was kind enough to always remind her to say words of appreciation. She compared it to her own family in Indonesia, where most of her family members rarely said these appreciations. They would only take things for granted. She admitted, she became a better person

with this cultural value.

Compliments are also a form of positive cultural value, especially from the husband's side. They always complimented their wives in front of other members of the family and they never talked about their wives' shortcomings. Appreciation and compliments which become some sort of a habit within the family influence the way the informants communicate inside or outside their family home.

> "Pak Willy [ES' late husband] always respected me in front of his children, so my stepchildren also respected me. After we have a meal together, Pak Willy was the one who washed the dishes, so now, when we have meals together, my stepchildren would do the dishes. Pak Willy always compliments me before his children and that is why until now his children still respect me. I don't have any problems with my stepchildren." (ES).

MW stated that Australians rarely talk behind people's back. If they don't like someone, they prefer to confront them straight away if there has been a problem. ES stated that even though her husband was talking about her behind her back, it was always about how good she was as a wife. Now, as her husband has passed away, her stepchildren still respect her. ES believed that it was because her late husband had always complimented her in front of the children back then.

Obscene words or swearing

Appreciation and compliments bloom well in some families, but in some other families *obscene* words or swearing are found. The informants agreed that this habit was part of the Australian culture. This pattern of communication was strongly used by some informants such as MYN, MW, MF, MK, and TT who argued a lot with their spouses or partners.

'Swearing' consists of rude and harsh words. Sometimes the words can be very offending. Informants explained that the use of

these obscene words was when they got into an argument. When things got worse the rude words got worse also. These are the main words that are used: *'fuck you'*, *'whore'/'hoe'*, *'shit','bullshit'*, *'asshole'*, *'cock'* and other harsh unacceptable words. Most of these 'swearing' words came out from the husband, but it doesn't mean that informants never used them - they used them too. They explained, they commonly used Indonesian swearing words like*'anjing'(dog), 'goblok' (stupid), 'tai'(shit)* and other Indonesian words which are considered harsh. They admitted that their spouses or partners knew well the meaning of these words. Even though the words are very harsh and rude, most informants explained that they were used to hearing such words and they didn't really feel offended by the words as the words had become part of their arguments. They didn't really take the words seriously whether they were swearing in English or Indonesian. *'When we fight, he knows well that I call him a dog'* (MW).

While some informants admitted that they didn't really feel offended with these swearing words, TT had a difficult time in her first years of marriage hearing these words. Her husband constantly used these harsh words that offended her. She used to crawl up to her bedroom and cried. It was hard for her at the beginning, because she was raised differently. She explained how her parents taught her that men were not supposed to talk loudly to women. Men were to speak politely and with a low tone of voice. She was also told by her parents that women had to respect men and obey them.

> "We've been brought up.. my Dad says to my brothers.. don't even talk to your wife with a loud voice or even hit them, they will cry ... you know I have very sensitive feelings. I don't deserve it, but I wasn't brought up in that kind of culture, all I can do is cry and cry and cry." (TT).

TT then explained that as the years went by, she learned that she had to stand up for herself. She adopted the part of Australian culture whereby she then began to talk back to her husband and also to use obscene words. Now, she never feels offended when

her husband uses swearing words. It has now become a pattern and she is used to it.

MYN also admitted that she wasn't brought up with the rude language in her family back home in Indonesia. She was told that using obscene words is a sin. MYN explained that her husband used more of these obscene words when he was under the influence of alcohol. When they were in a fight, they would fight on and on, hurting each other with these obscene words.

> "Like the use of 'Fuck', or calling me a Slut, if it comes out from the person closest to us, I really don't like it. If my children talked that way, I'd go nuts like a stepmother. I know it is some sort of a custom here in Australia, I don't care if it is used outside but I don't want it to be used inside my family. The word 'dog' I can take it, but 'fuck' I can't really take it." (MYN).

Some informants, who are older in age, don't really use these swearing words. When they got into an argument they tended to talk things out wisely. ES explained she and her husband respected each other so these rude words didn't even exist. TSY stated that she preferred to go silent if she got into an argument with her husband and at the end of the day her husband would come to her and ask for forgiveness.

This study indicates the usefulness of the symbolic interaction theory in unraveling the verbal communication of the Indonesian diaspora women within their mixed culture families in Australia. The communication patterns that emerged among the informants when they faced their spouses/partners or their children were a process, which was influenced by self-awareness, open-mindedness, showing respect and above all language fluency. These influences were mentioned by Tili and Barker in their work on international marriages. Language fluency, for instance, had a major impact on how they communicate (Tili & Barker, 2015). Most informants didn't have enough skill in English literacy which led to patterns of mixed language and unstructured grammar

language. Both patterns became their solution to communicating with their family members.

Communication patterns would be different between the two cultures in terms of verbal and nonverbal communication (Barker, 2016). The research showed that Australians were more open in appreciating and complementing each other. Some informants admitted that their Australian families were the ones who taught them to respond in a good manner that showed respect and appreciation. The words 'thank you', 'please' and 'you are welcome' were commonly heard throughout observation among the family members. Their different social, economic, educational and class backgrounds apparently cause these differences.

Another cultural difference emerging in our study was that Indonesians tended to have a patriarchal culture, where women were to respect men or their husbands and did what they were told to. Some informants were raised to be respectful to their husbands and never talk back at them. They were also taught that men would not raise their tone voice to women. In other words, Indonesian men were taught to talk in a soft way to women. It became a contradiction when some of these informants were yelled at by their husbands. This became worse when 'swearing' or 'obscene' words were used on a daily basis when they had arguments. Rosenblatt and Stewart stated that when a woman lived in the man's home country, she would deal with certain areas of cultural differences. In this research, the informants had to put behind some of their patriarchal ways of thinking and to stand up for themselves (Rosenblatt & Stewart, 2004).

The communication patterns which these informants used were formed as a result of exchanging meanings among the informants and their mixed culture family members. Grammatically unstructured English as one of the communication patterns used by most informants was understood by their family members. The meaning exchange and its modification were a result of interaction that occurred among the informants and their family members.

Lessons Learned

Based on this research, the communication patterns used by the Indonesian diaspora women in their mixed culture families in Australia constitute verbal communication consisting of interrelated categories: pure English, mixed language, unstructured grammar English, compliments and appreciations, and obscene words or swearing. The categories were used as a way to communicate among the members of the family with different cultural backgrounds and had been proven to be successful in delivering messages.

Based on our research findings, we suggest that people who immigrate to foreign countries actively learn more about the different culture and language of the country to minimize the culture shock they will face and to adjust themselves to the new culture. They will also gain improvements for their intercultural communication competence when they join supporting groups provided by immigration authorities. We also suggest that the host society need to develop and offer more workshops related to intercultural marriage to improve intercultural communication competence.

Indonesian Students' Cross-cultural Adaptation in Busan, South Korea

Deddy Mulyana & Bertha Sri Eko

In recent years, many Indonesian students have received scholarships from the Government of South Korea (hereafter Korea) to study there. Over 300 higher education institutions in Korea offer various academic programs for bachelor, master, and doctorate degrees to foreign students. Data from the National Institute for International Education (NIIED) until the year 2009 shows that approximately 78,050 foreign students had studied in Korea. The number increases from year to year. In 2012 approximately 500 Indonesian students studied in Korea (http://edukasi.kompasiana.com/2012/12/20). While the number of foreign students reached approximately 85,000 in 2015, the country aims for 200,000 foreign students by 2023. The number of Indonesian students has also increased, contributing to the total number of over 40,000 Indonesians in Korea,

Previous studies found that Indonesian students have faced difficulties in adjusting themselves to life in foreign countries with different cultures, such as those who studied in the United States (Mukminin, 2012), Australia (Bahri, 2013), Taiwan (Chen et al., 2015), and the United Kingdom (Aisha, 2016). The most critical point of experience is often termed *culture shock*, a condition in which the individual feels anxious, uncomfortable, frustrated, and threatened when living in a new environment. It is usually characterized by hostility and stereotypes (Begley, 2000). It is assumed that Indonesian students in Korea may also have encountered such cross-cultural difficulties in their adaptation. "In its most general sense, adaptation refers to changes that take place in individuals or groups in response to environmental demands. Adjustment can be regarded as the outcome of the adaptation process" (Ali et al., 2003).

Koreans embrace unique values in maintaining friendship, either with their fellow Koreans or with foreigners. Friendship is often associated with social drinking or consuming alcoholic beverages at a social event. This social drinking is a powerful way to express and strengthen feelings, attachment, and friendship, making Koreans feel more confident and comfortable (Eko, 2016). However, this Korean custom cannot be fully accepted by Indonesian students. Consuming alcoholic beverages is considered to be negative behavior according to Indonesian culture and deviates from the values of Islam, the major religion in Indonesia.

This study aims to find out the validity of the U-curve model of cross-cultural adaptation by exploring the cross-cultural adaptation undergone by Indonesian students in Busan, Korea. More specifically, the study focuses on: (1) the barriers of cross-cultural communication between Indonesian students and Koreans (2) the culture shock experienced by Indonesian students in Korea, and (3) the adaptation strategies used by the Indonesian students to overcome the communication barriers and the culture shock.

An additional aim of this study is to give prospective Indonesian students some insight into the Korean culture. It is expected that these prospective students can benefit from the research results in that they can prepare better strategies to adjust themselves and to succeed in their studies in Korea.

Cross-cultural Adaptation and Culture Shock

Cross-cultural adaptation is complex because it involves differences in both verbal and nonverbal language and in values. A person who enters a new environment will tend to experience culture shock, a state of psychological discomfort in dealing with new experience. According to Furnham and Bochner (1986) culture shock is "the confusion and disorientation that many sojourners experience when they enter a new culture." However, culture shock is normal and is experienced by almost every individual when entering a new country. The term *culture shock* was originally coined by Oberg (1960). As quoted by Lustig and Koester (1999):

> "Culture shock is precipitated by the anxiety that results from losing all of our familiar signs and symbols of social intercouse. These signs or cues include the thousand and one ways in which we orient ourselves to the situation of daily life: when to shake hands and what to say when we meet people, when and how to give tips, how to give orders to servants, how to make purchases, when to accept and when to refuse invitations, when to take statements seriously and when not. Now these cues which may be words, gestures, facial expressions, customs, or norms are acquired by all of us in the course of growing up and are as much part of our culture as the language we speak or the beliefs we accept. All of us depend for our peace of mind and efficiency on hundreds of these cues, most of which we are not consciously aware."

Other symptoms of culture shock may include the fear of social contact with others, a blank stare, daydreaming, a feeling of helplessness, the emergence of an overreaction, weak

interpersonal communication, identity crisis, and a desire to return to the country of origin.

Culture shock can be viewed as a positive process, as a learning experience that leads individuals to understand intercultural communication. According to Adler (in Samovar et al., 2007), it can be viewed as a transitional experience that may lead individuals to acquire new knowledge through understanding the native culture associated with their own ethnocentrism and to gain new perspectives toward their native culture and at the same time toward other cultures.

Culture shock is the most critical point in cross-cultural adaptation. This phenomenon is inherent in the notion of the U-curve which assumes that

> "cross-cultural sojourners progress through three main phases: an initial stage of elation and optimism, replaced by a period of frustration, depression and confusion (presumably the period labeled by Oberg as culture shock), followed by a gradual improvement leading to optimism and satisfaction with the new society" (Furnham & Bochner, 1986)

Using Adler's perspective (1975), this cross-cultural adjustment incorporates the stages of *contact, disintegration, reintegration, autonomy*, and *independence*. Most of the literature on culture shock proposes that sojourners undergo four stages of adjustment (Samovar et al., 2007).

The first phase is *honeymoon* (*contact, optimistic phase, euphoria*). This phase occurs when a person experiences interesting situation, euphoria, fascinating events with a new culture and new people he or she encounters. Everything looks very pleasant, such as the food, the people, the language, the facilities, the weather, the city, the arts, etc.. Feeling happy and hopeful is also present. This phase usually lasts only a few weeks after the person arrives in the new country.

The second is *crisis* (*disintegration, cultural problems, disillusionment, frustration*). Individuals feel disappointed,

dissatisfied, and desperate. This phase describes the situation when a person finds the differences between his or her culture and other cultures. These differences create problems that may lead to the worst point of this phase, that is, culture shock. Moreover, it raises an aggressive attitude and hostility due to the difficulty to adapt, homesickness, boredom, changing mood, sensitivity, and feeling isolated from the rest of the society. On the other hand, the host people do not ignore the foreigner that may create more resistance toward them. According to Dodd (in Samovar, 2010), the crisis phase is often characterized by feelings of disappointment, dissatisfaction, as if everything looks horrible.

The third phase is *recovery* (*reintegration*). People try to learn the language and habits of the new culture. They acquire new skills and knowledge and they have the ability to take care of themselves so that they get a direction to deal with the new culture. A sense of humor and positive attitude arise. People begin to do daily routines comfortably so they can interact and socialize with the host society.

The fourth phase is *adjustment* (*integration, autonomy* and *independence*). In this phase the sojourners can enjoy the new culture, accept the way of life of the other, and get along with the new environment without anxiety. They better understand the local language, values, and customs of the new culture. They start to learn the habits performed by local people in the new country. This phase may occur after six months to twelve months since arrival.

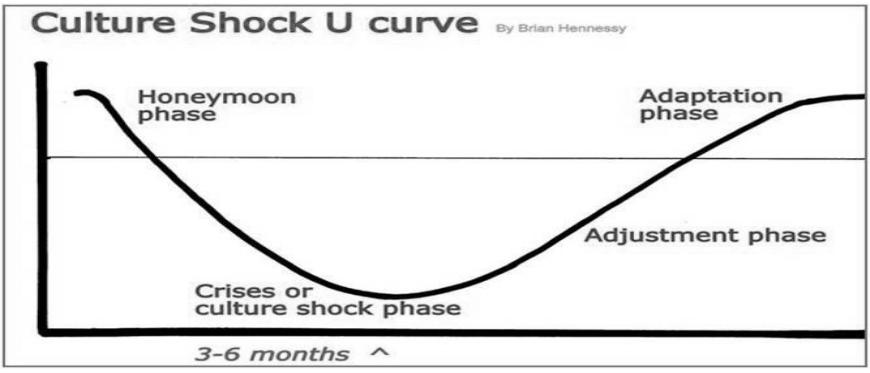


Figure 1. The Phases of Cross-Cultural Adjustment

Source : http://strim.org.pl/2012, Furnham & Bochner (1986), Chen & Starosta (1998), Samovar et al (2007).

Originally, the U-curve pattern is based on Lysgaard's study (1955). Involving 200 Norwegian Fulbright scholars in the United States, it concludes that the process of their adaptation moves through three phases: initial adjustment, crisis, and regained adjustment (Chen & Starosta, 1998). Since that time a lot of studies have been conducted to seek various factors affecting cross-cultural adjustment, some focusing on foreign or international students in countries with distinct cultures such as the following: Ward et al (1998), Li and Gasser (2005), Cemalcilar & Falbo (2008), and Fritz et al (2008). Some interpretive studies such as Mulyana (1995), Lin (2006), and Hotta and Ting-Toomey (2013) have been conducted to develop alternative or specific models of cross-cultural adaptation. Regardless of some scholars' critiques on the U-curve accused of being simplistic and reductionistic, we assume that this theoretical model of cross-cultural adaptation is still useful. As Black and Mendenhall argue (1991), although cross-cultural adaptation could be affected by different situational and individual factors, basically its pattern constitutes a U-curve. In Martin and Nakayama's words (2004), "Although this framework is simplistic and does not represent every migrant's experience, most migrants experience these general phases at one time or another."

Doing the Focus Group Discussion

In analyzing the adjustment of Indonesian students to the Korean culture, this study uses a qualitative approach based on the cross-cultural adjustment model delineated above. Although the term qualitative is often associated with an interpretive, phenomenological, or constructivist paradigm based on an inductive process of research, we use it to refer to methods or techniques to gain and use words as data (Braun & Clarke, 2013). We as researchers have become the major research instrument.

The informants of this research were 10 Indonesian students who had been living in Busan Korea for at least eight months. Most informants were undergraduate students who had various educational backgrounds, except one student who was studying in the postgraduate program. Seven of them were women. All of them were in their twenties. To gain the data, we carried out a focus group discussion (FGD) with the informants in Busan, Korea. In addition, we distributed questionnaires, conducted interviews, and sent e-mails. Pseudonyms are used in this study to protect the informants' confidentiality.

Various Experiences of Culture Shock

To reiterate, we used the common four-stage model of cross-cultural adaptation (U-curve) as a guide to explore our informants' cross-cultural experience which incorporates *honeymoon period, crisis, recovery period* and *adjustment*.

The Indonesian students in this study experienced the honeymoon phase for about two to three months, while, their crisis phase ranged from three months to one year. The crisis phase is inseparable from their self-concept and views about Koreans and their values. Those with positive self-concept had awareness of the cultural differences as well as strong motivation to adjust themselves into the new culture, while those with

negative self-concept experienced longer adjustment and worse culture shock.

The barriers of cross-cultural communicati*on*

Most of the informants decided to study in Korea based on their own decision. Besides receiving scholarships, their motivation of studying in Korea came from their interest in Korea's technological and economic development which grows rapidly, the Koreans' hard work, and also the lower cost of education compared with Japan or Europe.

Language Barrier. In general the informants enjoyed studying in Korea because there were many new things to learn. However, some communication barriers cannot be avoided such as language, nonverbal behavior differences, and psycho-cultural barriers such as stereotypes, prejudice, and racism. Of all these barriers, the language barrier was the most dominant. Korean language is complicated because it has a lot of jargons that are not used in daily interaction. Besides that, Koreans are not keen on learning English. They tend to compel foreigners to speak their language. A few informants said that Korean students did not hesitate to leave their foreign acquaintances if they were not able to speak Korean.

Korean language is tightly embedded in social relations. The use of language should consider the social status of the people involved. Social and cultural problems may be related to language problems since the language is hierarchical. For example, respecting people of higher status is expressed in different forms of language. Indonesian students may use the kinship terms "Bapak" or "Pak" and "Ibu" or "Bu" to show close relationships and familiarity with their teachers, while Korean students use a special particle, *Nim,* which is embedded as a suffix of the word referring to teaching profession. The word *Nim* is used to reaffirm the senior position of the communication participants. At its core, the suffix *Nim* is used

to give respect. One informant (Shinta) confirmed that the Korean language has become a problem: "*Their language is the main barrier, especially when they tell jokes. Their slang and accent are difficult to understand.*"

Psychological Barrier. The second barrier is the psychological barrier such as prejudice, racism, and closed-mindedness of most Korean students. Some informants said that they had been treated by racist Koreans who regarded Indonesia as backward and underdeveloped in terms of wealth and technology. This psychological barrier is linked with different values of relationships and social activities, including social drinking. Koreans usually invite other people to drink until they get drunk when they want to build a new relationship. Their self-centered attitude makes them difficult to accept different customs of other cultures. They also tend to expect Indonesian students to understand their customs. For example, they often impose social drinking on students from different cultures. They dare to exclude other students who refuse to do it. The psychological barrier between Indonesian students and Koreans is clear in the following:

> "Korean society tends to have feelings of superiority. Korea has a better condition than other Asian countries. This egocentric feelings cause Koreans to interact with others only when they have interests." (Ben)

> "It is because Indonesians are friendly and Koreans are used to being treated friendly. Koreans' introversion becomes a big barrier of interaction. When they realize we are not able to speak Korean well, they will leave us immediately." (Mira)

> "The main barrier to have relationships with them is because Korean students do discriminate against us, and they often express negative comments. Moreover, when Korean men aged above 40 meet Southeast women, they will underestimate the women and regard them as prostitutes." (Anita)

> "Social drinking makes me hard to be close with them." (Corry)



The City of Busan, South Korea (Photo: Deddy M)

For our informants, social drinking was not only a complicated problem but also a dilemma. They wanted to accommodate this custom to have relationships with Koreans, but on the other hand they were tied to their religious values which prohibit this Korean custom. A few informants could not refuse to drink because they were worried about being isolated from the Koreans. They said that the attitude toward social drinking was mixed feelings of hatred and anxiety. Anxiety was shown when they were invited by Korean students to attend a social drinking event. They were afraid to refuse the invitation because they would be shunned. On the other hand, they were angry because they could not refuse the invitation, as Korean students always imposed their will and did not care about the reasons behind the refusal, including health reasons. All these situations made some Indonesian students reserved in their interaction with Koreans.

In addition to social drinking, the way Korean students make friendship was also perceived negatively by Indonesian students. Competition, ethnocentrism, and expediency are values disliked by the informants. They assumed that loyalty and attention were more important factors in friendship. In their opinion, the Korean excessive seniority system as applied by Korean students to Indonesian students was unacceptable. Korean students

often belittled their juniors, even Korean junior students. In the Indonesian students' perception, Koreans tend to be unfriendly to new people. The informants saw Korean students as cold, individualistic. inhospitable.

Nevertheless, there were favorable aspects of friendship with Korean students as perceived by the informants. They find positive behaviors of Koreans such as diligence, hard work, and respect for people who are older and those who have a higher position. The positive perception also pertains to the Koreans who have high sense of nationalism, strong character, and responsibility. Koreans are perceived very dedicated to their families and jobs.

Culture shock

All the informants in this study had experienced the honeymoon phase of adaptation before they suffered from culture shock. Their culture shock varied in terms of intensity, time and other factors related to it.

Honeymoon Phase. The following are accounts of the honeymoon phase according to two informants:

> "The first time I came to Korea, I found pleasant things. I explored a new world where many things were different from Indonesia. I experienced such a kind of condition for about three to four months. It was easy to go anywhere in Korea because the transport facilities could be found easily." (Ben)

> "The first time came I was pleased because I was welcomed and supported when performing tasks in the lab. I was often invited to eat and drink together. I experienced that kind of situation for two till three months." (Ray).

After the honeymoon phase came the crisis which lasted for three to four months in average. One informant was in the crisis phase for almost one and a half years. He said that none was willing to make friends with him. The factors causing the crisis generally were discrimination, excessive seniority system, and

the behavior of Korean students that tend to insult Indonesian students.

The alcoholic drinking custom made the Indonesian students shocked because they were not accustomed to doing it. Their inability to refuse the social drinking brought up feelings of anger, anxiety and depression. This refusal of the invitation meant that they would be excluded by their social circles. This crisis period was experienced by one informant who felt he had lost his identity since he could not refuse his Korean friends' invitation to drink. He was afraid to be ostracized so he tried to tolerate the demands of his Korean friends. The following are some informants' culture shock experience:

> "I was having a crisis when I was invited to eat pork, drink, and smoke. All of those things are forbidden in my religion, but I could not refuse their invitation. I was confused with myself. I was reluctant to eat with Koreans because I could not eat pork. I tried to get involved in social drinking in order to establish a good relationship with them. We will be considered great if we drink until we get drunk. I was having an identity crisis. I have been out of the dormitory for three years. I hanged out a lot with Korean friends. When I came back to Indonesia I felt different since I had lived in Korea for a long time. I was Indonesian but too Korean, but when I was in Korea, I was too Indonesian. I did not know where I was. My friends said that my way of thinking was not Indonesian any longer. Korean people themselves told me that I was a foreigner. I didn't know what to do. It is very important to get together with Indonesian people since they are willing to listen and they can heal my homesickness. Since I live and study here, I have to learn the culture here." (Anita)

> "I was suffering from a crisis when I was discriminated. When teaching English Koreans forced me to lie that I came from New Zealand. The reason was that they did not want their children to be taught by a teacher from a country lower than Korea. The crisis also happened when I saw my Korean friends were beautiful and I lost my confidence. I got stressed of being not beautiful. Then I did not want to hang out. I was shocked and I experienced this for eight months. I once thought

to move and study in another country, but I remembered my parents. I wanted to make them proud of me. I believed that the situation would change. My mindset became strong. I learned that there were positive values behind the difficulties I encountered." (Alana)

"I had a crisis when I experienced an excessive seniority system on campus. When I met seniors, I should say hello in order to be considered polite. In a meeting, at a social gathering or in a church, we must call a senior who is the chairman of the association with a full name and job position. They created a gap that was too far, even though they were friends on campus. There was no friendship and closeness." (Gloria)

In this phase most of the Indonesian students suffered from frustration leading to negative attitudes such as aggressiveness and hostility, while at the same time they also felt lonely and homesick. Some of them withdrew from the society, mainly from Korean students. They became reluctant to do anything, including academic assignments. A few informants even became reluctant to talk with Koreans for several weeks. Uniquely, at this critical time the sense of nationalism of some informants increased. They did not want their dignity and their country to be insulted by people from another country.

The Recovery Phase. The recovery phase was experienced by all the informants. This is the period when they tried to understand the Korean culture. They strived to learn the Korean language and customs. They acquired new skills and knowledge as a guide to take care of themselves, do daily routines, and interact more comfortably with local people. Thus, the sense of humor and positive attitude toward the host society started to grow. Based on our study, this recovery phase is linked with the adaptation strategies used by the informants.

The adaptation strategies of Indonesian students

Cross-cultural communication involves the complexity of values, beliefs, and customs brought by each communication participant. These cultural elements will influence the creation

and interpretation of messages exchanged in their cross-cultural encounters.

Based on the interviews, Indonesian students thought that it was important to be able to adapt to the new culture. Being able to adapt means that the students reached the recovery phase where they could understand the new culture, although it does not mean that they accepted or agreed with it. They strived to learn the language and customs of the new culture until they acquired new skills and knowledge. They were also able to take care of themselves without some assistance or direction given by members of the new society.

Our research findings have indicated that the strategies used by the informants approximate the adaptation strategies as formulated by Samovar (2010), namely building friendship, learning the host culture, and cultural participation.

Building Friendship. Indonesian students had close personal relationships with local people through friendship on campus, in religious circles, and in organizations. Some students frequently visited traditional markets to be closer to Koreans. According to some informants, it was not easy to make friends with Korean students, because they tended to be selective. They would find friends who look attractive, smart, and can be utilized. However, this has brought some positive effects on Indonesian students who began to improve their appearance and enhance their self-competence, thus making them more confident in their interaction with Koreans. One informant said:

> "To be able to adapt, I tried to learn the Korean language. I often visit and join cultural exhibitions. I become a participant of social activities around campus. In the adaptation process, I tried to understand their culture, because we live in their country. So, like it or not, we should change our thinking." (Shinta)

Most of the informants were trying to ignore things that would become a barrier and to open a conversation. They kept being friendly and hung out with Korean students. They were

not afraid to ask and befriend Koreans who were nice and friendly so that they could mingle with them. According to some informants, some important values for Korean people include keeping a promise, being consistent and disciplined. They said that if they broke a promise, Koreans would be angry and would not trust them anymore. Koreans tend to be closed minded and ethnocentric, therefore they want foreigners to follow their culture. In some informants' perception, Koreans are less tolerant because they are not accustomed to cultural diversity and are not familiar with cultural differences.

Learning the Host Culture. It is important for the informants to raise the awareness of differences between their culture and the host culture. Cultural awareness means that they understand their own culture and other cultures that influence human behavior. It is imperative for the sojourners to learn the language of the host society, their religious values, political system, cultural beliefs, and nonverbal aspects of communication so that they can adjust themselves as soon as possible to the host society.

Learning the host culture is an adaptation strategy performed by Indonesian students. It is very important because they realized that they would stay long enough in the country. Most of the informants were motivated to quickly master the Korean language as it was helpful in getting along with Koreans. They assumed that Koreans were very proud of their culture. They realized that if they were able to accept and follow the Korean culture then it would be easier for them to mingle with Koreans. They began to adapt to local customs. Several informants wanted to have a drink but did not want to get drunk. This invitation was accepted only to establish a good relationship. They did not dare to refuse the invitation by giving religious or health reasons, as indicated in the following:

> "I was adjusting myself by following their will. I was willing to be invited, even by my lecturer, to have a drink in order to establish a good relationship. The reason is, if I had not accepted the invitation, I

would have been in difficult situations because I was so dependent on them." (Rudi).

"I was compelled to learn to consume alcoholic beverages within the organization in order to establish a good relationship with Koreans. They will consider us great if we have a drink with them until we get drunk." (Anita).

Some informants previously cynical toward the custom of consuming alcoholic beverages began to understand the meaning of the custom. Invitation to social drinking is a way to encourage people to know each other better. Through social drinking, they can be more intimate, open and able to express their feelings without any hindrance.

All the informants learned both verbal and nonverbal behavior of Koreans and made necessary adjustments. For example, it is considered impolite to stare into a person's eyes. Overuse of gaze in communicating may bring up a presumption that we like the person. So when talking to older people one should not stare at them too long because it is considered impolite. Besides, reducing physical contact among men is necessary because Koreans rarely touch each other, especially when communicating with strangers and between men and women. Communication among women generally involves a lot of touch. Nevertheless, too much touch often causes misunderstandings because touching someone is often interpreted as liking him or her.

Indonesian students in this study sought to understand why Koreans are competitive in learning. Initially their attitude was perceived unfavorably by the informants because it was deemed too ambitious. Koreans always prepare and plan their activities. In the course of time these values of discipline and hard work were considered positive and were adopted by some Indonesian students.

Cultural Participation. The Indonesian students in this study were active in various social, religious, and cultural activities carried out by local communities. Being engaged in local

communities and following different organizations enabled them to improve their language skills and at the same time to adapt to the local culture. In addition, they were able to reduce their own ethnocentric attitudes they brought from Indonesia. They also learned various Korean favorable values such as diligence, responsibility, and hard work and strived to apply these positive values in their daily life.

Usefulness of the U-curve

This study has indicated that the U-curve as a model of cross-cultural adaptation is still useful although it has been criticized by many scholars, especially those who conducted interpretive research based on an inductive model of research. From the research findings, we can conclude that:

First, the main communication barrier experienced by the informants of this study to interact with Korean students is the language barrier, besides stereotypes, prejudice, and ethnocentrism embraced by Koreans which led to discrimination against them. A closed attitude of Korean students toward Indonesian students has become a barrier to establish effective communication. More specifically, the difference in the values of friendship has become an obstacle for Indonesian students to mingle with Korean students. In the eyes of Indonesian students, friendship embraced by Korean students is based on the principle of usefulness and gaining advantages.

Second, communication problems have an impact on the culture shock experienced by most Indonesian students in this study. Culture shock is the most critical point of the crisis phase after the phases of honeymoon and before the recovery and adjustment phases. Strategies undertaken by the informants of this study to overcome the culture shock includes building friendship with the host society, studying the host culture and playing active roles in the Korean society through participation in social, religious, and cultural activities.

Based on our study, we suggest that prospective Indonesian students learn the Korean language and the Korean culture the best they can before studying in Korea to ease their adjustment and minimize the culture shock they might experience in the new country. By so doing they are more likely to interact with Koreans and to study in Korea more fruitfully

Chinese Communication with Malays in Bangka Island

Deddy Mulyana & Agustina Zubair

Despite the fact that Chinese have lived in an archipelago now called Indonesia for centuries, few studies have focused on their communication with other racial and ethnic groups, including the dominant society consisting of various ethnic groups in the country such as the Malays, the Javanese, the Sundanese, the Bataknese, the Minangkabaunese, etc. Even rarer are studies using interpretive approaches, such as phenomenology, symbolic interactionism, dramaturgical analysis, ethnomethodology, etc. Previous research on the Chinese in Indonesia have mainly focused on their history, acculturation and integration into the Indonesian society, for example the work of Suryadinata (1997) and Usman (2009), their political thinking (Suryadinata, 2005), their contribution to social development such as education, health and journalism (Ang, 2009), and their folklore (Danandjaja, 2007).

Of a few interpretive studies dealing with Chinese communication with non-Chinese in Indonesia, Herawati (2005) explored the roles of nuclear family in socialization among the Chinese society in Pontianak, West Kalimantan. Herawati found that the nuclear family played an important role in socializing Chinese cultural values among their children so that the children adhered to these values and had deep understanding of the Chinese culture. She also found that the majority of the informants had a positive attitude toward the Chinese culture and considered non-Chinese culture to be inferior.

A few years later Handoko (2009) investigated communication between Chinese and Malays in Palembang, South Sumatera, in the business context. He found that the Chinese in Palembang often used three verbal codes: the official Indonesian language, the Palembang Malay language, and the Chinese language, depending on their communication partner. For example, the Chinese used the Palembang Malay when they spoke to the local Palembang people, used the Indonesian language when they spoke to non-Palembang people and non-Chinese people, but they used Chinese language or at least some Chinese words or phrases mixed with the local Malay or the Indonesian language when they spoke to their Chinese fellows. They often switched these verbal codes from one code to another in the same situation as long as people from different ethnic groups were around them, for example when they dealt with their customers from different ethnic groups in their shops.

Some studies of Chinese communication with non-Chinese in Indonesia have employed an objective-quantitative perspective such as Lestari (2006) who investigated the implication of interethnic stereotypes in intercultural business communication among Javanese, Balinese, and Chinese who were engaged in the silver business in Yogyakarta. She indicated that their intercultural communication competence was molded by motivation, knowledge, and skills as formulated by Spitzberg (Samovar & Porter, 2000). She also found that intercultural ethnocentrism

among the business people under investigation had declined due to the globalization of business, the awareness of other ethnic groups, and the development of communication technology supporting their intercultural adjustment.

An interesting aspect of the Chinese people's long existence in many parts of Indonesia is their style of communication, both verbal and nonverbal, with the dominant society where they live. In Indonesia, this consists of communication with diverse ethnic groups who live in various islands, such as the Javanese in Central Java and East Java, the Sundanese in West Java, or the Malays in Sumatera, Bangka and Belitung, the Banjarese in Kalimantan, and the Bugis-Macassarese in Sulawesi. In Bangka Island where a significant number of Chinese have lived for generations, Chinese behaving like the Malays is commonplace, such as using the Malay language, adhering to Malay customs, wearing Malay attire, and socializing with Malays. Yet, the Chinese and the Malays are two separate communities characterized by mutual stereotyping. There has not been research into the Chinese people's communication with the Malays prior to this present one and, as far as we are aware, this research into the Chinese in Bangka Island is the first of its kind.

We assume that due to their long historical relationships with the Malays, the Chinese in Bangka Island have gained a sort of intercultural communication competence based on their knowledge of the local culture (which includes language, etiquette, food, traditional and religious ceremonies, etc.) and their real experiences in associating with the Malays in everyday activities. According to Spitzberg (2012) communication competence refers to "social behavior that is appropriate and effective for a given context" which incorporates motivation, communication knowledge and skills. For the Chinese in Bangka Island this communication competence is useful in their daily economic transactions with the Malays. A Chinese in Bangka Island knows with whom he or she communicates, where and when he or she communicates, and what is the likely response

of his or her communication partner. With this communication competence, the Chinese in Bangka Island know how to win their business transactions which give them profit and enable them to survive on the island.

Most of the Chinese in Bangka Island, as in other islands in Indonesia, are business people, just like their forebears in their home country. Chinese business in Indonesia has been carried on for centuries, since the first generations came to the archipelago in Southeast Asia now called Indonesia. In developing their business, the Chinese have encountered not only other Chinese but also non-Chinese composed of hundreds of ethnic groups in Indonesia such as the Malays, the Javanese, the Sundanese, the Balinese, the Bataknese, the Minangkabaunese, the Bangkanese, the Banjarese, the Bugisnese, the Manadonese, and others.

This study aims to delineate the self-perception of the Chinese in Bangka Island, part of the Bangka-Belitung Province of Indonesia, their perception of the Malays with whom they often communicate, and to explore the intercultural communication competence of the Chinese in dealing with the Malays in the business context. We will show that the main intercultural communication competence of the Chinese constitutes the basis for their ability to adjust themselves into the Malay culture, more specifically their verbal language and nonverbal behavior to impress Malays and to achieve their economic ends. We will demonstrate how the Chinese employ verbal and nonverbal tactics of impression management in the course of their intercultural communication with the Malays in Bangka Island. We argue that the Chinese in Bangka Island are competent in their intercultural business communication with the Malays, based on their knowledge of the Malay language and the traits of the Malays, although this does not necessarily mean that the Chinese always manipulate or even cheat their Malay business partners or clients.

Theorizing Ethnic Manipulation

It cannot be denied that in today's world, to succeed in business, one must master intercultural business communication which incorporates some understanding of his or her business partner's culture, including verbal language and nonverbal communication styles (see Varner & Beamer, 2005; Lewis, 2006; Hofstede et al., 2010). Culture is omnipresent and affects the way people communicate in all contexts of life. The success of business people partly depends on how they comprehend the culture of their business partners or clients, including their verbal language, the nonverbal behavior and their cultural values. Some scholars have associated the knowledge and skills of intercultural communication with intercultural communication competence.

Although some scholars have tested intercultural communication competence empirically such as Lestari (2006) in various settings and have related it with other variables, we are more interested to find out inductively how people are competent in this aspect. Thus, this study is based on the theoretical perspectives of George Herbert Mead (1934), Erving Goffman (1955, 1959), and Stella Ting-Toomey (1985). Each of these theories complement each other and should be seen as a unity. While some of Mead's theory of self has been extended by Goffman (Littlejohn & Foss, 2009), Goffman's concept of facework (1955) and theory of self- presentation (1959) has inspired Ting-Toomey's (1985, 1988) face negotiation theory (see Littlejohn & Foss, 2009).

According to symbolic interactionism, communication does not involve two or more people who behave in a series of simple causal chains in which they give automatic response. Rather, communication must be understood "as a dynamic, evolving process of mutual coordination and role taking" (Littlejohn & Foss, 2009). In this process the actors assume identities and play roles based on these identities. They are involved in the dynamic process of indicating to one another who and what they are. In such situations they typify each other and define the situations

they encounter, and are engaged in the action based on this context of social identities and the definition of situation. Self-presentation, as Goffman (1959) indicated, aims to produce definitions of the situation and social identities for the actors and these influence what kinds of interactions are appropriate and inappropriate for the actors in the immediate situation.

In the contexts of the Chinese in Bangka Island, based on the meanings the Chinese attribute to the Malays' actions, the Chinese may change their own actions to fit in with the Malays' actions. This modification of behavior requires the Chinese to determine in advance what meanings, motives or intentions exist behind the actions of the Malays. Such a process will only be possible if the Chinese possess and share some cultural experiences, especially the Malay language. The Chinese respond not simply to the action of the Malays but, rather, to the meanings, motives and intentions of that action. Consequently, understanding, regardless of whether it is convenient or inconvenient, will be achieved if the Chinese and the Malays attribute the same meanings to those verbal and nonverbal symbols.

There is a possibility that the Chinese engage in impression management merely to please the Malays, in order to pursue their economic goals. The process of being Chinese, in this regard, is fluid and changes as required to fit social situations. To show loyalty to their Malay business partners or clients, the Chinese will demonstrate that they are less Chinese and are more like Malays. However, as members of their own ethnic group, they may show strong allegiances to and in their ethnic group, if necessary, belittling or even ridiculing the Malays in the latter's absence.

Borrowing Lyman and Douglass' ideas (1973), the effort of the Chinese in Bangka Island to utilize some means of impression management purports to reduce stereotypes that the Malays have toward them, stimulating the Malays' sympathy for their status as a minority, and inducing the Malays to have a more favorable attitude toward them. Thus, strategies and tactics of

impression management enacted by the Chinese in Bangka Island as a minority group in their communication with the Malays may vary, even including endeavors to demonstrate ethnic identities and behaviors acceptable to the Malays.

Since the Chinese in Bangka Island act in accordance with their interpretation of the Malays' action and the immediate situation, it is possible to explore tactics by which the Chinese manipulate their ethnic identities, their verbal language, and nonverbal behavior, including their facial expression, and the motives behind such expression management, although there are limits in this ethnic manipulation, at least due to their physical constraints such as the appearance of their eyelids and skin color which are difficult to manipulate. Proper facial expressions must be maintained by the Chinese in Bangka Island so that the Malays cannot detect their true feelings, especially negative ones, so that the Malays have favorable attitude toward them. This face-saving is commonplace among collectivistic ethnic members such as the Chinese and the Malays in Bangka Island to cultivate social harmony.

As there is a possibility that ethnic identity is manipulated for personal and economic gain, this research also takes account of certain situations in which the Chinese in Bangka Island may define themselves differently from the way they normally do. Thus, this research also explores how the Chinese select certain alternative behaviors when they communicate with the Malays, particularly in face-to-face business situations, based on their definition of the situation, regardless of whether they choose to role play or employ genuinely expressed behavior.

When viewing ethnicity as a form of communication within the Chinese community and between the Chinese and the Malays, two relevant questions can be raised:

- How do the Chinese as the subjects of this study identify themselves as members of a particular ethnic group in Bangka Island dominated by the Malays and how do the Chinese identify with the Malays?

- What tactics are used by the Chinese in presenting themselves before the Malays to achieve their personal and economic gains and what are the motives of those tactics of impression management?

This study is part of larger research which lasted approximately nine months. To conduct the whole research we were involved in a lot of interaction between the Chinese who worked as business people in Bangka Island. Through a snowball sampling method we interviewed 25 Chinese (15 Chinese in Muntok, 7 in Pangkal Pinang, 2 in Sungai Liat, and 1 in Jakarta). These Chinese subjects are descendants of the Hakka, Hokkian, and Teu Chu Chinese ethnic groups. In this article, we use pseudonyms to protect the identities of the subjects.

We observed the way the Chinese subjects communicated daily with the Malays as their communication partners, especially as customers. Our focus were the Chinese verbal language and their nonverbal behaviors when they were communicating with the Malays and when they were communicating with their Chinese fellows. Their comments, as quoted in this study, are translated into English.

In addition to interviewing and observing Chinese subjects, we interviewed eight Malays who had wide knowledge of the Chinese culture and had interacted a lot with the Chinese in Bangka Island, including those who had prominent (bureaucratic, political, and professional) positions in the research area. These interviews with the Malays aimed to gain their perception of the Chinese and their confirmation of the Chinese communication with the Malays.

Ethnic Manipulation as Observed

Based on our research in Bangka Island we found that communication between the Chinese and the Malays are

omnipresent, although this communication is characterized by latent mutual stereotypes.

Interethnic perception

The Chinese perceived themselves as open and hospitable in communicating with the Malays. They are careful in their treatment of Malays to avoid conlicts and to be able to do business with them. They embrace a principle that the Chinese and the Malays in Bangka Island should not upset each other. The Chinese in Bangka Island consider themselves to be hardworking, tenacious, frugal and keen on maintaining long relationships with the Malays. They consider the Malays to be open, fond of associating with other people, obedient to the teachings of Islam, but on the other hand lazy, easily seduced, fond of being flattered and consumptive. In brief, the Chinese tend to look down on the Malays.

> "The Malays are open, but their sense of struggle is less than that of the Chinese. They do not want to be in difficulties. The Malays have the habit of saying "*Dak kawah susah*" ("*Don't bother"*) or "*Mane ke nek*" ("It is up to you") which expresses angst of apathy." (Myung)
>
> "The Malays are fond of being praised. They like to exshibiting their money, even if they have got a little profit. They cannot stand seeing a neighbor buy a car. He wants to buy a car too." (Liem).
>
> "The Malays like being flattered. For instance, "You are still young, but you already have a nice house and nice things." (Ying).
>
> "If the Malays get 10 as the profit, they spend 10. If we get 10, we spend two." (Chang)

On the other hand, in the Malays' perception, the Chinese are hardworking but calculative and even stingy; they use and justify whatever means to achieve their economic ends. According to the Malays, they are even willing to bribe others to obtain their business goals. The Malays' perception of the Chinese are not necessarily true. However, the Malays' antagonistic view of the

Chinese and vice versa, as will be delineated later, merely indicate that ethnic boundaries between the Chinese and the Malays are widespread. Barth's (1969) argument is still relevant that in spite of intensive communication among ethnic groups, markers still remain to differentiate one's own ethnic groups from others. These markers do not have to be unique and tangible such as language, food, and artefacts, but they are considered to be special attributes of the ethnic group, whether they be real or imagined, some of which may evolve from their cultural legacy.

The Chinese in Bangka Island used the term *Tong Ngin* to refer to themselves as the descendants (*Ngin*) of a favorable, wise and civilized dynasty (*Tong*). This self-label constitutes a kind of ethnocentrism to indicate that they are different from and superior to the Malays whom they identify as *Fan Ngin* which literally means "people (*Ngin*) who speak sentences with reverse (*Fan*) structures." For instance, as described by one informant, Myung, for the Chinese, a chicken egg is *Kay Cun* (*Kay* is chicken and *Cun* is egg), so the language structure is the same as English, but the Malays call the chicken egg *telur ayam* (*telur* is *Cun* and *ayam* is *Kay*), which becomes *Cun Kay* in Chinese.

The actual meaning of *Fan Ngin* as intended by the Chinese in Bangka Island is "the people who do not keep their words", thus belittling or criticizing the Malays although in daily conversations they may explicitly indicate to the Malays that the Malays are equal to them and that the Malays are good people.

> "The Malays tend not to keep their words. They say yes but what they mean is no. They say *insya Allah* (if God wills) to mean that they will not come." (Myung).

> "Sorry to say that the Malays are labeled *Fan Ngin* by the Chinese. Their life style is not good. When they get the money 1000, they spend 1000 for food, then they work again tomorrow." (Ying)

Many Malays are not aware of the meaning of *Fan Ngin* intended by the Chinese. The Malays do not really care about what stereotypes the Chinese hold about them in their minds as

long as they do not disturb their lives. The Malays as the majority feel that the Chinese know how to interact with the Malays in the way tolerated by the Malays. Thus the Malays let the Chinese work in the economic realm and take advantage. The Malays are aware that they are not as steadfast in pursuing economic goals as the Chinese are.

In the fieldwork we found that the intercultural communication competence of the Chinese in dealing with the Malays is based on their ability to display their cultural identity and to adjust themselves to the cultural (Malay) environment where they live. Their intercultural communication competence is based on two modes of self-presentation, that is, the verbal mode and the nonverbal mode, each model consisting of several tactics. They have to display such ability to preserve their self-image and improve it when necessary. These two modes of impression management are both common and are particularly apparent in daily business face-to-face communication with the Malays. The diagram below shows the tactics of the verbal impression management and those of the nonverbal impression management starting from the most dominant on the left side to the least dominant on the right side.

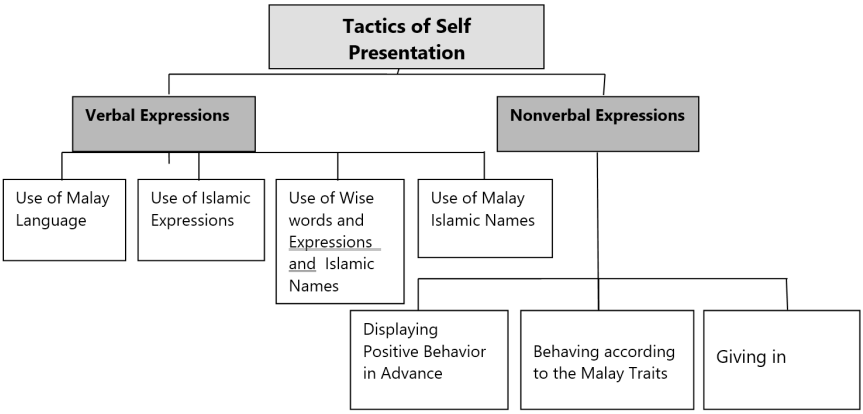


Figure 1. The Chinese Self-Presentation Tactics in Communicating with the Malays in Bangka Island, Indonesia

Verbal tactics of impression management

The verbal mode of self-presentation include: *the use of Malay language, the use of Islamic expressions, the use of wise words or expressions, and the use of Islamic or Malay personal names.*

The Chinese in Bangka Island often use the Malay language in their daily encounters with the Malays, and in business encounters, although they use the Chinese language when they communicate with their fellow Chinese in their internal environment and also in public places when they talk with their Chinese fellows. The Chinese master the local Bangkanese Malay, including its accent and dialect. Some of them speak it in such a way as if they have lost their Chinese identity if observers ignore the physical characteristics, especially their eyes and their lighter skin.

When a small group of Chinese and Malays get together, usually they speak the Malay language. In case a Chinese does not comprehend what another Chinese says in Malay, although this incident is rare, he or she may use Chinese words, phrases or sentences for a while, and then switches back to the Malay language. Our research findings on this verbal code switching among the Chinese in Bangka Island is similar to what Handoko

(2009) found in his research of the Chinese use of the local language in Palembang.

The Chinese know that the Malays like being greeted and do not like to be ignored. They also know that the Malays like small talk before discussing serious business matters. So the Chinese almost always greet the Malays and respond to the Malays' greetings. When meeting others, the Malays will make small talk, for example by asking "*Nek Kemane*?" ("Where are you going?") or "*Apa gawe*?" ("What are you doing?") or "*Ape cerite*?" ("What is the story/news?"). These questions do not always require answers since they are meant to admit the presence of others and at the same time to show kindness to others. These local greetings have become the entry point to enter subsequent conversations because the Malays are well known as people who like chatting.

The *second* tactic shows that the Chinese are fluent in using some Islamic terms and expressions often used by the Malays, although they are not Muslims, such *Assalammualaikum* (Peace be upon you) when they meet their Malay counterparts or when they deliver speeches in front of the Malays. When they are asked how they are or when they hear good news from others they frequently say *Alhamdulillah* (Praise be to Allah) as a sign of gratitude and relief. They even utter *Insya Allah* (if God wills) when they are invited to attend gatherings or when they promise to do something in relation with the Malays. They also often say *Bismillah* (in the Name of God the Most Beneficent the Most Merciful) prior to doing something before the Malays. They utter all those expressions seriously as if they really believe in Islam and comprehend the deeper meanings of the expressions. Ming, a businessman but also a member of the Regional Legislative Council (DPRD), admitted that he says "*Assalamualaikum*" when encountering a Malay or when he begins his speech. He closes his speech by saying *Wabillahi taufiq walhidayah*" (By the guidance of God). He would also say "*Waalaikum salam*" (Peace be upon you too) in answering a Malay's Islamic greeting.

Third, the Chinese impression management is enacted by expressing wise words, phrases or sentences praising themselves in their conversations with the Malays to counter the stereotypes that the Malays have toward them. The Bangkanese Malays have stereotypes that the Chinese in Bangka Island are dishonest, stingy, impolite, rude, and use any means to achieve their business goals, even through deceptions. Based on their experiences in interacting with the Malays, the Chinese in Bangka Island are aware of the Malays' unfavorable perception of them. So in their interaction with the Malays, the Chinese strive to wipe out the negative characteristics of the Chinese as attributed by the Malays. For instance, they often say that honesty is very important to them, since without trust, their business will not succeed.

> "Honesty is like the second soul, yes our second soul. If people do not trust us, it is as if we lose our soul. In Mandarin language: *Xien Yong* (Trust) *Shi* (is) *Di En* (number 2) *Sheng Ming* (Soul)." (Tan).

In their communication with the Malays, the Chinese frequently emphasize the importance of honesty, humility, brotherhood, and similarities between the Chinese and the Malays. For example, they emphasize the teaching of Confucius that all people are brothers and sisters because they live in the same island where the Chinese ancestors came as laborers and where some of them have even married Malays.

> "According to Confucius, all four oceans are brothers. Arrogance invites loss, but humility brings *berkah* (good will / advantage)." (Ming)

> "We are all brothers and sisters. We are not different, no matter where we come from. According to Confucius, people in an island surrounded by oceans are brothers and sisters. In the Chinese language: *Tsi hai Zhai Nei – Se hai Che Nei*." (Tan).

Based on the assumption that the Chinese and the Malays are equal and should respect each other, the Chinese are self-confident and easy-going in their relationships with the Malays.

Fourth, the Chinese impress the Malays by possessing and using Malay or Islamic names such as *Taufik Salim, Halim*

Susanto, Gunawan, dan *Frandi Rusmin*. In their interaction with the Malays, the Chinese prefer to be addressed by their Islamic or Malay names. However, this does not mean that they abandon their Chinese names. They still cherish their Chinese names (using Chinese characters) and use them in their interaction with their Chinese family members, relatives and Chinese business fellows.

The use of Islamic or Malay names is especially important on formal occasions in schools or in government offices, particularly when they communicate with government officials in the process of applying for business permits. They are aware that business permits will be granted faster or more easily if they display some personal symbols such as names, attires, or verbal expressions deemed Islamic or nationalistic.

Nonverbal tactics of impression management

Nonverbal tactics of impression management are related to body language such as body posture and hand gestures, facial expression, head movement, vocal characteristics, silence, and the use of certain cultural ornaments deemed favorable in the eyes of the Malays, and their presence in cultural events. In this context, the Chinese in Bangka Island display three nonverbal tactics of impression management to cultivate favorable impression in the eyes of the Malays.

First, they maintain positive behavior in order to be favorably perceived by the Bangkanese Malays, such as by appearing honest, polite, humble, sociable, patient, hardworking and trusted, to counter the negative stereotypes the Malays have toward them. This positive behavior is often accompanied by body language and certain gestures, such as a little bow and head nodding to indicate politeness, silence and even smiles to overcome confusion, embarrassment or anger.

Smiles or at least a nice face must be shown to the Malays to win their hearts although they are offended by the Malays' statements or actions. Once they offend the Malays,

they will likely lose some of their customers which will mean losing financial profit. The Chinese feel that if they are not kind enough to the Malays, they must try again and again to be kind to be accepted by the Malays. In order to please the Malays, the Chinese do not demonstrate their property and possessions in public in an extreme way, or to the degree that the Malays see them as arrogant. By getting along with the Malays, the Chinese have ample time to seek information about prospective Malay business partners or clients which will in turn give them some knowledge on how to deal with them.

The Chinese in Bangka Island believe that if they display a positive attitude, the Malays will also have a positive attitude toward them. This positive attitude is indicated in such a way and to the degree that they are well liked by the Malays. They are convinced that even if the Malays do not show positive behavior toward them after they have shown their own positive behavior for the first time, the Malays will show their positive behavior after they show their positive behavior after the second, the third, the fourth, or the fifth time. This principle refers to their character, that is, steadfastness and unwillingness to give up in their business. If their initial offer is rejected, they will not surrender and they will not be desperate. Rather, they will make efforts until their second offer, the third, the fourth or even the fifth one, is accepted.

Further exploration of the Chinese interaction with the Malays indicated that some of the Chinese are involved in social activities perceived unfavorably by the Malays, such as gambling and drinking alcohol. However, they just do not give out information about those activities in front of the Malays. They keep such activities hidden. They are aware that the Malays who are basically Muslims consider gambling or drinking alcohol to be Islamically unlawful. According to one subject, Chen, to develop their relationships, the Chinese must cultivate a "positive reputation" or the best image they can. For example, they do not tell the Malays that they like gambling or that they like drinking. In fact, Chen occasionally invites his Chinese friends who are

older than him to gamble in his house to kill time. One of the researchers saw this informant with his four friends gambling at the back of his house, one of them was known to the researcher as an older brother of her high school friend.

Second, they show their behavior according to the attributes of the Malays. For example, although the Chinese in Bangka Island do not like to be involved in long conversations, because they are more occupied with their business, to please the Malays who are keen on long conversations, they let themselves be engaged in long conversations and drink coffee with the Malays. They praise the Malays in terms of their possessions, their characters, their skills or their achievements. They know that the Malays like compliments and praises.

To show that they appreciate the Malay tradition, the Chinese also attend Malay ceremonies, some of them being Islamic, such as circumcision ceremonies, visiting the Malays on the *Idul Fitri* Day (the celebration after the fasting month) or several days after that. During the fasting month the Chinese are not seen eating in public during the day to show tolerance for the religious fasting of the Muslims.

> "Whether the Malays like us or dislike us, it depends on us. We have to adjust our ways to the Malay ways." (Ming)

Third, the Chinese like giving in. They know that the Malays in Bangka Island hate arrogant people and that the Malays are hot tempered and will be quickly angered. They know it is difficult to keep smiling while they are offended or angry. So the Chinese prefer to be silent to avoid interpersonal frictions, even if the Malays are angry with them, because the security and the continuity of their business is more important to them than everything else.

> "I have to play my expressions. If do not like something, I keep smiling. On the other hand, I may like something, but I keep silent." (Chen)

> "A government official may impose on us regulations that do not fit my logic. But I keep saying "Yes." In practice, these regulations are

adjusted to my plan." (Ying)

"When Malays are angry, we keep silent and listen to them. They will realize later that they are wrong. When they apologize to us, we forgive them." (Chang).

Concluding Remarks

In this article we have indicated how the Chinese as the subjects of the study were competent in their intercultural communication, especially in the business context, with the Malays in Bangka Island in Indonesia. They were creative and demonstrated their high flexibility in their communication with the Malays. The symbolic interactionist theory (Mead, 1934), Goffman's concept of impression management (1959), and Goffman's and Ting-Toomey's concept *face* or facework (Littlejohn & Foss, 2009) clearly indicate their benefits in exploring the nature of the Chinese intercultural competence in terms of their communication adaptability and flexibility with Malays in the business context.

We argue that the Chinese in Bangka Island in social as well as business contexts are competent in their intercultural communication with the Malays, both verbally and nonverbally, in the sense that they are skillful in their impression management before the Malays, although they also face some constraints due to the existing stereotypes the Malays have toward them and due to their immutable physical characteristics as Chinese. However, this does not mean that all their communication with the Malays is insincere all the time, especially in the non-business context. This certainly requires another investigation.

The Chinese have attained their intercultural communication competence based on the knowledge about the Malay culture, specifically the Malay language and Malay customs in Bangka Island. Using Goffman's perspective (1959), the information the Chinese have about a Malay helps them to define the situation, enabling them to know in advance what they expect from

the Malay. Consequently, they know what the best way is to induce the response they expect from the Malay. Their cultural communication competence has contributed to their survival and intercultural adjustment in Bangka Island inhabited by the dominant Malay society and to the continuation of their business.

Building a Communication Model amongst the Blind

Kadri & Deddy Mulyana

Eyes have an important role in human communication. Wenburg and Wilmot (1973) refer to the eye as the sense regulator in interpersonal communication. DeVito (2011) considers it the most important nonverbal messaging system. Aristotle (Synnott, 2003) calls the eye the most esteemed sense and part in the human body because the eye is the reflection of one's soul. According to Somantri (2006), the symbolic signals captured by the eyes become the source of everyone's perception because through the eyes, most of the stimulation and information will be accepted and then forwarded to the brain, resulting in a certain impression or perception and particular understanding of the stimulus. Vision (eyes) delivers nonverbal messages to the brain for interpretation. With these functions, the eyes have an important role and contribute greatly to ongoing human communication. Moreover, two-thirds of messages interpreted by the brain are derived from visual stimuli (Mulyana, 2017).

Assuming eyes have an imperative role in human communication, how do blind people communicate with their visually challenged? This study aims to address such a question by exploring communication amongst blind people in the BRC Wyata Guna in Bandung, in the Province of West Java, Indonesia. This focus of study differs from other studies about blind people that do not highlight communication aspects. Bhagotra et al. (2008), for instance, explored the strategy and the types of adaptation used by the blind people in the process of their rehabilitation, while Atmaja (2015) investigated interaction between blind students and general physically normal students in an inclusive educational institution.

Blind people constitute a reality of life who to some extent possess a distinctive communication tradition compared and contrasted with communication traditions of sighted communities. However, their unique communication nature is rarely studied. Much of the research sees blind people and blindness as a problem that requires a solution. A study conducted by Pratama et al. (2016), for instance, designed a technological device to help the needs of blind people in accessing information related to current communication technology such as android-based smartphones. Similarly, a study conducted by Crudden et al (2017) revealed an unfavorable transportation system causing blind people to face mobility obstacles that make them anxious and discouraged to travel and to involve themselves in social interaction. Thus, this study focuses on a community with its unique communication culture that is different from communication amongst sighted people; it is also different from communication between blind people and sighted people. Such a unique communication culture can be found in the rehabilitation center for blind people under this study.

Although social communication amongst blind people is common in the BRC Wyata Guna and in other rehabilitation centers for blind people in Indonesia, so far there has never been a study on such a phenomenon in Indonesia. Such studies have

also been scarce anywhere else outside the country. Since the vast majority of studies have taken sighted people as their subjects, consequently more communication models are based on sighted people's perspective, one of which is indicated in the Berlo's SMCR communication model (Burgoon, 1974) which still puts eyes as a channel of communication. So, to reiterate, this study is different from previous studies, as it attempts to construct a model of blind people's communication amongst themselves to compare and contrast with models of physically sighted people's communication constructed by scholars.

Doing Ethnography

This paper is the result of qualitative research over the years with the ethnographic tradition of the BRC Wyata Guna, Bandung, Indonesia. BRC Wyata Guna was initially founded by Dr. C. A Westhoff, an ophthalmologist from the Netherlands on 6 August 1901. Its management was then taken over by the Indonesian government in 1945 and it has remained so until now. Located in Bandung, the capital city of West Java, as the biggest rehabilitation center for blind people in the country BRC provides education, skills, mental, physical and social development for blind people based on a dormitory system and consultation by appoinment. This oldest blind rehabilitation center in Indonesia is considered appropriate for collecting data related to the communication amongst the blind because blind people here come from the different backgrounds of region, history of blindness, and age, so comprehensive data can be obtained. This study was conducted in the period of two months although data about the informants and the BRC Wyata Guna had been collected prior to the study as part of a larger project.

The data come from 40 blind people (9 females and 31 males) as informants. In-depth interviews, observation, and documentation were employed as research techniques. The researchers observed

the phenomenon of communication amongst the blind, either in public spaces or private ones with the agreement from the informants. The researchers also documented their activities related to the nature of their communication. This study utilizes the five stages of data analysis as put forward by Creswell (2016), namely: preparing data, reading data, coding data, developing themes, and interpreting the themes emerging from the data. So basically the study is qualitative and inductive in its approach.The process of analysis involves the identification of interconnected significant sets of data (narratives) emerging from interviews and observation to develop concepts, themes or model as the results of the study. In order to maintain informants' privacy, the writing of their names in this research uses initials. All research results have been confirmed and informed to the informants so that the accuracy of the data in this study is accountable.

The Blind in Action

The communication amongst the blind in some aspects is different from the communication of people in general. These differences are caused by the dysfunction of visual (eye) sense that is normally the dominant channel in human communication. With this visual dysfunction, the communication amongst the blind practically relies on hearing, smelling, touching, and tasting. However, of the four-sense devices that are still functioning, the most dominant use is the sense of touching and listening. The phenomenon of communication amongst the blind can be described in two types of communication, i.e. verbal communication and nonverbal communication.

Vocal verbal communication amongst the blind

In addition to the sense of touch, the sense of hearing in the blind is also very sharp and serves as the main channel in communication, especially to capture vocal-verbal communication messages from their communication partners or other message

sources. Most of the messages are received by the blind through the sense of hearing (ears). Hearing for the blind is much more important than the hearing for people in general because vision (eyes) as a communication channel cannot be utilized due to the blindness.

In the learning process for example, blind people often use the tape recorder facility to document subject materials provided by the instructor. Furthermore, the recording is played or heard in the dormitory. In the researchers' observation, the tradition of learning like this is more often applied by blind people who experience blindness in adulthood because Braille-writing culture is not too familiar to them.

In addition to utilizing the sense of hearing as a communication channel to capture messages, the blind people also use their ears to capture verbal (voice) instructions as a guide to their mobility orientation. The researchers often witnessed the phenomenon of communication amongst the blind that uses sound cues such as clapping, tapping thighs, whistling, singing, clicking the tongue, hitting spoons onto plates while in the dining room, and ringing whatever can be sounded. This is done as a gesture to state and show their position so that they can avoid body collision. This way of communication is usually done by the blind when they are in a place with other blind people, such as walking from the ablution to the mosque, while walking in the dining room, while having an activity in the hall, or while walking on a street in the complex of BRC Wyata Guna.

Body collision amongst the blind often occurs if they do not use sound cues while walking in public facilities, such as in the mosque, especially when some blind people who have performed their prayers are leaving the mosque and some other blind people who come late (*masbuq*) for prayers continue their prayers at the rearmost *'shaf'* (row). Because the blind people who are praying cannot sound the typical cues, those who want to exit from the mosque often bump into the blind who are praying. Body

collision also often occurs on the street in the complex of BRC Wyata Guna, when the blind do not use any cues while walking.

Sound cues are also used for the blind to recognize time. Because of the visual dysfunction experienced by the blind, they are unable to see a watch as is normally done by people in general. They have a particular watch that when the button is pressed it will automatically tell the time. When the researchers first mingled with them, the researchers were surprised and amazed by this sudden sound telling the time. Out of curiosity, one of the researchers asked one of them. "*This is what sounds, Sir. This is a special watch for the blind, Sir. So if this button is pressed, we are directly informed the exact time*." That was how one of them responded to the researcher's question.

In addition to being the cues and guidance of mobility orientation as well as the time teller, the sound received by the blind is also a reference for them to conceptualize and define the meaning of something. Even the concept of beauty (beautiful women) for the blind is not based on the face and appearance or performance like the standard of people in general. Beautiful women for the blind are those who have a melodious, pampered and sensual voice.

This tendency is understandable considering they have this visual limitation. This limitation is what makes the blind utilize more their audio potential or capabilities. Audio utilization is also applicable in the selection of lovers for them. A melodious, indulgent, lovable, and seductive voice is the voice that 'stimulates' the feeling of love and caring of the blind. They do not care whether the owner of the melodious and indulgent voice has flat or sharp nose, dark or fair skin, straight or curly hair.

One day, one of them was pouring his heart out to the researchers and said that he desired to love another blind girl. This blind man was asking the researchers for help to be introduced to one of the girls. Using the standard of beauty for people in general, the researchers 'promoted' a blind girl from

Aceh who is beautiful to him. He quickly refused, and said; "Oh Sir, that girl is quiet and seldom talks, Sir. How do we know if she is beautiful and not". Apparently the phrase in Indonesian *"Dari mana datangnya cinta, dari mata turun ke hati"* (Where does love come from; it is coming from the eyes down to the heart) does not apply to the blind. Without the eyes the blind can directly feel that love comes down to their heart through their ears. Therefore, the phrase can be changed into the blind version; "Where does love comes from, from the ears coming down to heart".

When the researchers were talking with five blind men in a relaxed and intimate atmosphere, in a friendly intonation and expression the researchers asked them about the criteria of women they want. The five blind men replied that the melodious voice, lively nature and clever ways of speaking are the criteria of the blind women that they desired. At that time the researchers were informed about the presence of a new blind girl in BRC Wyata Guna, suddenly one of the blind who knew this woman immediately cut the researchers's talk by saying, *"Yes Sir, she is beautiful, her voice is very melodious, and she is very enthusistic when she speaks*."

The story of beauty criteria according to the blind version above at least shows how valuable messages or verbal gestures are for them in communicating. The above experience also implies that the meaning and definition of things are subjective and related to the capacity and experience of the person who gives the meaning. So it is quite possible that the same object is interpreted differently by people from different backgrounds or experiences, including the difference of experiences and physical capacities.

Voice (verbal messages) becomes one of the main types of message sources in blind communication. In communicating with their blind fellows, voice becomes their communication guide. The blind communication in some games/sports competitions such as football, table tennis, and volleyball obviously shows the importance of verbal messages (voice) for their communication.

In football games for example, although there are rules of the same game for people in general, in the blind football there are certain sounds that become the guide for the players, such as the ball filled with pebbles so that they know where they have to chase the ball. Behind the goal is also placed something that can sound, like a drum or tin so that they know which way the ball should be aimed. The same way (in order to complete the rules of the game with the sound) is also applied in other games such as table tennis and volleyball.

The limitation of the blind to know their own performance and ages minimizes the gap between the old and young blind in socializing and communicating. Socialization (communication) across the different ages amongst the blind is the view that is commonly seen in their daily activities. To use Hall's (1976) concepts, Indonesians embrace high-context culture and therefore high-context communication which contains messages mostly inherent in the physical context, so that the message can only be understood in that context. In addition, as Mulyana (2016) suggests, in high-context culture like Indonesia, more nonverbal messages are used and emphasized. So here people usually use more polite expressions when talking to elder partners. However, interestingly, this high-context communication sometimes does not apply in BRC Wyata Guna. For example, young blind people do not show a more polite attitude and call to the elder blind people, as is commonly done by people in general.

Most blind people greet their friends by first name. RK, for example, whose age is still 20 years old and not married simply calls "Wir" to Wirya who is 30 years old and a widower with one child. Although it sounds more egalitarian, that call contrasts with the culture of the Indonesian people who used to call *"Kak"* (elder brother), *"Akang"* (elder brother in *Sundanese*) or *"Pak"* (Sir) to the elder.

The atmosphere of the blind communication in the complex of BRC Wyata Guna is like a 'blind village', which is full of life dynamics. As the life of people in general in a village, the daily

communication of the blind goes on in a varied atmosphere; occasionally the communication between them takes place in a tense atmosphere, sometimes in a cheerful mood with a variety of blind humor, and also often features the romantic atmosphere in their lives.

The tension in the blind relationship is not particularly prominent. If it happens, it is normally only a small conflict involving few blind people. Before entering the institution or when they were visually normal, they were familiar with the life style of 'thugs' that were often in conflict. Although the researchers did not see the fight directly, the researchers were told by some blind people about the fight between RK and one of the other blind people. RK also confirmed when the researchers asked about it. Starting from the story of this fight, the researchers know that the life of RK in the past was full of dark record such as his habit of fighting and getting drunk.

The atmosphere of communication and relationships amongst the blind takes place in a more cheerful nature with the typical jokes of the blind. The existence of the institution for the blind is very helpful to build confidence because they are in a quarantine type of atmosphere and able to meet people who suffer from the same fate (they do not feel that they are on their own). The happiness phenomenon seen in their daily activities cannot be separated from their psychological condition that they feel the pleasure and peace in BRC Wyata Guna.

The blind's pleasure is visible as they gather and exchange experiences in a cheerful atmosphere interspersed with their typical jokes. Their joking content is sometimes associated with their identity/perception of the blindness that befalls them. When walking past in front of one of their dormitories in BRC Wyata Guna, the researchers 'overheard' a conversation involving four blind people. Although the researchers did not follow their conversation from the beginning, from the content of the conversation that researchers had heard they were listening to a new blind person who entered the BRC Wyata Guna (FZ)

talking about the story of his blindness. In front of his three new friends, the new resident told them that he suffered from blindness because of an accident (falling from a motorcycle). "So it is your motorcycle that made you blind?" Said ND. Before being answered by FZ, ND went on to say, *"What made me blind was not a motorcycle, but a cock."* *"What does that mean?"* Asked FZ in surprise. *"Yes, a shuttlecock hit me when I was playing batminton"* ND explained. "*What made me blind was a ball too, but it was a football,*" said AB who tried to join the conversation. "*But we are still better. We become blind because of a bike, a ball and a shuttlecock. Kang Wawan in Cerdrawasih has become blind because he was hit by a Metro Mini (public minibus)",* said YS who tried to continue the talk that was paused for a few seconds. "*Oh! That is more exciting, indeed,*" FZ commented, which made the four of them laugh together.

Nonverbal communication amongst the blind

The sense of touch is one of the five senses that are often used by the blind in communicating, especially when communicating amongst themselves. The sense of touch helps many of them to identify each object or to capture nonverbal messages (other than voice). With the malfunction of the visual sense and due to the factor of habit, the blind touch senses are very sharp when compared to the sense of touch of human beings in general. The sharpness of palpability can be seen from the activities and everyday communication of the blind who rely heavily on palpability techniques.

Some forms of the blind nonverbal communication can be seen from their daily activities in the rehabilitation of the blind. When blind people walk alone in public space, they show some body language (nonverbal communication) as their habit to reach forward when walking, as a buffer to avoid body collision with the other blind or with objects in front of them.



Blind people in BRC Wyata Guna (Photo: Kadri)

In the context of education or learning, the blind touch communication is used to read Braille language books because all textbooks used by the blind are always printed in Braille. The ability to read the Braille texts is the requirement or basic ability that must be owned by the blind who attend education and rehabilitation in BRC Wyata Guna. With that condition, then there is no option for them not to learn and master the writing and reading of Braille. In addition to reading general lessons, palpability is also used to recite the Qur'an because the Braille Qur'an has been provided for them.

In their daily activities in the complex of BRC Wyata Guna, touch communication is always used. Therefore, in the early days of their presence in BRC Wyata Guna, blind people are taught the orientation of mobility (OM) by making the technique of touch as a directional guide for the blind. The construction of buildings and other facilities in BRC Wyata Guna was designed in a particular way to facilitate the orientation of the blind mobility.

The existing road in the complex of BRC Wyata Guna for example always has a left and the right borders in the form of concrete that can serve them as a walk guide.

One of the main forms of communication amongst the blind is the sense of touch. There are three types and purposes of touch in communication amongst the blind, i.e. touch of mobility, touch of friendship, and romantic touch. The differences between the three types of touch can be explained as follows. *First*, **the touch of mobility** is the touch of the blind while walking by holding hands or shoulders, with the aim of maintaining direction and orientation so they do not get lost (misdirected). Normally, the one who is walking in front is the one who still has a little vision (low vision) or a total blind person but has already become familiar with the dormitory environment as the direction guide. The touch of mobility usually involves two to seven blind men and women in one group. This mobility touch is more often conducted by the blind when performing mobility from one place to another within the rehabilitation institution.

In the observation of the researchers throughout the day (from waking up to going back to bed), generally there are some moments that allow touch of mobility performed by the blind, such as when the blind go to and return from the mosque to perform congregational prayers (from dawn prayers to evening prayers). On the way from the dorm to the dining room for breakfast, lunch, and dinner they also perform this touch of mobility. The same touch is also done by the blind as they go to the field to follow the morning ceremony, and then proceed as they head to their own classes, until they return to the dorm. At night before the blind sleep, they usually interact across dormitories with the touch of mobility to walk from one dormitory to the other.

Second, **the touch of friendship** is the blind touch that takes place in an atmosphere of intimacy with the aim of strengthening

the friendship between them. The touch of friendship is usually done by blind fellows with the same sex, and is usually done by hugging, holding hands while sitting and chatting in the dorm or in the classroom.

The touch of friendship done by the blind can indicate a level of intimacy between them. Like people in general, blind people also have close friends from the same sex. In the researchers' observation, the touch (grip) of a person with his close friend is different from the touch he does to the blind who is not a close friend. The touch with intimate friends is not only limited to a firm hand grip, but also hugging or holding each other's shoulders. However, the touch with the blind who is not a close friend is done casually.

Third, **the touch of romance** is a touch that is done by the blind couples in order to express the affection between them. This touch is usually done by couples who are dating each other by holding hands or shoulders with intimacy. Being blind does not make people unemotional. They still want to feel and give love.

Many touches of romance occurred, and the researchers could observe while they are dating, especially on Saturday night. Some dating couples who chose the dorm living room as a place to chat also did this touch of romance, by holding hands. A more intimate romantic touch is usually shown by the blind couples who choose a place on the corners of the classroom or dormitory. Besides sitting in the dormitory and other spots outside the dorm, the blind dating is also done by walking hand in hand around the dormitory area. In the observation of the researchers, each couple walks around the area of BRC Wyata Guna for three to seven rotations, while chatting, teasing and joking.

The eye dysfunction of the blind makes the world dark for them, so they also do not know that there are other people watching their courtship behavior. This limitation is also what makes them feel free to do romantic touches anywhere and

anytime. The phenomenon of courtship and romantic touches as described above is done by most of the blind who have grown up.

The age factor is not an obstacle in blind dating. Sometimes the women are older than the men are or vice versa. The blind's dating does not recognize the time and place. They can do it in the morning, at noon, or night, and it can be in places like dormitory, classroom, dining room, dormitory terrace, garden, classroom terrace, and other areas in BRC Wyata Guna. However, the Saturday night is a special date for them. They (especially the blind men) normally prepare themselves since afternoon in order to spend their long night with their girlfriends.

The constraint of the blind to know and understand the surrounding phenomena makes blind couples less concerned with how other people respond to what they do, so that observers (like the researchers) often witness a unique moment, like one moment at the dormitory porch lined several blind pairs who are dating without feeling bothered with the other couples around them. This is because they do not really know there are other couples sitting around them. While some couples were dating, other blind people who happened to have no partners casually passed around. Again, the existence of other blind people does not make the blind couples feel awkward or worried.

Developing a Model

The communication of the blind in a certain way is different from the one of people in general. The awareness of the blind of their eye dysfunction makes them optimize other remaining senses. This reality indicates the blind's level of awareness in communication guided by their subjective desires and motives. For Weber (Thompson &Tunstall, 1971), human action is essentially meaningful, involving interpretation, thinking, and deliberation. Social action is a deliberate act for others and for

the actor himself, where his thoughts actively interact with each other's behavior, communicate and interact with one another. In general, eye defects experienced by the blind do not cause the other parts of the body (other senses) not to function so that the blind can still feel and interpret the presence of others. It satisfies another criterion of social action that is *"when the individual orients his or her acts to others besides self"* (Charon, 1979).

In the middle of the impedement of the eyes, the blind can build a distinctive communication tradition of the consciousness they have. Blind people have their own tradition of dating, games and sports that are in some ways different from what people do in general. It can be interpreted as the blind's effort to build a typical world of daily life, or in the social construction theory of Berger and Luckmann it is referred to as an attempt to form a social world of the reality. According to Berger and Luckmann (Poloma, 2000), the objective social reality exists, but its meaning comes from and by the subjective relations of the individuals with the objective world.

For Berger and Luckmann (1990), the individual is as the product and simultaneously as the creator of the social order, so that the society is interpreted as the subjective reality that is the result of the construction of individuals through the process of socialization and the transformation process of the subjective reality. Blind people are social actors who have free will and communicate (do activities) with full of awareness. Blind people have the ability to form and construct their communication reality themselves based on their desires and subjective views.

The daily world of blind people is freely constructed by them for their subjective desires. In the group communication they do, it is often found that the topics of typical conversation of the blind are hard to find in the community of people in general. Even in an intimate and joking atmosphere, they discuss the identity of the blindness they have by exchanging information about the history of their blindness. It is common for them to discuss a topic that stimulates the participation of all blind people. This

chain of communication messages is associated with the fantasy theme as coined by Ernest Bormann in his Symbolic Convergence Theory. This theory attempts to explicate how people collectively share symbolic awareness by exchanging messages (Bormann, 1985; Venus, 2007). This social phenomenon also characterizes human beings, even blind people, as *Homo Narrans* (storytelling humans).

These exchanges and meanings of symbolic messages of the blind are relevant to the theoretical assumptions of human activity according to the theory of symbolic interaction which views human activities as a distinctive activity of communication or the exchange of meaningful symbols (see Mulyana, 2018). Like humans in general, blind people use vebal and nonverbal symbols when communicating. However, the dysfunction of the eyes makes them optimize the tradition of oral and auditory verbal communication, and nonverbal communication through touch, or better known as *haptic communication* (see DeVito, 2011).

It is in this context that the blind communication is different from that of human communication in general. The typical communication model of the blind is never found in the communication science literature because all the models constructed by communication scientists are always the perspective of people in general. The SMCR communication model of David K. Berlo (Burgoon, 1974) for example, explicitly includes the eyes as a communication channel. In the midst of the void of communication models with the blind perspectives, the results of this study serve as a basis for constructing the blind communication model (see Figure 1).

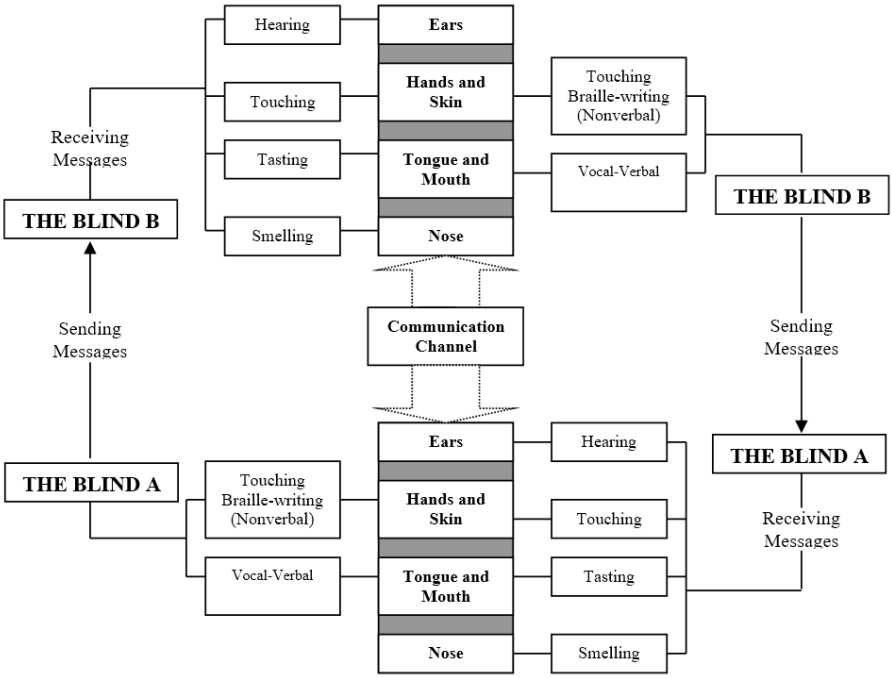


Figure 1: Communication Model amongst the Blind

In the blind communication model, it is clear that the four main senses of the blind (the Blind A and the Blind B) can still function as their communication channels. Each of the remaining sense organs of the blind (hearing, touch, smell, and taste) plays an active role in receiving every message from their communication partners (specifically their fellow blind). Due to the dysfunction of the eyes, visual communication messages are not useful in the blind communication. The sources of messages used by the blind are: (1) auditory verbal, vocal nonverbal, nonvocal verbal messages like Braille reading. This message is captured by the blind by hearing and using ears; (2) messages that come from non-living or living things that can be palpated by the blind with their hands and skin. Therefore, it can be said that the activities of hearing, touching, feeling, and sniffing are ways of the blind capture messages originating from the other blind people.

In communicating (especially sending messages) with the blind fellows, only two sensory devices can be used, i.e. the tongue (mouth) and the skin (hands). With these two media to convey the messages to the other blind, practically there are only two ways that the blind communicate their messages, as follows:

First, the message is delivered by touch. This way of delivering messages is a type of nonverbal message delivery (nonverbal communication), or in the term of DeVito (2011) this is called as haptic communication. The delivery of messages by way of touch in the blind communication can be seen from the way they do when walking in front of the blind crowd by reaching their arms forward as their gestures/messages that seem to say that they are asking for a way or informing that they are walking past. Although this method is not really often done by the blind, the tradition of nonverbal communication becomes a distinctive reality in the blind communication. The delivery of messages by hands in the blind communication is also done through written communication – Braille writing. Therefore, communication with the Braille language becomes one of the typical types of the blind communication. The communication through Braille language can be categorized as haptic communication, because seen from the process of writing until the reading it always involves touching of the blind person's hands.

Second, the blind convey their messages to other blind people by verbal means (vocal-verbal communication). The communication in this way is more often done by the blind because the delivery of the information directly by oral means is more effective for blind communication. In every communication of the blind wherever possible they modify the messages in verbal forms. Sound is very meaningful for the blind communication, so that the hands, thighs, and other body parts are sounded as a signal to ask for a way or just to inform their position so that there is no body collision between them.

The typical communication tradition in which blind people (the Blind A and the Blind B) are engaged as explicated above

explicitly indicates a distinctive way and a distinctive function of verbal and nonverbal communication. It is different from the way and the function of verbal and nonverbal communication amongst sighted people in general. Verbal messages are conveyed by blind people not only to give instructions or requests as done by sighted people, but also to indicate the location where they are to avoid body collision.

Vocal verbal messages are used by blind people as a standard to assess a person's attitude and performance, his or her personality, and even his or her look, something that is not always done by sighted people. In the context of nonverbal communication, blind people can only grasp nonverbal messages through touch, while sighted people use their eyes to capture the meaning of his or her communication partner's nonverbal messages.

Some differences between the people with disabilities (like the blind) and people without impairment within certain limits will sometimes make communication between them hindered. Coleman and DePaulo (1991) say that communication between people with disabilities and people without disabilities has the potential to result in miscommunication. For example, people in general have negative stereotypes about people with disabilities. People with disabilities are seen as "*dependent, socially isolated, emotionally unstable, or depressed, highly sensitive, and easy to resist, especially because of their limitations. They also assume that people with disabilities will look at them with suspicion*" (Coleman & DePaulo in Gudykunst & Kim, 2003).

Final Thoughts

The eye dysfunction of the blind makes the pattern and tradition of their communication different from people in general. Blind people only rely on the senses other than the eyes to communicate within the environment, especially using the

tongue (mouth) and skin to convey messages and take advantage of the senses of skin and ears when receiving messages. The eye dysfunction also makes them communicate only by vocal verbal and nonverbal touch.

The process and the typical patterns of communication amongst blind people as delineated in this study is condensed into the communication model as illustrated above. This unique model of communication amongst blind people is not only needed for academic purposes to contrast with models of communication amongst sighted people, but also to induce awareness and sensitivity amongst sighted people so that they become more empathetic when communicating with blind people. Hopefully this possibility will in turn lead to the more inclusive and more natural communication between the two parties.

Communication Barriers between Medical Practitioners and Patients

Deddy Mulyana, Susanne Dida, Jenny Ratna Suminar & Sri Seti Indriani

With a population of over 270 million people, Indonesia has its own unique issues in the field of heathcare and disease. These problems include, among others, the lack of health facilities; the lack of medical practitioners throughout the country, especially in villages that are out of reach; inadequate government management of public health; and problems related to communication between medical practitioners and patients.

Long ago, the chair of YLKI (*YayasanLembagaKonsumen Indonesia,* or the Foundation of Indonesian Consumers) Indah Sukmaningsih, admitted that the main problem facing healthcare in Indonesia was the ineffective communication process between medical practitioners and patients (Rinawati, 2008). The argument is still valid, and even more so today. It is estimated that almost one million Indonesians travel overseas, especially to Singapore

and Malaysia, to receive medical treatment (Ormond, 2015). One of the main causes of this phenomenon is the relative inabiltiy of medical practitioners and hospitals in Indonesia to communicate effectively with patients, resulting in patient dissatisfaction with their treatment.

Medical practitioners and patients may have differences not only in their understanding of a desease or illness, its causes, and the best course of treatment, but also in the way they communicate verbally and nonverbally. If either party does not adapt well in a communication encounter, a more serious misunderstanding will likely occur. Medical practitioners and patients are essentially two disctint groups; each of them has unique way of communicating. Cultural differences between them may make the problem even more complex, since every culture is comprised of specific cultural beliefs, and values connected to language, religion, and worldview.

Medical practitioners and patients not only need to think about how to seek solutions in treating a desease or illness; they also need to consider the way they interact with each other. Effective communication is the core of healthcare and health promotion (Berry, 2007; Gully, 2007; Rosenbaum & Silverman, 2014; Villagran & Weathers, 2015). Effective interpersonal communication has become imperative, as health professionals have to negotiate work practices in order to ensure job satisfaction, and to creatively deal with workplace changes (Glass, 2010). Myerscough and Ford (in Eckler et al., 2009) contend that "Communication is the most common cause for complaints from patients, and an apparent weak point among doctors".

Health communication has now become a concern for researchers as a result of many cases of medical malpractice. Statistics have shown that 98,000 patients die all over the world every year due to medical malpractice (Hannawa, 2009). This tragedy has been called a 'hidden epidemic' because the associated medical practitioners, patients, and hospital staff chose not to talk about it (Carmack, 2010). In Indonesia alone, the number of such cases is significant. There were 40 reported

cases of medical malpractice in Indonesia in the year of 2009, and another 20 cases from January to July 2010 (surabaya.detik.com, August 1, 2010). The deaths of the celebrity Sukma Ayu (2004); a woman named Siska Makatey, during childbirth (2013); and the death of a baby named Debora, who was rejected by a hospital (2017), are among numerous cases highlighting medical practitioners' negligence of their duty. A large number of medical disputes between medical practitioners and hospitals on one side, and patients on the other side, have been brought to court. The most controversial and notable case, known as the Prita case, occured during the period of 2009-2012.

As Mulyana and Verity (2016) illustrate, Prita Mulyasari, a resident in Tangerang, Indonesia, was involved in a legal dispute with Omni International Hospital. The legal battle was initiated by the Hospital in response to an e-mail Prita sent to family, friends and colleagues regarding her healthcare experience at the hospital: an e-mail that subsequently went viral. Remanded in custody for three weeks in 2009, Prita was charged under relatively new Indonesian civil legislation, which was introduced in 2008 with the purpose of regulating digital communication. The Hospital argued that Prita's e-mail was defamatory, and damaged the reputation of the attending medical practitioners, and the Hospital. In the end, assisted by mass social support, as well as by the involvement of some notable political figures, Prita won the legal battle against the hospital.

In a country like Indonesia that consists of hundreds of ethnic groups, each with their own culture, and where paternalistic values are still dominant, the role of therapeutic communication may be greater than that in more liberal Western countries. In Indonesia, many medical practitioners still consider patients to be passive objects of medical practice, failing to acknowledge the fact that patients themselves have a right to know the details regarding their condition and treatment. Moreover, many patients are reluctant to ask questions about their health to their medical practitioners, because they consider themselves to be of a lower social status.

In the era of globalization it is essential that medical practitioners possess intercultural competence in interacting with patients who may come from various cultural backgrounds. Medical practitioners need to recognize how patients understand their illness and its causes. Patients may exhibit verbal and nonverbal behaviors, the meanings of which should not be taken for granted, as these meanings may be culturally specific. Although medical practitioners do not have to agree with their patients' health beliefs, they should acknowledge and respect the patients' 'illness experience' beyond the confines of a biomedical system (Flynn et al., 2014)

So far, research on medical practitioner-patient communication is more likely to be based on patients' perspectives (see for example Howthorne et al., 2000; Park& Song, 2004; Boot et al., 2009). We suspect that medical practitioners have similar concerns regarding these barriers, but may have different views which must be understood.

Medical Practitioner – Patient Communication

Communication between medical practitioners and patients is a complex process. As suggested by Edelmannn (in Berry, 2007), in most cases clinical interaction can be considered as communication between two different cultures: the medical culture and the patient culture. On the one hand the patients are expected to be open and frank, and on the other hand medical practitioners are demanded to be trustworthy and reliable. Medical practitioners are expected to have the ability to open a conversation with the patient by actively listening and showing empathy, while patients are required to be proactive and cooperative in their treatment, and to put their trust in the medical practitioners. As such, barriers of communication between both sides are inevitable, no matter small they are.

Lubinski and Welland (in Park & Song, 2005) stated that some barriers relate to stereotyping, as well as the lack of competence in understanding basic medical termimonology. Hie (in Pramujiono, 2008) referred to four factors that led to ineffective communication between medical practitioners and patients: (1) economic factors; (2) factors relating to the perceived "arrogance" of medical practitioners, who perceive their patients to be ignorant about health; (3) communication competence factors between medical practitioners and patients; and (4) aspects of patient behavior: for instance asking questions that exasperate the medical practitioners.

Hardee and Platt (2010) found four communication barriers between medical practitioners and patients: (a) lack of time; (b) 'pandora's box': a situation where a patient vents his/her emotions (sadness, fear, frustration, depression, etc) to the medical practitioner; (c) burn out: a situation when medical practitioners feel overwhelmed, frustrated, and tired as a result of the large number of patients requiring treatment; and (d) not knowing what to say; that is, medical practitioners just do not know what to say when responding to patients' problematic ideas, feelings, and values.

Medical practitioner-patient communication styles affect a number of patient behaviors and outcomes, including physiological outcomes, compliance to treatment, and, most importantly, patient satisfaction with care (Dutta, 2009). Research shows that better communication has led to better health outcomes, higher levels of satisfaction, lower stress and anxiety, increased compliance, better understanding of treatment risks, shorter hospital stays, and fewer medical errors and malpractice lawsuits (Berry, 2007; Eckler et al., 2009). Having accurate information about a patient is crucial to diagnosing his/her illness and deciding on the appropriate course of treatment. Through communication, patients can vent their problems, which in itself is a form of healing (Hardhiyani, 2013). In their study of families with children suffering from cancer in a Jakarta hospital, Rahmawati et al (2017) indicated that the satisfaction

of families is connected with the efficacy of the medical providers' communication when dealing with their clients. The result indicated that 56.5% of the respondents were satisfied with the therapeutic communication provided by nursing staff; those who practiced therapeutic communication well were 22 times more likely to be deemed satisfactory by families of child cancer patients, as compared with those who did not apply good therapeutic communication.

Communication between medical practitioners and patients who come from different cultures is more difficult and challenging. When medical practitioners and patients are from the same culture, medical consultation lasts longer, and patients behave more favourably towards medical practitioners (Haskard et al., 2009). Hughman (2009) contends that effective therapeutic communication requires medical practitioners to be aware of the intercultural prejudices in themselves as well as in others. He warns us that members of the dominant ethnic group may regard themselves as superior, while considering others inferior in terms of intelligence and rationality. Such a situation may create friction between medical practitioners and patients, as found by Priebe et al (2011) in their study in Europe. The study indicated eight obstacles that medical practitioners and patients are often faced with (1) language barrier, which includes misinterpretations likely to occur, in spite of the provision of hospital translators; (2) problems relating to patients whose healthcare was not facilitated by the government; (3) dealing with patients who have suffered traumatic experiences; (4) dealing with patients who were not aware of the health system; (5) comprehending illness and treatment differently; (6) different expectations of proper medical examination and treatment because of different cultural and religious backgrounds; (7) negative attitudes of staff toward patients, and vice versa; and (8) the lack of access to medical records.

A more recent study (Clough et al., 2013) found that four barriers faced by Asian migrants to engaging in the U.S. health

care system are: (1) language differences between providers and patients; (2) beliefs about health and cultural incompetency of health systems; (3) accessing health services; and (4) discrimination in the healthcare system. More specifically Taylor et al (2013) examined medical professionals' perceptions of healthcare barriers encountered by people from ethnic minorities in the United Kingdom who had poor or no English language skills. They found the following barriers: (1) language; (2) low literacy; (3) lack of understanding; (4) attitudes, gender attitudes and health beliefs; and (5) retention of information.

Medical practitioners and patients interact symbolically, whereby each of them interprets the verbal and nonverbal cues, which are interpreted differently by both sides. Humans are creative in their use of concepts and labels. In Berger and Luckmann's (1966) theory of social construction, the patient's illness is a symbolic interplay between the medical practitioners' consciousness and consciousness of the patient. Knowledge of the illness is negotiated between the medical practitioners and the patient. In other words, "people interpret and make meaning of bodily, physical, and psychological states often in very culturally specific ways" (Ho, 2015).

Working from the assumption that one's illness is a social construction, it can be deduced that there is no single true reality; rather, reality may be interpreted differently by the medical practitioners and the patient. Based on this phenomenological stance, language is used to negotiate the illness by both parties. They are continuously involved in the production and reproduction of the meaning of the illness, as expressed in their verbal and nonverbal communication with each other. Using the social construction theory, individuals with different social and cultural backgrounds, including medical practitioners themselves, may attribute different meanings to the same ailment. Different medical practitioners may perceive similar symptoms differently, and hence offer different solutions.

Any research that considers the subjective position of human beings and reveals personal experience, is what is usually referred to as the phenomenological approach. In this instance, the focus of our research is the medical practitioners' experience. When encountering a patient, symbolic interaction occurs between the medical practitioner and the patient, just as a symbolic interaction also occurs between the medical practitioners as informants, and us as researchers. The researchers interpret medical practitioners' narratives concerning the barriers they have experienced in dealing with their patients, then categorize them into new patterns or themes, which approximate what Schutz (1971) calls 'the second degree constructs.'

According to the symbolic interaction theory as formulated by George Herbert Mead (Mulyana, 2001, 2012) which is a variant of the phenomenological perspective, the exchange of symbols that are given meanings is an important characteristic of human activities. Symbolism does not only include language but also every aspect of human actions. This is not a new idea, even though sholars of symbolic interaction put language in its own special place. The essence of this theory states that humans are highly active and dynamic beings, and are capable of interpretting both their own experience and the experiences of other.

Interviewing Medical Practitioners

In line with this perspective, the method used in this research is a qualitative one based on a phenomenological perspective with semi-structured interviews. It explores a phenomenon in detail that is experienced by the individuals in their everyday life. It concludes with a description about the essence of 'what' they have experienced and 'how' they have experienced it.

Littlejohn and Foss (2005) described how every individual interprets his/her own life experiences, until at a certain point

in life when he/she understands the world, or 'life', from his/her personal experiences. The process of acknowledging these experiences is a basic tennet of phenomenology. Cresswell (2013) noted some defining features of a phenomenological study: He stated that a phenomenon that is experienced by individuals must be explored and discussed thoroughly. The interview data should be analyzed thematically (Miles & Huberman, 1994). The themes ought to be related to the way medical practitioners, as the subjects of the study, describe their life experiences including their careers; the way they communicate (including specific terms that the actors use to describe their life experiences and their communication practice); and the way they use their knowledge and experience in managing communication and making decisions. More specifically, the study has selected and focused on the core theme, that is, communication barriers beween medical practitioners and their patients. It is this core theme that will be analyzed and function as guide to produce the research results.

For the purpose of this research, namely, to identify communication barriers medical practitioners experience when dealing with their patients, we have interviewed 28 medical practitioners. These informants consist of 19 medical specialists (one surgeon, two orthopedic specialists, three internists, two neurologists, one dermatologist, one radiologist, one ophthalmologist, two nutritionists, one beauty specialist, one orthodontist, and four dentists), as well as nine general practitioners. In terms of gender, we interviewed more female informants than male ones. Their ages ranged from 28 to 69. They belong to several ethnic groups: Sundanese, Javanese, Batak and Minangkabau, among others. These medical practitioners have all experienced similar phenomena, which have involved encountering barriers to communicate effectively with their patients.

The data collection technique used in this research involved semi-structured interviews. This technique is crucial in qualitative

research, enabling the gathering of data which are both complete and accurate. The duration of each interview varied from 20 minutes to one hour, several medical practitioners were interviewed twice, owing to the variable availability of each informant. In many cases it was difficult to make appointments due to family and work commitments of the informants.

Barriers of Communication

As a result of our interviews with the 28 informants, which focused on communication barriers between medical practitioners and patients, several categories of communication barriers emerged, as follows:



A dentist in consultation with her patient (photo: Gilang Yubiliana)

Cultural Differences Barrier

Every culture has a distinct perspective of effective healthcare treatment and its ethicality (Lloyd & Bor, 2009). Conceptions of health and illness are influenced by cultural, ethnic, religious gender-related beliefs and values, and even their family upbringing (Schiavo, 2007). In our research, it was observed that different cultural backgrounds also constitute one of the main barriers to effective communication between medical practitioners and patients. Medical practitioners and patients may come from a diverse range of cultural backgrounds, and may belong to different racial, ethnic and religious groups. Research indicates that medical practitioners' intercultural communication competence is related to their level of empathy, bilingualism, and intercultural experience (Gibson &Zhong, 2005).

In Indonesia, it is common for medical practitioners to be mobile throughout the country. They may move from one city to another, and from one hospital to another. Many medical practitioners have to carry out their compulsory duties in remote areas in their early career. They have encountered patients from various cultural backgrounds. "Chinese patients and their families usually ask detailed questions", said DJR, a Javanese neurologist. Meanwhile, BEN, a Batak orthopedic specialist said:

> Every ethnic group has a unique character. We have to deal with Chinese, Batak and Sundanese differently. When we deal with the Batak, from the beginning we have to be open and straightforward. We have to tell the Batak patients what their illness is, the diagnosis, and the plan for treatment, because their culture is like that. Even regarding the cost, we have to tell them frankly, otherwise there will be a problem. As for Javanese patients, as with Sundanese patients, they are usually more cooperative.

When a medical practitioner tries to explain how the patient can recover from a disease or illness, patients are often reluctant to implement the medical practitioners' advice due to their cultural beliefs and values. Such cultural beliefs and values

are often connected with superstitions, or paternalistic values they inherit from their forebears. As informants admitted, in some cases people do not really trust in medical practitioners; rather, they prefer to go to *dukun* (shaman). Here are some informants'experiences that relate to cultural differences with their patients:

- A dentist recommended that a patient's tooth be pulled out, but the patient refused, because the patient was worried that, according to a myth, the procedure would cause him to go blind.
- A dermatologist reported that a child suffering from diarrhea was given an amulet by the parents and was placed in the living room rather than in the bedroom in order to recover, according to the parents' superstitions.
- An orthodontist asked her assistant to provide tea for a patient who had fainted. The assistant said that it could not be done, as tea was prohibited by the patient's religious beliefs, as a Seven-day Adventist.
- An ophthalmologist reported that occasionally, when a patient needs immediate surgery, treatment is often blocked by the family, who insist on seeking permission from a family member in a distant village

Language differences are another specific form of cultural barrier from the category cultural backgrounds. Waitzkin (2009) suggests that intercultural and language differences in communication patterns, create barriers in provider-patient communication that may lead to a misunderstanding of somatoform symptoms. When medical practitioners and patients do not speak the same language, the situation becomes more problematic (Valero-Garces, 2014).

Some informants admitted that in their early careers as general practitioners they required to go to remote villages, where the community have their own language and rarely use the national language (Indonesian). It has thus become common that when a

medical practitioner tries to communicate with a patient, neither is able to understand the other due to the language barrier. Some informants explained that they sometimes needed a translator, the translator usually being a member of the patient's family who could speak Indonesian fluently, or a nurse who came from that village. However, in some cases, informants had eventually learned the local language. ST, a general practitioner, said, for example, "*I learned to speak the language in Cirebon by just doing it*". Similarly, M, a dentist, said "*When I was in a remote place in Bengkulu, communication was an obstacle. Because patients only spoke their local language, which I did not understand, my assistant helped me to communicate with them.*"

The barriers of educational differences

This study shows that both patients with higher educational and lower educational backgrounds are often ignorant of their health issues. Many patients prove not to understand how to maintain basic health. For example, some dental patients are not aware of the need to have a routine check up every six months. These patients usually come to the dentist only when they are already experiencing toothache; when the toothache stops, they think that they have recovered and do not need to visit the dentist anymore. The reality is that it will cost them more money if they wait for the toothache to reoccur, as opposed to having a routine check up in the meantime.

Furthermore, patients sometimes stop taking their antibiotics when they start to feel better, and do not complete the full, prescribed course. This suggests that they do not understand how antibiotics work. DV as a general practitioner explained: *"Patients don't understand that, for instance, when they suffer from TBC, they need to take a six month course of medicine. Because they don't understand this, they often stop consuming the medicine when they start to feel better, which will eventually result in a recurance of the disease.*"

Educational differences in other cases showed that the informants, in their role as medical practitioners, sometimes have difficulties in explaining a disease or illness due to the low level of education of some patients. Patients usually have difficulty in understanding medical terms, which often stems from their low educational background. NF, a general practitioner stated: *"I am sorry to say that perhaps patients never go to school, or are only primary school educated. Sometimes they will continue to misunderstand my explanation, despite me having already explained in detail. If the patient was a teacher or a university student, it would be easier to educate them."*

Some informants stated that most patients demand clear and detailed information about their illness, but then because of their low educational background, they cannot comprehend what is being explained. In this case, it is clear that the informants, being medical practitioners, need to have the ability to explain medical matters to the patients in the simplest possible terms. ST, a general practitioner, shared an experience in which she had had a discussion with a man whose son was diagnosed with HIV. The man had no idea what HIV was, and was not at all shocked, assuming that it was just a normal illness such as a common cold, from which his son would soon recover."Patients with low educational backgrounds present a big problem for us as medical practitioners," said ST.

Another case that causes difficulties, is unaccompanied patients. Patients often rely on a friend or family member to relate their medical history when they are too sick to communicate themselves. Even when the patient has a companion, if the companion is also from low educational background, he or she may be unable explain the patient's medical history adequately. This is a serious barrier, because it can render the medical practitioners unable to act quickly and decisively. In such cases, medical practitioners then require more time to further examine his or her patient's condition.

On the other hand, dealing with a patient with a higher educational background can also prove problematic. One informant stated that patients with higher educational backgrounds are sometimes prone to underestimating the advice of medical practitioners. The patient may think of himself or herself as being more knowledgeable about his or her own health than the medical practitioner.

Time barrier

This research confirms one of the barriers of medical practitioner-patient communication as observed by Hardee and Platt (2011), namely, time barrier. In this particular case, an administrative barrier inolving patient waiting times. Some informants claimed that the number of patients queuing throughout a day can be overwhelming, and consequently became barrier to effective communication with patients. They claimed that long queues resulted in ineffective communication with their patients. Conversely, patients who were aware of the medical practitioners' time constraints are liable to lose their trust in them, and may experience difficulties being completely open, as a result. "When the queue of patients is too long, we become overwhelmed, and we appear to the patients to be robots", said VY, a general practitioner. VY explained that when she dealt with patients, the medical history of whom she was already familiar, it did not really take much time. On the other hand, for new patients she needed much more time. Such medical examinations are made more difficult by the knowledge that a long queue of patients is waiting outside.

Time also became a problem for SSK, a nutritionist. She said:

> "To find out about a patient's daily eating habits, we must let them speak. They may be defensive and claim that they eat very little, but that their body weight continues to increase. So I might say, "You know better than I do the reasons why your weight is increasing." We often need to have a chat with them first, in order for them to admit what

they have actually done."

In the same vein, NF, a general practitioner, stated: *"Communication [between medical practitioner and patient] must be two-way, and mutual. Two minutes is not enough; however, it is impossible to have such communication in Puskesmas [Community Medical Center], because there are too many patients."* AS, a dentist also reported the time barrier as a communication barrier: *"Patients find it difficult to visit the dentist on a regular basis, wanting instead to visit only once, and for everything to be done. They need to be aware of the necessity of control and reexamination, without waiting for the pain to reoccur."*

Psychological barrier

Medical practitioners, like any other human beings, suffer 'mood swings' that can sometimes affect the way they perform their duty. Occasionally, they can find themselves overwhelmed by the sheer number of patients, and become tired and hungry. One medical practitioner admitted that in the runup to lunchtime, it became hard for her to concentrate, and she found herself wondering about what to have for lunch. Similarly, by the end of the working day, she found she had less interest in listening to patients, or communicating with them; all she wanted was to go home.

The most common problem related to the psychological barrier was the unwillingness of patients to cooperate with their medical practitioners. SB, an internist, reported that there are sometimes patients who, because they are rich or able to pay, want to dictate the course of medical examination and treatment, despite knowing little about the purpose of the examination and the medication.

AYLA, another internist, related an experience in which a patient, who was passive remained silent throughout his consultation, despite being given adequate time to express his complaints. He also described a patient who returned to see

him, after two years, in a worrying condition. It turned out that the patient had not followed the medical practitioners' advice and had not paid sufficient attention to his condition. The patient returned only after his condition had worsened. Similarly, HNR, an orthopedic specialist, related that he had consulted a patient who remained silent, said little when asked, and looked scared. SSK, a nutritionist, reported a patient whose body weight continued to increase, despite her claims that she did not eat much. However, the patient finally admitted that she ate a lot of snacks between meals, including meatballs. SSK also related well-educated patients who were knowledgable and well-informed regarding their illness. "They did not always follow our advice," said SSK.

In another case experienced by CN, a dentist, she reported, "A stubborn man only wanted treating according to his wishes. He said 'pull out this tooth!" dispite the fact that the tooth could be treated without being pulled. In another case, AR, an orthodontist advised her patient that it was necessary to pull her tooth, but the patient refused the orthodontist's advice. In the end she filled the tooth, according to the patient's wishes. However, some time later the patient returned with toothache.

The four barriers delineated above are notable communication barriers beween medical practitioners and patients. Of these four barriers, the cultural barrier is the most significant, followed by the educational differences barrier, then by the time barrier, and finally the psychological barrier. However, while existing independently, none of these barriers are mutually exclusive; on the contrary, they are actually closely related. For example, language is a key element of culture, and one's mastery of language is connected with one's level of education. Indonesian may not be properly mastered by some patients because of their low educational opporunities. This educational gap, and the importance of a shared language, is considered a major 'homework' for medical practitioners, mainly in small villages throughout the country.

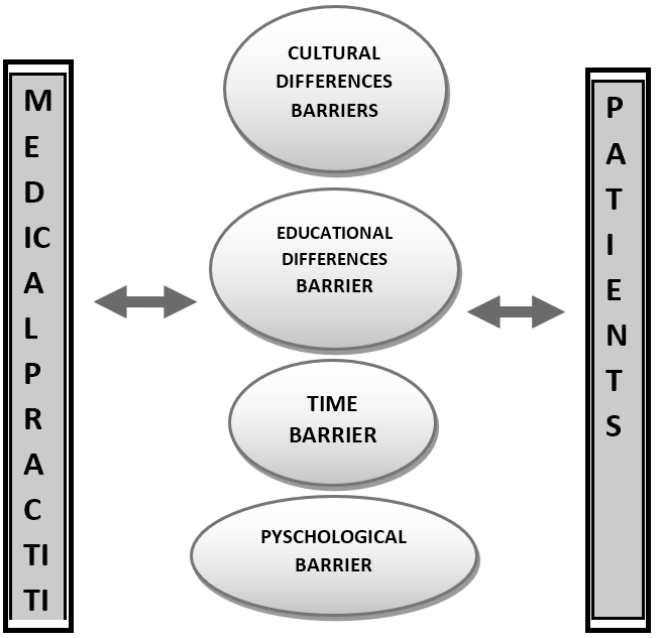


Figure1. Communication Barrier Model between Medical practitioners and Patients

Figure 1 above is model of communication barriers as experienced by the medical practitioners as our informants in communicating with their patients.

Conclusion And Recommendation

Based on the analysis of the data collected from semi-structured interviews with 28 medical practitioners, it can be concuded that the barriers that the medical practitioners experienced affecting their communication with their patients are: (1) Cultural Differences Barrier; (2) Educational Differences Barrier; (3) Time Barrier; (4) and Pychological Barrier.

It is not our purpose to generalize these research findings to all other medical professionals due to the limited number of the informants, and the interpretive perspective that is used in this study. Further research comparing other specific group

of medical professionals (whether they be medical specialists, general practitioners, midwives, or nurses) in the way they communicate with patients and other medical stakeholders, such as hospital managers and medical company representatives are also worth pursuing. These studies should be based on various theoretical perspectives and different research methods in order to gain a holistic picture of the medical world. Even a hospital or a medical school, in terms of its communication patterns or communication processes, is an appealing subject for futher investigation from an interpretive perspective. Perhaps the most interesting research issue to investigate is the cross-cultural barriers between medical practitioners and patients, as Indonesia is a broadly multicultural country that incorporates a wide variety of cultural groups (racial, ethnic, linguistic, religious, gender-related, educational, and class) and various subcultures. Indeed, one limitation of this study is that it involved only physcians and not patients. In this context, to gain a more complete picture of communication barriers between medical practitioners and patients, in the future it is important, if not essential, to interview patients from a variety of ethnic and cultural backgrounds.

In the meantime, it is worthwhile to enhance the medical practitioners' communication skills in dealing with the patients. Specifically, medical practitioners need to attend more workshops on effective communication strategies; medical practitioners need to be aware of the different social-cultural backgrounds of patients and to be competent in dealing with problems related to their communication with patients; finally, the government should be aware of the role that the overall lack of education in Indonesia plays in the health of it citizens, and make necessary efforts to minimize the tendancy of many Indonesians to neglect their health.

Communication between Patients Family Members and Healthcare Staff

Deddy Mulyana, Devie Rahmawati, Hermito Gidion & Elsa Roselina

People communicate all the time; the nature and process of their communication change, depending on the context of space and time (Mulyana, 2018a; Khairil et al., 2020). The meaning of a message is subject to various factors, be it biological, environmental, or socio-cultural. The communication practices in medical encounters comprise two modes: first, methods using soft kills such as emotional communication, sympathy, respect, and supportive attitude. Second, the instrumental mode such as body language, listening skills, nonverbal practices (Zahira et al., 2015; Oliveira et al., 2015; Shahid et al., 2013; Del Piccolo & Goss, 2012; Blease, 2012)

Effective communication between healthcare staff and patients will bring favorable experiences such as emotional comfort and favorable technical details of treatment such as information acceptance, compliance with treatment, and overcoming the

therapy obstacles (Rahmawati et al., 2017; Rachmawati et al., 2020; Manganelli, 2016; Blease, 2012).

Long before we were aware of the role of healthcare staff's effective communication to cure patients' illness, Hippocrates pointed out the connection between doctors' effective communication and the greater probability of the patient's recovery. He stated in 400 BC, "The patient, though conscious that his condition is perilous, may recover his health simply through his contentment with the goodness of the physician." This was also reinforced by Michael Balint over a half century ago that the most effective drug in medical practice was the doctor himself (Bensing & Verhaak, 2004).

A lot of research has indicated that healthcare staff's empathy toward and effective communication with patients reduce their worries, pain and blood pressure and enhance their general health. Essentially the studies conclude that the healthcare staff's more effective communication adds significantly to the patients' wellness. In this context, communication is considered effective if the effect of communication fits the purpose of the communication participants, whether to inform, to educate, to entertain, to persuade, to induce action, or to settle a problem. Communication among people involved in healthcare is effective if it fulfills the expectation of the communication participants (doctors, nurses, patients), or more specifically, the full recovery of the patients (Mulyana, 2016).

Based on the above contention, from the perspective of patients and their families, positive communication practiced by healthcare staff can have good effect on patients' and their families' perception of the medical treatment given by the healthcare staff in the hospital. Access to quality healthcare services is pivotal in countries like Indonesia, where many people are not able to receive or have access to proper medical facilities. Indonesia now has a national healthcare insurance program managed by Badan Penyelenggara Jaminan Sosial (BPJS) or the Social Security Administrator.

Indonesia is a country embracing a collectivistic culture that

encourages people to maintain social harmony (Mulyana, 2019). The collectivistic culture refers to societies whose members have been socialized into strong cohesive groups which cultivate the members' loyalty throughout lifetime, in contrast with the individualistic culture which refers to societies where the ties between people are loose; thus everyone is expected to take care of oneself and one's immediate family (Hofstede, 1996).

Because members of the collectivistic culture have strong commitment to foster harmony, they avoid direct confrontation. Typically the third party is expected to mediate the two parties in disagreement to save their faces. So members of collectivistic cultures are not accustomed to settling conflicts. To avoid conflicts, when these cultural members must be examined by medical doctors, they often seek the consent from their elders, and in some cases, the family spiritual healer with whom they have had long contact. People who embrace a collectivistic culture consider illness as a social problem rather than a personal one. People suffering from illness usually ask for help from their family members. Other members of the family or even the community are engaged in eradicating the illness, by accompanying the patients to the health providers, watching them at night in the hospital, and by visiting them as often as possible (Mulyana, 2016).

As Indonesians generally belong to the collectivistic culture, the way Indonesian people exchange information is distinct and different from other peoples of the Western individualistic countries. Indonesians are not accustomed to talking about sensitive issues such as negative communication modes with other people, especially high-ranking ones which may include people with higher social status such as medical doctors, as they are worried that such a discussion will undermine the social harmony that should be maintained.

While pondering over the Indonesians' cultural values in their communication with each other, this research aims to unravel communication between families of patients and healthcare staff in two hospitals in Jakarta. More specifically, this research aims to explore the extent to which the family members of the child

patients are satisfied with the services given by the Indonesian health insurance program administered by BPJS and with the healthcare provided by the healthcare staff (doctors and nurses). Additionally, this research also aims to explore the challenges of communication between the family members of the child patients and the healthcare staff and the way the family members overcome their dissatisfaction and get over cultural obstacles and how they find ways to manage their anxieties.

Applying Interpretivism

This study is based on an interpretive paradigm assuming the subjects of the study have consciousness to construct the meaning of their experiences. They are not merely inanimate entities that can be quantified and predicted like in objective, deductive and positivist research. Simply put, this research takes an inductive model resulting in significant themes and descriptions.

In a phenomenologal study, the number of research participants is not a critical issue, as the study can highlight a few subjects, as Duke recommends, from three to ten subjects (Creswell, 2013). Even three to six interviews is considered adequate to carry out phenomenological research aiming to unravel the subjects' personal perceptions and understandings of their experiences (Braun & Clarke, 2013). The number of the research subjects in this study exceeds far beyond the number of research subjects recommended above, that is, 30 family members of the patients treated in a public hospital and a private hospital in Jakarta. The relatively vast number of the research participants enabled the researchers to analyze the data to the maximum degree, although this study is not aimed to make generalizations.

The whole study lasted a few years, with the purposive sample consisting of 11 males and 19 females aged 32 - 36 years at the time of the field research. Most of them are parents of the child patients who came from rural and urban areas in Indonesia, the

rest being their relatives such as grandmothers, aunts and uncles. Most of the child patients were suffering from several kinds of illness such as dengue fever, typhus, and especially cancer. Ethics consent was given to the researchers by the Health Research Ethics Committee of the participating hospitals. The patients' family members signed the forms of agreement (informed consent) to participate in this study.

This research employed a phenomenological method or strategy involving semi-structured in-depth interviews with the research participants and observation (Creswell, 2013; Mulyana, 2018b). The researchers needed more time to gain trust from patients' families prior to interviews with them and endeavored hard to enable the patients' family members to feel comfortable in answering the researchers' questions. The research endeavor was hampered by the anxieties of the research participants who found their beloved children in uncertain situations as patients, with a few in critical conditions. The researchers needed to be steadfast to find the most suitable time to talk with the patients' family members, because they also had to have a focus to take care of the patients. The researchers met with every research subject four until five times, including developing rapport with each of them, this resulting in a relatively long duration of research. While having discussion with the family members, the researchers did alleviate some of the family tasks such as feeding the child patients and carrying their luggage.

All the 30 family members of the 30 patients were inclined to become the sources of detailed information about themselves and the medical treatment given by the healthcare staff to the patients, although a few of them were initially reluctant or doubtful to do so.

A qualitative study like the present one is useful for generating hypotheses which later can be tested by objective-quantitative research. From the results of this investigation, the main themes were developed, which were used as a basis for developing

alternate themes (Chittem & Butow, 2015). In this paper, the researchers have used some of the research participants' quotes without revealing their names in order to protect their actual identities, privacy and confidentiality. The names of the two participating hospitals are also undisclosed to protect their reputation.

Patients' Dissatisfaction and Satisfaction

From the phenomenological data collected, the researchers have developed some important findings as delineated and discussed in this part of the paper.

Relative dissatisfaction with part of the BPJS Service.

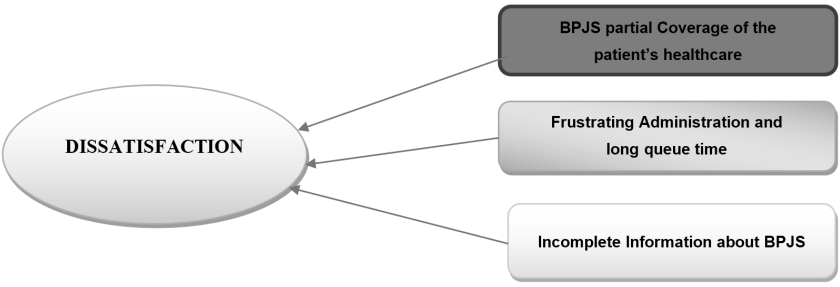


Figure 1. Factors Contributing to Dissatisfaction

All of the research participants indicated their dissatisfaction with part of the service of BPJS as the state operated health insurance facility. Although BPJS gave the patients an economic and health benefit in the form of receiving the same medicinal treatment facilities, from another perspective the BJPS was perceived by the research participants as undesirable and a burden to patients. This induced negative emotional reactions, anxiety, and loss of hope. BPJS only covered part of their financial burden. They had to spend expenses for necessities such as food, accommodation, transportation, laundry, pampers and medicine

for patients.

Still from another perspective, all research participants agreed that the BPJS implementation in the field was unfair to them who had a different (lower) economic status. From the moment they wanted to get the facilities and prescriptions, they had to wait and feel frustrated with the process. The following are the problems they encountered:

> "With the emergence of BPJS health insurance I feel I have gained great support and it's hard to imagine what it would be like without it. The doctor's communication with me is good and in fact it was the doctor that recommended BPJS to me. The nurses are good and patient too. In spite of this I am still stressed by the long queues which begin from waiting to register for examination, collecting medicine, chemotherapy and getting a room. The extreme level of my child's condition is due to delays in receiving chemotherapy."

> "What can I do? Sometimes I wonder why my fate is like this. I have tried to accept it. However, sometimes I still feel upset. I feel sorry for my child. If it is me who have to queue until the midnight, then I am okay with it. But seeing my kid anxious, crying, saying: 'Mama, it hurts. I cannot take it any longer,' how can anyone not be upset?'"

> "I know that I should wait in a long queue. That is why I usually come at dawn, before the hospital's opening hour. [Meanwhile] My wife is watching our kids. I usually skip work to queue. Even though the medical bill is free, it is not my only expense. If I am frequently absent from work, I am afraid that I will get fired. I feel guilty to my colleagues from work. Fortunately, my friends and boss are very kind. They understand my situation."

In fact, this finding is not surprising. Many cases from casual talks with BPJS patients in some hospitals and clinics in Indonesia, media reports, and some research results indicated that some of BPJS patients feel discriminated againsts or neglected by the healthcare staff where they are examined and/or hospitalized. They feel that the healthcare staff tend to prioritize other general (non-BPJS) patients, let alone patients who have better (private) health insurance. For instance, one of the researchers was told by

his brother in-law who had experienced such unfair treatment in a private hospital in Bandung. He had to wait for a long time to meet the doctor who then said harsh words to him, including '*You are luckier to have a less terrible ailment*.' As another illustration, that there were differences of service in a public hospital in Surakarta as experienced by the BPJS patients as the subjects of the study. The BPJS patients felt less satisfaction compared to the general patients, because the service given to the BPJS patients was not effective and was not efficient (Pertiwi, 2016).

Another weakness of the BPJS service according to the majority of the research participants pertains to incomplete information. Some research participants obtained the information about BPJS from other patients, not from a trusted source. Those family members then relied on the rumors in order to obtain the best and most relevant information for their needs. There were two kinds of rumors. First, information about the disease and the procedure to get the medical treatment in the hospital and also the available choices of medication. Second, the information about the infrastructure facilities such as a place to stay in the vicinity of the hospital, and possible donations from generous individuals or charity organizations that carry out philanthropic programs to support child patients and their families. In reality, there were always generous people who came to the hospital to donate light meals, pampers, pillows, and toys for their children. Some volunteers even helped them to get new fresh blood from places outside of the hospital.

Interestingly, rumors helped the family members to overcome the emotional turmoil on the daily basis. The information exchanged between them, regardless of its reliability, helped them to reduce their anxieties and displeasure.

> "It's not possible to maintain close relations. This is a big hospital with a lot of patients. The doctors and nurses are understanding. None of them are pushy or annoying, but they only turn up when it's time to come. There is no in-depth contact. We only see them and get a response when we ask about our child's condition or when a situation

occurs. We can't feel close to the nurses, let alone to the doctors."

"The checkup, operation, and hospitalization expense is—thank God—free. I am delighted. But before I came to this hospital, I did not know that free healthcare such as BPJS existed. My mind was blank, quite for a long time. I was confused. There were so many people in the hospital. So I took a seat on the edge of the road, while buying some snacks for my kid. I was talking to some people there. From them, I know about the BPJS. I almost cannot believe it. But then, I saw that one of the men [whom I was talking to] also had a very sick kid. I feel like I can trust him. So I follow several steps that he explained to me."

"Fortunately, I have friends who are also poor. We often share information on doctors, nurses, cheap medicine, housing, and many other things. Many pieces of the information are true, although some are not. Nevertheless, [the information sharing is] actually quite helpful. For example, I know which doctor that will kindly answer my questions regarding the medical procedure. Even though some doctors and nurses are nice, many of them are unfriendly. I know a lot of things from gossiping with the patients' family members."

Relative satisfaction with healthcare staff's healthcare.

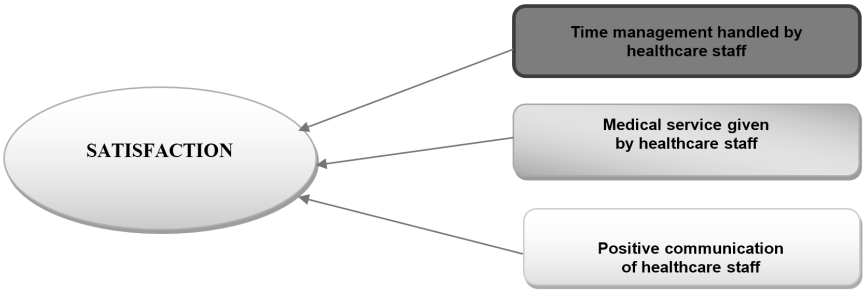


Figure 2. Factors Contributing to Satisfaction

In general the research participants were satisfied with the time management handled by the healthcare staff who could fulfill their technical needs and enlighten their emotional burden

as well. But some of these healthcare people did not show empathy to them through their statements, such as depicted by the following research participant:

> "I can feel which one [of hospital staff] is sincere and which one is not when they are talking to us. When we are in a difficult situation, we will be very happy if, at least, the doctor is friendly. It will even be better if he or she sometimes tells a joke to melt the situation. When doctors are like that, children [patients] usually become very happy, they laugh. Because we have been in the hospital for quite a long time, sometimes we get bored and run out of activities to do with our children."

The majority of the research participants said that they were happy with the medical service. However, based on the researchers' observations, some of their verbal statements were not consistent with their actual feelings, some of which were expressed through their body language such as facial expression and intonation, pitch and speed of speaking. In a high-context culture such as Indonesia, it is common for people to not say what they mean and to not mean what they say. Put differently, the actual or closest meaning of a message is often embedded in the context of communication, in the body language of the communication participants, and sometimes in their silence. Only when a person keeps asking or interrogating his or her communication partner, the latter will give an honest answer. In this research the researchers did such a thing carefully when interviewing some of the research participants until the researchers were satisfied with their answers.

The tendency of Indonesian people to give 'proper' answers may also be due to the fact that in Indonesia there is a higher power distance between common people and people who have a high prestigious profession like medical doctors (Hofstede, 1996; Hofstede et al., 2010). A medical doctor is one of the top figures in social hierarchy in Indonesia, especially based on social status parameters. In an Eastern culture like Indonesia, subordinates

or people from the lower class also look up to and show their obedience to their superiors or people from the higher class by not criticizing them.

A larger proportion of the research participants had favorable views of doctors' and nurses' communication with them. A cultural aspect that encouraged the research participants to say that the doctors' and nurses' communication was positive is their spiritual background. As spiritual human beings, they thought that they had to surrender themselves to God who has created whatever situations they faced and whatever afflictions they had.

> "I feel that everything has been pre-ordained. My child is ill. My family and I are having difficulties but we have come into contact with nice people - patient doctors and nurses who are understanding - especially when I was told by the hospital administration that the total cost reached 1.3 billion rupiah. Try imagining where we could find that much money. Thank God for the BPJS … We have already received financial assistance and patience was fitting."

> "Even though one of my kid's eyes cannot see anymore, when I see there are many worse cases [than hers], I am thankful of what is left. God is still protecting my kid. Even though sometimes I feel tired when I am queueing, I still withstand it. I feel luckier than those parents who have sicker kids."

The tension to deal with the uncertainty of the patients' ailments, made the family members feel sad. When they were trying to obtain the assurance of their kids' fate from the healthcare staff, they felt that all those people in charge didn't strive the best they could to respond to their worries, and consequently they became more anxious. This problematic situation made them doubt the medical treatment provided by the hospital. When the anxious feeling grew more frequently, they sought information about alternative medicine to cure their kids' illness. They were keen on having the conversation with family members of other patients about alternative treatment for their ill children. They felt that such a conversation gave them a possible way out.

Some research participants suffered from more extreme anxieties since they came from rural areas far from a big city. They had a sort of culture shock. A big city like Jakarta was too expensive, unkind and noisy for them. They felt alienated in Jakarta. They had to financially support not only their children as hospitalized patients, but they also had to financially support themselves in the big city, especially for food and accommodation, and other family members such as siblings of the child patients, who still lived in the village where they came from.

Some of the research participants felt a little relief when they met family members of other patients who came from similar social backgrounds, especially those who came from the same ethnic group, the same religious group, or the same place of origin. By mingling with others who were socially and culturally similar to them, they were able to exchange information on the nature of their children's ailments, the place to stay near the hospital, and even the approximate amount of money they had to spend for their children's medical treatment. It was found out, for example, that parents whose children were suffering from cancer had to accompany their children longer. But it was impossible for them to stay in the hospital, so they had to seek a humble place to stay which they could afford financially.

From the observation, the researchers could figure out that the patients' family members did not really ponder over other treatments beyond the biomedical treatment suggested by the healthcare staff, when they felt satisfied enough with the healthcare staff's medical service. They used the discussion on the alternative treatments or alternative medicine as a catalyst to overcome their anxiety.

> "Even though the check up is free and the medicines seem sophisticated, when the doctor diagnosed that our kid's condition was uncertain, my husband and I were confused. Therefore, we were looking for another ointment that can help the effect of prescribed medicine. What can we do? The doctor seemed like he already gave up, but still gave my kid medicine. Maybe because it is free. The situation was very stressful. I

hope traditional medicine can help. I listened to every advice, and will try to obtain any ointment that can cure my kid's disease."

"Frankly I was very disappointed when the doctor said that my child's case was hopeless. I felt weak. Even though I did not have to pay or think about payment I was still sad. As a parent I had to find another way. I went looking for all kinds of medicine without telling the doctor. The doctor learned about this from another patient and I received a warning. He said it would cause a conflict of medicines. I said nothing. Who knew whether the alternative medicine would help or not."

This study found that most of the research participants were more comfortable with nurses. Nurses helped them to get through their difficult time, in contrast with doctors, who didn't have ample time to accompany them when they were in need of technical and emotional backups while assisting their children.

Discussing factors contributing to relative satisfaction. The research participants' satisfaction was partially due to not only the nurses' collaboration but also due to the research participants' cultural backgrounds, especially their spirituality. Those who are religious in particular all have similar views that they may not complain about anything if they want something good for their kids. Religions taught them to have a positive mind and behavior, if they want God to help them. Put differently, they tend to be fatalistic, irrespective of the actual interpretation of their religions they embrace. That is why they appeared fine during the treatment process. This condition fits the notion that people's personal backgrounds can give patients or their family members a strength in critical situations (Bartz, 1986).

However, there is a factor that affected the research participants' less satisfaction, namely, the technical aspect such as the insurance services. There was not adequate information on how to get the best options in using the insurance. Besides, they had bad experiences while queuing to get the room or prescriptions, this giving them some negative experience. Based on this study

the researchers realize that this technical constraint (long queue time) has contributed to the whole sense of satisfaction. This finding approximates the research finding (Mathews et al., 2015) that the waiting time adds to the satisfaction degree.

The third factor that affects the relatively low level of satisfaction of some participants is the limited communication of healthcare practitioners, especially doctors. This is related to the contention (Jacobalis, 1990) that communication is one of the main factors that affect patients' satisfaction with the whole medical treatment. The researchers found that the lack of communication between doctors and family members of the patients made the family members feel neglected. The research participants became more anxious because of this problem.

From the observation, it turned out that the research participants needed a companionship from an authoritative figure like a doctor. In an Eastern culture like Indonesia, people tend to rely on the decisions made by patrons, superiors, or elders (Mulyana & Ganiem, 2021). In this case, when the doctor, as a patron, gives a direction or information which is limited in terms of its duration and frequency, the research participants lost their confidence in the treatment. When the family members were listening and smiling to the healthcare staff, the smile didn't mean that they felt satisfied. They tried to send a positive cue to the doctor or the nurse, because they were worried if they showed their dissatisfaction, the doctor would not take care of the patient any longer. So they displayed a positive manner to the healthcare team, as an effort to obtain a better treatment.

The fourth factor that affects the research participants' relative satisfaction is the social communication between patients' family members and other non-medical persons (other patients and their family members) in the hospital. The moments of sharing their favorable and unfavorable experiences, provided the family members with alternative ways to cope with their anxious feelings. The researchers found that some of the research participants learned about the alternative treatment because of

their helpless feelings due to the lack of communication with the healthcare staff, notably the doctors. People sharing the information about the alternative medicine felt that they received new energy to get through the hard times. Most of the research participants, specifically 26 participants, said that it had never occurred to them before to use the alternative treatment. They used to believe in the modern treatment, therefore they chose to go to the hospital. But later in the treatment journey, they felt frustrated especially because they could not get the proper time to discuss their anxiety with the doctors This situation led them to find the discussion on the alternative treatment with other family members of the patients as another way to cope with their problem.

It is common for patients to choose a hybrid approach for a medical treatment. It is noted, even for cancer, the alternative treatment can be combined with modern treatment (Tabatabee, 2016). However, in this research, the use of alternative treatment (traditional method) did not get any support from the healthcare staff. When doctors or nurses discovered that patients were using alternative medicines, the healthcare staff were more likely to give pressure to the patients' family members. So the warning given by the healthcare staff about the alternative treatment contributed to the level of stress of the research participants.

This research indicates that when the family members of the patients and the healthcare staff were in good relationships, the former always indicated positive behavioral signals to the latter. The discomfort and dissatisfaction felt by the research participants did not lead them to ask for better treatment or even complain to the medical staff. This tendency, to reiterate, is due to the collectivistic nature of Indonesian community who tends to maintain social harmony and avoid conflicts, especially when facing authoritative figures like doctors. In return, the doctors, being used to engage in a paternalistic mode of communication, tend to control all the information and treatment decision for the patients (Mulyana, 2015, 2016; Mulyana & Ganiem, 2021).

In a paternalistic culture like Indonesia, the family members of the patients, like the patients themselves (both as the clients), are more likely to comply with the advice of the doctors as their patrons.

Summing Up

This study found that the research participants' overall impression of the medical treatment given by the healthcare staff to child patients through the service given by BPJS program in the two hospitals in Jakarta was relatively favorable. All the family members of the patients indicated that they were relatively satisfied with the medical treatment given by healthcare staff. However, based on some observation and intensive communication with the family members, some of them revealed that they were dissatisfied with the healthcare staff, especially the doctors who indicated a lack of communication with them, although this dissatisfaction was unspoken due to their reluctance to criticize them.

It was revealed that to some extent they were grateful for the existence of the BPJS program that could support the medication and the hospitalization of the patients such as their children, while hoping that the program would be better in the future to serve the patients, especially those from lower-class families. More specifically, they suggested, the time of the service and treatment should be faster and the additional cost should be lower in the near future.

From the researchers' point of view, further research can be conducted to explore the issues above, which should involve longer and more intimate interaction with research participants so that more unsaid and hidden meaning of their communication messages can be revealed. For instance, it is interesting to find out how the healthcare staff and the patients and their families communicate nonverbally and what meaning can be attributed

to the nonverbal behavior displayed by the parties involved. It should be remembered that the majority of Indonesians belong to ethnic groups, such as the Javanese and the Sundanese, who are engaged in high-context communication in which meaning is often ambiguous and indirect. Since members of a few ethnic groups such as the Batak, the Macassarese and the Betawi tend to practice low-context communication, there is a question about the way members of these ethnic groups communicate with members of the high-context culture in the healthcare context. In this case, participant observation is deemed inevitable to corroborate the data taken from in-depth interviews with the subjects of the study, especially to ascertain the closest meaning of the ambiguous verbal messages.

People With Lobster-Claw Syndrome in Ulutaue, South Sulawesi

Deddy Mulyana & Sulaeman

Indonesia is a developing country with a population of over 270 million people where health problems are omnipresent. While there is a lack of medical doctors and hospitals, the government does not pay sufficient attention to the people in need of medical treatment. A larger proportion of the people themselves seek alternative ways of healthcare beyond normal biomedical treatment. Some people use a naturalistic approach to cure their ailments, such as consuming herbal medicine, getting massages or acupuncture. Others believe in a personalistic healthcare system by visiting clergymen or even shamans for treatment in the hope that they can get better.

There has been a lack of facilities given to handicapped people, such as suitable public transport, special stairways, special lifts, special toilets, and suitable recreation and sport facilities.

Those people who suffer from bodily abnormalities have attained much less attention, this especially so for people who suffer from leprosy and Oligodactyly.

By definition, Oligodactyly is the condition of fewer than five fingers or toes on a hand or foot. This ailment has been investigated mainly by the biomedical perspective through medical laboratories and experiments, such as done by Robinow et al (1986) and Turnpenny et al (1992). However, fewer investigations on the social implications of this ailment have been carried out. This research is aimed to fill in this wide research gap. From a social perspective, Oligodactyly is not merely a disease, but it is also an illness that may also affect the psychological condition of the sufferers and their interaction with people around them.

Many people suffering from disability in Indonesia have been abandoned or discriminated against not only by the government and institutions, for example, by not giving them access to school and work, but also by their immediate circles of friends and, most sadly by their immediate families. The stigma attributed by normal people to disabled people, including Oligodactyly sufferers, is like a vicious circle, partly dependent on how normal people treat them. The better we treat them, the better their psychological condition. This research will uncover some of the Oligodactyly sufferers' subjective experiences. By understanding their sufferings, we can empathize more with them, so that they are more motivated to enhance their lives.

To some extent the government of Indonesia, both central and local, along with related government agencies under their authorities have made efforts to help disabled people, albeit almost randomly. Some communities of disabled people have been occasionally assisted, while others have been ignored. Of the first category are people suffering from Oligodactyly who mostly live in the Ulutaue village at the time of the research. This village was associated with a village inhabited by people with lobster claws, although many normal people also lived there. Even television has described the village in that way, causing

some resistance from some inhabitants of the village, including some Oligodactyly sufferers. The protesters realized that the coverage of the village by television journalists was solely profit oriented without enhancing the sufferers' physical, psychological, and economic condition.

Theorizing Physical Ailments

This research aims to delineate how the sufferers of Oligodactyly have constructed the meaning of their ailments and how they have communicated with normal people around them in the Village of Ulutaue, South Sulawesi.

This study involved 15 subjects consisting of 10 males and five females suffering from Oligodactyly. Their ages ranged from 13 to 73 at the time of the research. Ten subjects were still single, while others were married. Fourteen subjects had jobs, mostly self-employed, especially as sea pickers (by picking small shrimps, small oysters, and seaweed) and only one subject was unemployed.

Most of the subjects had never been formally educated at school, so they were not able to count, read or write. Most of the subjects had three fingers on each of their hands and three toes on each of their feet. There were a few subjects who had two or four fingers or two or four toes on each of their hands or feet. Such hands and feet seem very different from normal hands and feet that people see in everyday life.

To gain the data for this research, we conducted unstructured in-depth interviews, on different dates within the period of nine months. Most of the interviews took place in seashores where the interviewees were working. Some interviews took place in their homes, at school, and near a dam. Each informant was interviewed between three to five times, so four times on an

average, with the duration of each interview between 50 to 90 minutes. At least an interview with each informant was recorded, although most interviews were not, but the data gained from the interviews were immediately transcribed.

Initially, making the interviews was not easy as the subjects regarded us as journalists who would take advantage of them by reporting their life stories to readers. Even, where they were willing to be interviewed, they seemed uneasy in the beginning. However, we were able to gather data from the subjects, as we always indicated our patience and our empathy toward them. In many cases, the interviews were flowing smoothly. The interviews were facilitated by the fact that one of the researchers knew and used their local language, enabling the interviews to be conducted intimately. Basically we asked each informant similar questions, although the sequence of the questions was not always the same.

We also carried out some observations to complement the interviews. We observed their homes, their verbal and nonverbal behavior, the places where they worked, including the markets where they sold their products, and the locations where they played or entertained themselves.

Many researchers have employed the objective-scientific (biomedical) perspective to investigate healthcare (health communication and therapeutic communication) based on the assumption that there are regularities in social reality and hence in human behavior in relation to healthcare. Its adherents aim to propose general laws by specifying and predicting causal relationships or correlations between variables. Therefore, such positivists frequently begin their research with hypotheses. They analyze the data statistically to see whether the hypotheses can be accepted or not. Their research methods apparently provide narrower and less humanistic knowledge no matter how sophisticated and accurate they are. Such empirical works have been done, for instance, by Gibson and Zhong (2005), Lee (2008), Primack et al (2009), and Brown and De Matviuk (2010). In Indonesia this kind of research includes the following works: Iba

(2005) who investigated the relationships between the paramedic people's communication and patients' attitudes toward medical services in the Provincial Public Hospital in Southeast Sulawesi; Dida (2011) who investigated the influence of optimalization in health communication at the Basic Health Center on the level of children's wellbeing in West Java; and Agustini (2012) who investigated the effects of service marketing communication on the patients' perception of the Emma Poeradiredja Hospital in Bandung.

In contrast with the quantitative-statistical research above, our research is qualitative in nature. To explore individuals' interpretation of their Oligodactyly sufferings and their social experiences with people in their environment, we use an interpretive perspective, or more specifically, a social construction perspective and a symbolic interactionist perspective, both of which should be considered as complementary to each other. Both theoretical perspectives stipulate that individuals determine their own goals in life. They are active, creative, and innovative in interacting with others. The individuals' actions have resulted from their definition of their immediate situation, not as a result from external factors. In this context, reality is considered as inter-subjective, shared, and negotiated. Simply speaking, actors adjust their own actions to fit in with others' actions.

To use Berger and Luckmann's perspective (1966), the social construction of reality is a symbolic interplay between an actor's own consciousness and the consciousness of other actors in their shared life. Using the symbolic interactionist theory, individuals' actions are based on their definition of a person, an object or the environment they confront, and they may change their actions based on their interpretation of others' actions (Blumer, 1969). Based on such theoretical assumptions, we would like to explore how the sufferers of Oligodactyly use their own accounts to look at their ailments, and how they communicate with people around them in their everyday lives. As Marks et al (2000) point out, "People's accounts of health and illness are interesting and illuminating topics of study in their own right."

Viewed from an interpretive perspective, people suffering from Oligodactyly may give certain meanings to their illness and may engage in certain ways of communication with others. This interpretive perspective is considered to be suitable and more holistic in order to investigate the actors' unique experiences. In other words, illness is considered not as merely physical symptoms but mainly as subjective experiences. It is the individuals' personal accounts of their ailments, not the ailments as defined objectively by scientific or medical parameters, which matter here.

Oligodactyly may be assumed by medical doctors and nurses solely as a disease, that is, an objective reality (physical or organic symptoms) that can be diagnosed and examined in clinics or laboratories. However, we contend that for the purpose of this research, Oligodactyly should be considered as illness rather than disease. Kleinman et al (1978) defines a disease as "organic malfunctions and pathological processes whose signs and symptoms typically can be observed and quantitatively assessed," while illness is "the patient's experience of disease or ill health" (cited in Scharf and Vanderford, 2003). In the same vein, Eisenberg maintains,

> "... patients suffer 'illnesses'; physicians diagnose and treat 'disease' ... illnesses are experiences of disvalued changes in states of being and social function: disease are abnormalities in the structure and function of body organs and systems" (cited in Hardey, 1998).

There has been a lot of research on healthcare based on the social construction theory (often associated with phenomenological theory and the symbolic interactionist theory). This overwhelming research includes the following works: Davis (1972), Musgrove (1977), Vittoria (1999), Nguyen (2006), Kovarsky et al (2007), Hinojosa et al (2008), and Bindr et al (2012). In Indonesia research into health communication based on the social construction theory includes the following: Teja (2006) who investigated patients' social construction of leprosy at the Sinatala Hospital in Tangerang; Kadri (2007) who investigated the

social construction of blindness in the Wyata Guna Residence in Bandung; Hadisiwi (2011) who explored the meaning of Filariasis as constructed by those who suffered from such illness in Bandung Regency; and Hafiar (2012) who explored the phenomenological experiences of disabled athletes in Bandung.

Based on the interpretive or phenomenological perspective, Oligodactily is assumed to have been experienced as a subjective reality, not only as a bodily or physical experience. In this context, the illness experience may be connected with one's personal, social and cultural beliefs and values. Therefore more attention should be paid to the actors' personal interpretation of their ailments although it may also be related to socio-cultural factors rather than to their physical condition alone. It is then interesting find out how the research subjects as sufferers of Oligodactyly have constructed the meaning of their ailments and how they have communicated with normal people around them in spite of their physical disabilities.



Suffering from oligodactyly (source: dream.co.id)

Examining the Oligodactyly Sufferers Socially

Difficulties in doing routines

Mundane life has different meaning and significance to different individuals. Even routine activities considered to be easy by a group of people may be regarded as complicated by others, as in the case with people who suffered from Oligodactyly in the Ulutaue village. These people clearly had difficult lives physically, economically, socially, and psychologically in their everyday lives. The seemingly easy tasks but difficult for the Oligodactyly sufferers include the following:

- Eating rice with bare hands; there were always rice falling down from hands.
- Holding small things such as glasses and plates; they often dropped these utensils unintentionally and broke them.
- Drinking a glass of water with trembling fingers.
- Going outside just to get in the sun. Even though when they were in the sun, they got sick easily.
- Working as sea pickers; due to their deformed hands and feet, it was difficult for them to pick small shrimps, small oysters and sea weeds, and to work as assistants to fishermen.
- Selling the products in markets. Normal people were reluctant to buy products from people whom they considered frightening and worried that the products were contaminated.

The Oligodactyly sufferers felt a kind of helplessness that others took a pity on them. They needed some empathy from normal people, although they would not refuse any assistance given to them, especially from authorities in charge of disabled people and poor people in general. The Oligodactyly sufferers in the village were all low-educated due to their economic poor condition. Their low education also led to their limited interaction with other people, especially with normal ones, and to their limited choice of work. Many of them felt ashamed, inferior,

and scared to meet strangers. They often lowered their heads or looked away to avoid the stares of others.

The conception of the bodily defects

Among Oligodactyly sufferers under investigation, there are three different ways of conceiving their bodily abnormality: *the different body, the body cursed by God*, and *the body as God's bounty*. These different perceptions should not be considered as mutually exclusive. Rather, they simply suggest different attitudinal tendencies.

The Different Body. In their early age all the subjects were aware of their different bodies from normal bodies. Some Oligodactyly sufferers said that the bodies they had were just different from other normal bodies of people in general. Such conception was held by them through different and special treatments they received from their parents as their significant others, for example, by buying them certain sandals to cover their deformed feet. In their adulthood, some of the subjects still held such a view without associating the ailments with any metaphysical factors. The subjects felt unlucky that they had had such deformed hands and feet since birth, the fate they could not change forever. They were aware that their physical condition made normal people feel a pity, or were scared, and even disgusted, that the subjects wanted to run away from them or to avoid encounters with them.

Most of the subjects had negative feelings, at least in the past, although these negative feelings had been reinterpreted by some of the subjects in terms of the present. They felt ashamed, sad, disappointed, pessimistic, depressed, inferior, desperate, traumatic, submissive, angry, close minded, and lazy. They blamed themselves for having no hope in life. Being aware of such an unfavorable fate, the subjects were ashamed in front of normal people, especially those of the opposite sex. This feeling of shame encouraged them to walk fast when they were outside their homes, especially on roads, and they avoided interaction

with other people around them. The following quotations represent some of such unfavorable feelings:

> "I am poor. I have uncertain jobs, sometimes as a picker of seaweeds and oysters. I sell the seaweeds in the market to buy cigarettes, and I bring the oysters home for my meals. I often feel hungry, as I have nothing to eat. I am physically handicapped. I want to work in the sea to do fishing, but I do not have a boat. I want to be a servant of fishermen, but I am ignored. I am different from them. Even if I can catch fish, people will not buy the fish I have caught because I am disgusting, as people say." (Ulhadi)

> "Why is life like this? Life cannot be changed. This life is exhausting and disappointing as I am physically handicapped. I cannot make my life and my family's life better." (Kaharuddin).

> "I feel ashamed. My friends shouted, 'Do not come close, as you have naughty fingers'. What they meant by 'naughty fingers' was 'less normal fingers'. They asked me to go away and not to play and to get together with them. I must accept this condition with the hope that someday they will not treat me like that anymore." (Subaco).

The subjects knew that normal people would not approach them, let alone interact with them intimately. It was beyond their imagination that normal people would marry them, except in a few cases in which they had some special expertise, for example as traditional healers. Some subjects once involved in relationships with the opposite sex had to be finally disillusioned when their partners declined their relationships without sound reasons. This romantic failure was experienced for instance by Renita and Abditiro. A female partner criticized Abditiro as a useless man who would not make women happy.

> "I had been meaning to make close relationships with women, but I always failed. In the beginning a woman liked me, but left me at last when she found that I have a handicap with my hands and feet. I felt downgraded and ashamed. But it does not matter. I have to make efforts again to find a woman who can accept me the way I am." (Abditiro)

One subject, Cahaya, was even abandoned by her husband (who had been married to her for 10 years) without a sound reason.

> "I feel inferior because he left us as his family. He left without a cause. I have been abandoned by my husband since our second child was born. As a wife I have a heavy responsibility. My child also has the same condition of fingers and toes." (Cahaya)

The Body Cursed by God. Of the sufferers interviewed, some maintained that the illness was due to the curse of God. They associated their illness with the failures or the sins committed by their families, parents, grandparents, or even by their ancestors. They thought that their illness was probably caused by the negative attitudes of those people toward others in their past social life, especially by boasting themselves as being superior in status and physical appearance while looking down on others.

- "*My parents used to look down on other women.*" (Ambo Asse)
- "*My grandmother used to insult other people.*" (Gambur)
- "*My grandmother used to think she was more beautiful than other women.*" (Renita)

The subjects' perception of their illness is similar to the perception of leprosy sufferers in Tangerang as found by Teja (2006). Teja delineated that the dominant factor causing the leprosy as perceived by subjects was God's curse of them, although they hardly ever associated the curse with the faults of their parents or their ancestors.

The Body as God's Bounty. Most of Oligodactyly sufferers confessed that in the past they were desperate and depressed that they wanted to commit suicide. However, as time went by, some of them sincerely accepted their physical condition. They strived to be patient, strong, steadfast, hardworking, and optimistic. They were inclined to consider their bodily defects not as an obstacle but as a potential to develop meaningful relationships with others. They even emphasized that the abnormality of their

hands and feet and their poor economic condition was a bounty from God. They said that their agony brought them blessings in disguise, which include the following:

- Physical strength. The subjects seemed stronger than normal people. They were continually working; they never looked tired in working.
- Physical immunity. They seldom suffered from others diseases, except for their deformed hands and feet. One subject, Ambo Asse, claimed that when he was a child he fell down from a high tree, but he was all right. He also claimed that sharp tools could not hurt him.
- Ability to read other people's minds. The subjects knew what would happen through their dreams.
- Having spouses who were physically normal, having durable households
- Having the ability to work as *Paraji*, that is, traditional healers as in the case with Ambo Asse, Renita, and Kaharuddin. They inherited the expertise to cure people from their parents. These people were considered as having supernatural powers to give favors to the environment, for example, by leading the ritual *Mappare lise tasi* in the village. In this ritual people feed the sea by bringing *tuli* (food) composed of colorful rice, eggs, banana leaves as the cover of the food, *sirih* leaves and money (Rp. 1000,-) folded with the *sirih* leaves. Through this ritual, it is expected that the fishermen were given safety and much sustenance by *pajjagatasi* (the sea guard).

Based on the subjects' accounts, it is clear that their past illness experiences have been reinterpreted in terms of the present reality, although they were still suffering from the same illness at the time of the research. Indeed, Schutz (1972) confirms the significance of temporality in the social construction of reality: individuals give meaning to an event only after it has occurred; the meaning of an event is primarily retrospective. Based on the present perspective, the Oligodactyly sufferers' past experiences are explicable.

"My husband married me when I was 19. He was good looking, a virgin and physically normal. How come I got a husband like that. It was a gift for a physically handicapped woman like me." (Matahari)

"My physical condition is not perfect like others'. But I have been granted a mind to complement my weakness. Finally I am able to predict and to find out what other people are thinking. In addition, my body is strong. I never feel tired to work. Although I have a physical handicap, it is a gift from God. I accept it sincerely. I have been given a long span of life. I have been granted several children and grandchildren. They often visit me to entertain me." (Ambo Asse)

"I often cure people suffering from illness in this village. People think that I have a kind of superiority due to my deformed hands. I usually cure people on Friday." (Kaharuddin).

The subjects felt that although they suffered from a severe inevitable illness, they also had respected positions in the eyes of others, at least those who needed their help as traditional healers. The research found that these traditional healers were well known not only in their own village, but also in other villages. They were assumed by some villagers as more credible than medical providers. According to the subjects, in the eyes of others, they had that expertise because they had deformed fingers and toes.

Verbal and nonverbal insults

In their communication with normal people around them, Oligodactyly sufferers were often offended not only by strangers but also by acquaintances, friends, neighbors, and even by relatives and family members. Some observers or visitors just gave negative comments but not with the intention to insult them, while others insulted them intentionally. They were labelled as "people with fingers and toes that have branches," "frightening people," or "disgusting people." These verbal insults made them feel uncomfortable.

Apart from being verbally insulted, the sufferers were

often looked down upon, mocked at, laughed at, and excluded by others. Incidental observers often spitted or closed their noses and mouths with their hands when seeing the dirty and rumpled appearance of the sufferers, and their deformed hands and feet, in the hope not to smell the deformed hands and feet which they might think of as being a contagious disease.

> "One afternoon I was riding a motor bike with my wife on the back. Passing by neighbors, one suddenly laughed, looked at me, and shouted 'Aju mappaka' (fingers that have branches). My wife held my chest so that I could accept such an insult." (Kaharuddin)

Such verbal and nonverbal insults were also experienced by Subaco, Rahmat, Ulhadi, and Nurhalijah.When Subaco and Rahmat were going shopping to buy clothes, a woman closed her mouth with her hand and spitted. She left the store without buying the clothes she was looking at. In another case, when Ulhadi and Nulhalijah were entering a store, some visitors also closed their mouths with their hands and spitted. The store owner moved away and said, "What smell is this? There is garbage in this store."

Treatment and discrimination by others

People respond to our messages partly depending on who we are and how we appear before others. Names, looks, attire, body postures, all matter in communication. That the subjects suffered from the malformation of hands and feet was clearly visible. Such deformed physical condition as compared with normal and functional bodily organs led the subjects to feel a stigma and a sense of inferiority. The concept of *the looking-glass self* as once coined by Cooley (1983) is validated rightly that people's self-concept is significantly determined by what they think others think of them, thus emphasizing the significance of subjectively interpreted others' responses as a primary source of data about the self. Simply put, what one internalizes as one's own derives from messages one receives from others.

> "A self-idea of this sort seems to have three principal elements: the

imagination of our appearance to the other person; the imagination of his judgement of that appearance; and some sort of self-feeling, such as pride or mortification" (Cooley, 1983).

Cooley contends that the nature of self-feeling is social, since its meaning is developed by the shared language and culture and since it is derived from the people's subjective interpretation of the evaluations that significant others hold about their attributes and actions, and in the context of this study, about the subjects' malformation of hands and feet.

In their communication with other people, the Oligodactyly sufferers considered that the way other people had communicated with them was weakening their spirit to survive. Once in a while, some of the subjects were taken as beggars, because of their deformed hands and feet and their dirty and rumpled appearance. The following are some of the treatment the subjects received from other people:

- Some people, even parents, siblings, in-laws, grandparents, and other relatives, refused or ignored the subjects' existence, as if the subjects were not alive (nonself). Those people did not talk much to the sufferers. Even when they talked to the subjects, they often discriminated against them. Consequently, those subjects themselves resigned from communication with others.
- Other parties, especially the local government and its lower authorities in charge of helping the powerless people, took a pity on them to the extent that they were regarded as a burden to others. The subjects were fed up with the promises given by the authorities that some assistance would be given but it was never realized.
- Television journalists came to meet the subjects not primarily to understand them but to take them as objects or commodity worthy of being reported and sold to television audiences. Having been described as "people who have fingers and toes like lobster claws" in a television program (Trans TV, June 25, 2012), the subjects resisted being covered by subsequent television journalists. For some time some of the subjects also refused to be visited by groups of people who wanted

to give them some sympathy or assistance, as Renita who rejected the visit of a group of Senior High School students.

One's perception of other people is often followed by a certain way of communication with them, whether intentionally or unintentionally. Seeing Oligodactyly sufferers as strange people, many normal people often discriminated against them. Such discrimination comes not only from outsiders but also from one's immediate family, extended family, relatives, neighbors, and friends.

> "I was waiting for a public transport vehicle in Bone to go home. One car stopped in front of me. But the driver said, "The car does not go to Mare." A passenger in the car shouted that I should not get on the car. That situation made me feel hurt. They should have taken a pity on me." (Abditiro).

> "When I saw my friends swimming in the sea, I approached them. I was also swimming. However, my friends did not want to swim with me. They moved away so that I was swimming alone." (Antokaseng).

> "Father asked me to stay at home, but asked the rest of my family to go to the market." (Nurhalijah).

> "My husband's treatment to me is different from his treatment to his younger sibling. My husband rarely talks with me. He is somewhat indifferent to me. He talks more with his younger sibling. When my husband summons me, I pretend not to hear his summons. My mother in-law also rarely talks with me. When I visit my mother in-law, I feel like a stupid person. My in-laws also rarely talk with me, although there are a lot of people in my parents in law's house." (Nahriah)

Most people they encountered looked at them as strange people, as if they were inanimate objects that had no souls. In other words, they were taken as deviants. Frequently normal people stared at them, looked away, and even went away without saying one word. They felt this kind of treatment especially in markets where they could make money. Normal people were reluctant to buy the products sold by Oligodactyly sufferers. Serving so few buyers, the subjects made a little money.

Many people in the village considered the subjects as people always in need that should be facilitated by others. This was not always the case. The crux of the problem is that the labels given by family members, nonfamily members, authorities and journalists, that the subjects were "useless people," "disgusting people," "a social burden," or "the people with lobster claws" have created a vicious circle, or in a more scientific sense, "self-fulfilling prophecy," a prediction that becomes a reality because, whether we realize it or not we believe and say that it will become a reality (Verderber, 1996). Using Lemert's perspective, "In more extreme labelling theory the process of becoming deviant appears inelectable; deviants lose individuality and become like empty organisms who are successfully labelled by others" (Musgrove, 1977). Thus, the Oligodactyly sufferers became inferior and powerless because they had been expected as such by others. Put differently, they were suffering from a social stigma as defined by Goffman, that is, "an attribute that is deeply discrediting" that reduces the bearer "from a whole and usual person to a tainted, discounted one" (1963). This stigma is attributed by normal people around the stigma bearer as a bodily and/or mental sign associated with a defect or a disease. In line with Goffman's perspective, this stigma is a spoiled identity based on feelings about self in relationships with normal people.

Lessons Learned

The Oligodactyly sufferers as the subjects of this study have constructed the meaning of their ailments in different ways. Some subjects viewed their defected body just as a different body, while others considered their deformed hands and feet as God's curse, and still others regarded their ailments as God's bounty. Some subjects still regretted their unlucky fate deeply at the time of the research, while others saw some blessings behind the ailments.

In terms of gender, female subjects seemed to suffer more from Oligodactyly psychologically than the male subjects due

the stigma attributed by normal people. Women in the village of Ulutaue were more dependent on men and on the family, rather than the other way around. Men suffering from Oligodactyly were more likely to marry normal women, especially if the men had expertise that can be used to maintain the family. In terms of age, the younger the subjects, especially those who were still single, were more likely to suffer from Oligodactily psychologically. Simply put, the younger subjects seem to be more depressed than the older ones. This tendency is partly due to the fact that the younger subjects had greater needs to be accepted by their peers, and if possible, as prospective spouses. It is our assumption that if the subjects had received optimal psychological and emotional support from their immediate families and relatives, they would have had more positive self-concepts and less negative reactions toward normal people.

The subjects of the study enacted in different ways of communication with people around them, although most of them indicated a similar tendency, that is, a withdrawal from others' presence and their preference to be left alone, as they were aware that they were people to be avoided by normal people in the daily social intercourse. The research has found that the dominant negative messages the subjects received and internalized from their immediate family members, relatives and nonfamily members have weakened their spirit to survive.

In this research the social construction theory and the theory of symbolic interaction has been useful in exploring the experiences of the Oligodactyly sufferers. To some degree, the way the subjects have defined their physical condition and the way they looked at themselves have been molded by the way others have treated them, although some of the subjects have redefined their illness and their self-concept in a more creative way, especially those who have considered their illness as God's bounty.

This research has dealt with few aspects of the Oligodactyly sufferers' life experiences. Further studies with more subjects

will hopefully bring about more conclusive results. One of the limitations of this study is that it is based on a relatively few (15) subjects from diverse (gender and age) backgrounds, although they were interviewed thoroughly, that it is somewhat risky to come up with generalizations.

Many other aspects are worth investigating, one of which is how the sufferers have presented themselves to neutralize the stigma they have received from other people, especially strangers. It has been found, for example, that they have used certain models of sandals to hide their deformed feet. So, using a dramaturgical perspective, we can explore what verbal and nonverbal tactics have been employed by the Oligodactyly sufferers to maintain their front stage in order to minimize the feeling of shame or inferiority before others or to cultivate a better image in front of others. We also wonder how the stigma associated with Oligodactyly differ from stigma associated with other defects or diseases or whether there are different kinds of stigma as felt by Oligodactily sufferers. The answers to these questions are beyond our discussion at this time.

The Self Factor as the Tendentious Reason for Substance Use

Nurlina Rahman, Deddy Mulyana, Sussane Dida & Yanti Setianti

Drug or substance abuse has become a problem at all-levels of society both locally and internationally. According to the World Drugs Report 2018 published by United Nations Office on Drugs and Crime (UNODC), approximately 275 million people worldwide or about 5.6% of the world's population in the age range of 15 to 64 years old have consumed drugs. In Indonesia, the BNN (National Anti-Narcotics Agency) which spearheads the prevention and eradication of substance abuse and the fight against their black market circulation in Indonesia, registered that the number of substance abusers in 2017 was 3,376,115 people with the age range from 10 - 59 years old.

Indonesia's substance users are mapped into two categories: students and university students which total 1,355,050 people, and the non-students and non-university students which total 2,007,469 people. The number of substance users has reached up to 1.99% of the population with users ranging in age from 10

to 59 years old or approximately 3.2 to 3.6 million people. Users consist of 26% as the tester group, 27% as the regular user group, 40% as the non-injection addict or junkie group, and 7% as the injection addict or junkie group (Jurnal Data BNN, 2010). The known number of substance and drug users in schools consists of 7,000 junior high school students, over 10,000 high school students, and approximately 800 elementary school students. Those numbers are extremely concerning and make us worry due to their rapid increase.

Based on data from BNN in 2017, the prevalence of substance abuse nationally had reached up to 1.77% or approximately 3.37 million people, with the user average presentation as follows: 59 % the worker or productive earning group, and 24 % the student group. The number of substance users among students in 2018 (based on data from 13 capital cities of provinces in Indonesia) has reached up to 2.29 million people. The section of society which is most vulnerable to substance abuse is those who are in the age range between 15 - 35 years old. They are usually students or the millennial Generation. Alan T. Barker stated that "*The personality trait of negative urgency, characterized as behaving rashly when emotionally perturbed, is gaining attention as an indicator for susceptibility to problematic substance use. How this trait is influenced by exposure to drugs of abuse is still unclear.*"(Alan T.Barker, G.V.Rebec: 4 https://doi.org/10.1016/j.drugalcdep. 2015.11.040)

BNN has been continuously reminding the people about the dangers of these substances or drugs and also about the current state of emergency surrounding substance or drug abuse in Indonesia. Approximately 50 people die each day because of drug and other substance abuse. The BNN data estimated that approximately 4.2 million Indonesians were using drugs during middle months of 2014. "Approximately 50 people die each day because of drugs and the economic and social loss costs up to 63 billion rupiah each year."

The drug problem within our society has become an extremely serious issue. It means that there needs to be a handling of the issue of intoxicants at all levels, not only the use among the adults, the celebrities and the civil authorities, but there also needs to be recognition that this drug problem has become a problem in the educational world or among students. The substance abuse problem is complicated and has affected various aspects of human life, such as physical-biological aspect, the psychological aspect, various social aspects, as well as mental and spiritual aspects.

From the users' descriptions during interviews, researchers found that substance, alcohol, psychotropic, and other addictive substance abuse information showed that the majority of the users started to try consuming substances during their teenage years or at approximately 14 years old when they were in the junior high school. But there were also users who started during their elementary school years or around the age of 10 years old. A number of users interviewed claimed to have started using drugs between the age of 14 to 16 years old (or during their high school years). It is very concerning that these substance users generally started during their teenage years with quite long periods, with periods of using varying from one to 13 years, with some users even using until their age was above 29 years old (Rahman, 2017).

Schools and other educational institutions and also certain other places have become vulnerable for users and drug distribution. According to one survey, 60% of student brawl perpetrators in Jakarta are substance or drug users. Research done by Hawari (2001) showed that one of influential factors for the increasing number of these substance or drug users in The Special Region of Jakarta was the educational curriculum at schools which placed more emphasis on the cognitive aspect (knowledge), and less on the affective aspect (emotion), the motivational aspect (awareness /will), and psychomotor (skill) as the base for overall human behavior.

In this study, we will describe the self factor as one of the tendency factors for users to begin using substances or drugs. The words tendency and predisposition in the KBBI (The Big Dictionary of Indonesian Language) mean being prone to or having a specific tendency towards a certain situation or condition or development. Later we will discuss several tendentious factors, such as the symptoms, the characters, the desire, the predispositions and behaviors which form the basis from which a person chooses to become a substance or drug users.

The paradigm used in this study is the interpretive perspective requiring an idiographic analysis in giving a description of the substance or drug users as a social phenomena. Researchers not only met and observed the subjects physically but also tried to dig into what lies in their minds - their motives, and how they really felt about their own behavior. An in-depth development and understanding of this study can only be attained by describing and interpreting the true meaning behind the social phenomenon of drug users. The purpose of this analysis is to formulate the appropriate propositions from the case studies. Therefore, the result will not be quantified or generalized to all the drug users in Jakarta or the country.

In the Interpersonal Communication Context, the term of "the looking-glass self" was created by an American Sociologist Charles Horton Cooley in 1902, and was introduced in his own work of *Nature Human and the Social Order*. It describes our own reflection on how we think we look to others. Furthermore, it's about how a person would imagine others see him / herself. For example, a mother often sees her child as a flawless individual, while others may well think differently. Cooley calculates three steps when he uses "the looking-glass self". The first step is about how a person imagines others see him. The second step is about how a person imagines how other people judge based on how people would see him. The third step is how a person thinks about on how people would see him based on the previous judgement.

Selecting the Drug Users

This research used a qualitative approach with a descriptive research type, which had the purpose of giving descriptions of the informants' tendentious backgrounds in revealing the self factor which becomes one of the main user tendentious factors. This study used a symbolic interactionist methodology which is included in one of many qualitative research traditions, assuming that the systematic research must be done in a natural environment instead of the artificial environment like an experiment. The methodology is based on several theories and procedures including ethnography, phenomenology, ethnomethodology, symbolic interactionism, environmental psychology, semiotic analysis, and case study (Lindlof & Meyer, in Mulyana, 2001).

During this study, researchers built a kind of relationship with informants in a natural condition. The phenomenon was studied in natural context or real situation without having any manipulation other than being natural or real, treating these informants as friends and becoming one group as a part of the research place or location, for example at a rehabilitation center for drug addiction. The data was collected from over 20 people.

This study was done by doing in-depth interviews and observing over 20 informants who were mostly in the age range of between 10-16 years old when they started to use drugs, which means that they tried the drugs during their teenage years. Their length of time in using drugs varied from 1 to 12 years. The informants were chosen through snow-ball sampling.

In this matter, the key informants are viewed as social actors. This study focusses on interviews with drug users, former drug users, and anyone who is in the phase of recovery from substance abuse along with his/her discussions with partners in an interpersonal communication context. The interview results were then analyzed.

In formulating the general conclusion, this qualitative research does not begin from a hypothesis as the generalization, but tests

data validity through a specialized data collecting method which follows the inductive thinking process. Following Bogdan and Taylor (1975) this study is based on a research procedure resulting in descriptive data in the form of written words or verbal words from people or behavior which can be observed. This study does not isolate individuals or organizations into variables, but sees them as a part of a whole.

Reasons for Using Drugs

Substance abuse or addiction is a condition which can be conceptualized as a mental disorder. It is a mental and behavioral illness or disorder caused by substance abuse. The impact of substance abuse is when a person is no longer able to function appropriately within society and shows a dispositional behavior or is maladaptive. Lately substance abuse has become a phenomenon within the teenager growth process with continuous changes in usage patterns. The term of "narkotika"as it is known in Indonesia, it is taken from an English word "narcotics" which means drugs, and also from a word that has similar meaning, "narcosis" in Greek, and which means to be put to sleep, or to anesthetize.

NARKOBA (Narcotics and other intoxicating, hazardous and forbidden substances) is a term used among society and by the authorities, for any substances or drugs that are considered as being hazardous, intoxicating, or forbidden to be used, to be produced, to be distributed, to be traded, and so on, outside the law.

Various terms are often used and sometimes can cause misunderstandings, not only for medical professionals but also for the public. For example, the English term of drug abuse can be interpreted as medicinal misuse, or the words "drug dependence" can also be interpreted as a medicinal addiction. The word "drugs" in both terms are actually meant as substance, narcotics,

or other similar substances which give negative impact for human health. So the meaning of drugs here is not for medication in medical area, because the appropriate word for it is "medicine" and not "drugs". Therefore, to eliminate the misconception, the appropriate word for drugs is "substance" or "substance abuse" which can be interpreted as substance misuse (Hawari, 2012).

Substance abuse is a predisposed behavior. From the psychosocial viewpoint, this predisposed behavior happens as the negative impact of the non-conducive interaction between the tendentious factor with a trigger factor (not being supported into positive ways); such as by the environment, family, and self aspects as well as the fellow gang member aspect and of course the drugs or the substance itself. Systematically, when a predispositional behavior occurs, it can lead to using or abusing NAPZA (Narcotics and other addictive substances) (Rahman, 2017).

In the life of every person as a member of the society, he/she also becomes a member of a group or groups. Each group has its own set of rules or norms. And so do the drug or substance groups. Among all groups, it is the reference group or the gang which has led the user to behave according to the norms or rules which are followed by the substance user group members. This gang is the one which gives the influence to user self concept towards substance use and abuse. If a group or gang could give a positive influence then the interaction would reduce the predispositional behavior risk, but if the gang gives a negative influence then the predispositional behavior risk will be higher and may eventually lead to substance abuse and dependence / addiction (Rahman, 2017).

Substance abuse which happens to a person cannot be separated from the environmental, friend, parent, family, personal problems or other factors. During the teenage or young-adult years, the relationship with fellow-friends will be more widespread and placed as the main part of their lives. This study has shown that a person can get involved in substance abuse even until the

phase of dependence or addiction if the individual has already had a tendentious factor within him or her self and that is the factor which will make him /her to have the tendency to abuse substances.

The tendentious factor is the factor which becomes the main reason for a user to justify himself after doing self-conversation in deciding to use drugs or substance or in other words, it's his own tendentious behavior.

This study will only describe the self background as the substance user's tendentious factor. It is described by the sequence and the process of a user revealing his/her inner self which is the tendentious factor as one of many factors which are described here.

From the result of this research, it was found that the self factor is one of the tendentious factors in abusing drugs or substance along with several other categories of being curious, being willing to try, comparing themselves with their gang members, having a weak personality (being antisocial); feeling unhappy, having an inability to solve problems, or having a tendency towards negative behavior. These are described in the result model as follows:

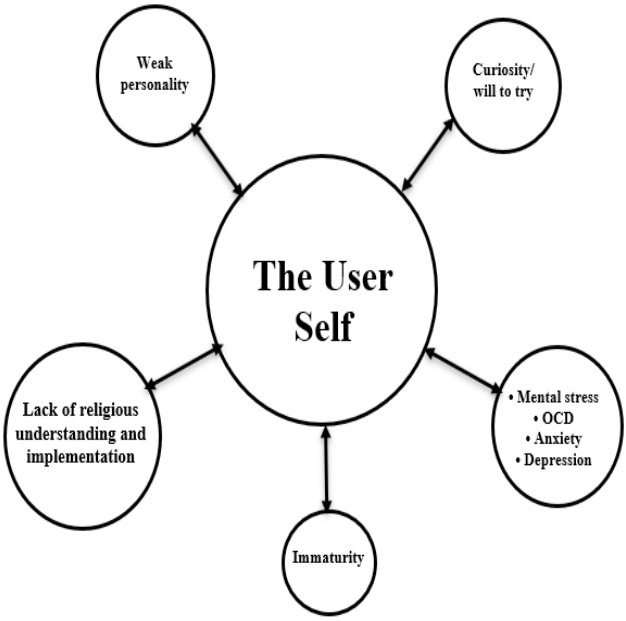


Figure 1. The Self Factor of Substance Users

The self aspect category is the tendentious factor for the user in abusing substances, such as curiosity and being willing to try. All users stated that their curiosity had led them into deciding to try the substance or drugs after seeing their friends using the drugs for many times and a user even claimed that he purposely entered a substance or drug user environment after he has observed it, only to find out how it tastes. Here's the user statement (Ab):

> "I was in the second grade of Junior high school at that time, and I just wanted to know the 'high feeling, or how is the feeling of using drugs, to know what marijuana tastes like. Whenever I came home after school, I often watched the "Cililitan gang", they often hung around behind a food stall while they were 'high.'"(Ab).

Starting with curiosity and then trying the drugs from friend's information. As stated by users as follows:

"I've always wanted to try because I've seen and tasted it once, it was PT (Putau), it was rare at that time, so when my friend from the gang brought it, of course I was curious to taste it." (Gt.)

"I started to smoke when I was in the second grade of elementary school, and then when I was in the second grade of junior high school, I was offered some PT by a friend, that was around 1993, and people were not familiar with that kind of drug (PT), he said it was from Lombok, and I tried it by 'dragging' it." (Tp.)

The next reason, all users stated that the self factor is the (main) tendentious factor for them to start using drugs or substance as all users described that they were "comparing" themselves with their fellow gang members when they had not used the drugs yet, and they felt that they were the strongest compared to their fellow gang members when they started to use or consume *putau* compared with other drugs or substances :

"My fellow gang friends never forced me to try the "stuff" (PT), but because they were my friends and we often hung out together, I felt that when my friend said something like 'we youngsters are not swag if we can't fly,' as a freezer, and I also felt like an alien if I didn't do it, since all of my friends were using it. At that time, I didn't think about the danger of consuming the 'stuff', because all I could think was about how I can be the same with my fellow gang friends. It felt so insane whenever I saw my friends were 'on a high' and I was the only one who was 'sane' and only watched them. So later I had a thought of using the 'stuff' together with all my friends so I could feel what my friends feel at that time. So I was curious and started to use it. I started to try Putau when I was in the first semester at university, so that was my first encounter with Putau. At first when I used it, I threw up unlike my friends who soon "got high". So it made me even more curious, so the next day I tried it again by adding more dosage, then I can feel the impact of having some kind of feeling as the strongest compared to my friends. So finally I got hooked or addicted to PT, since then PT has become my drug of choice." (Kk.)

"My old friends from the gang used PT too, but they didn't get it from me, they found it by themselves, but they often asked me to buy it for them by collecting our money to buy it. They used only little amount of it, while I used one package for myself." (Rz.)

As stated by Adler and Towne (1987), the view of "I" is about everything that we think and feel about "me" which consists of physical images and various other aspects about ourselves such as emotion, talent, pleasure, values, roles and so on which we have or own about ourselves. Adler and Towne also describe that self concept is formed through the social comparison process. Self concept is formed by comparing ourselves to others (a reference group). The comparison process can be seen from two sides: Are we the same with or different from others? Are we superior or inferior compared with others?

Comparing themselves to their group members through a social interaction process is a category which can make users judge and interpret themselves from the opinions received, thus building and creating the self concept, even though it is against their own self concept, which is against negative behavior and attitude. That is similar to what DeVito (1995) stated, that aside from the significant other and social comparison aspects, he added the interpretation and self evaluating into the self concept form. He also gave an example that a person will have a guilt feeling if his behavior is against his own self concept, and he will react positively towards a behavior which is in accordance with his self concept.

In this matter, the self factor is the personality disorder (antisocial) which has the symptoms of having dissatisfied feeling towards significant others. Bad comments from the significant others will be very influental compared to other opinions about themselves, critical parents often become the cause of negative self image, and even worse if it leads to anxiety and depression and can also cause personality disorder (being antisocial). Besides that, the person will not be able to do his role accordingly and effectively in his house, school, work, or neighborhood. In order

to handle the inability and to eliminate the anxiety disorder, the person then develops a weak personality and has a tendency to find his own remedy or make a compensation. If he can't find positive activities, then he has a tendency to find the negative ones, such as getting involved in substance abuse.

This is different from the individuals who have a strong self concept, whereas they are able to differentiate between good and bad behavior and attitude, so that the positive self concept can differentiate and compare about what to do and decide before taking action. So the drug users have weak self concepts. The negative influence received from their groups or gangs, which is very strong, has formed negative self concepts thus they decided to use drugs, as happened to Rn, Hs, Jz, Tp, and Ab, who are a small group of users.

That the group influence is powerful can be seen in a statement from Rn who has the background of lacking in family harmony and communication, whereby Rn felt abandoned by her parents, so that she prefers to share her feelings with her friends instead:

> "I'm not close with my parents and all of my sisters. I feel that my parents are not being fair in the way of treating their children, and they also rarely talk to me. So I never feel comfortable at home, therefore I often just hang out with my friends till late at night. At first my fellow gang members always hid themselves whenever they used drugs, but after a while they became more transparent, and did not hide anymore. There happened to be another girl in the gang. At first I was so scared to try Putau, but since I really needed to cast away my sadness about my family, I finally found the courage to use it with my boyfriend who happened to be my fellow gang friend. I feel that my fellow gang friends truly love me because they can eliminate my sadness." (Rn.)

Starting from the unhappy self, feeling dissatisfied with the condition but never making any effort to fix it and the conflict between her wish and her responsibility has created a negative self concept. As well as this, there is another category such as

having low self-esteem value. As described by Hs:

> "When I decided to become a street busker, I actually had lack of confidence because I knew that I am shy and unable to face strangers, but I had to do it since I needed to make some money to live, besides I had already dropped out of school, so I didn't have anything to do anyway."

Mentally stressed, OCD, anxiety disorder, depression are the self tendentious categories within a person in deciding to get involved with substance abuse. A person who has personality disorder often feels dissatisfied with his own behavior. He has a disability to function naturally and effectively. A person who has a personality disorder usually has mood swings, such as anxiety or depression, so he usually uses drugs which can continue into drug abuse or even dependence (addiction) phase.

Some of the background factors can lead a person into having an OCD, anxiety disorder, or depression. Unfortunate sosio-economic conditions became the background for one of the users, Hs who has to live on the street, in which the condition has forced him to be strong and also forced him to handle a hard situation even though he feels a strong lack of confidence. For this reason he covers up for his physical and psychological shortcomings and uses a tool for his self-conflict compensation, and that tool takes the form of the drug called *nipam* or BK. The effect of this drug or substance can cause the self-consciousness orientation reaction, increasing his self-esteem or his self confidence along with a relaxed feeling, but if it is overly used it can cause depression, stress on the brain's cortex and result in sense disorder.

As opposed to the unfortunate user coming from a low economic status background, other users have high economic status backgrounds, but because they feel unhappy, lonely, and are unable to overcome their psychological problems, they have the tendency to do drugs or substance abuse, as stated by Ald, Gt, Jz, Rz, Tp, and Bb. They tend to get money more easily, as much as they want and without having to work hard, but that still

doesn't free them from boredom and lonesomeness, and they tend to find their happiness outside their families, and prefer to be with their friends. The antisocial personality has led them into the tendency to do drugs or substance abuse. As stated by these users:

> "My parents are never suspicious about me, because I am a good child in front of them, so whenever I ask for some money or anything, they always give me whatever I want. Even after I became a junkie, they still gave me money, so I just used it, before they found out about this." (Gt.)

> "I always feel bored at home, because my parents are rarely at home. My cousin often asked me to hang out at his place, and almost all of his friends use drugs, so I started to know marijuana and Putau there. I could spend money up to a million when I started to get addicted." (Bb.)

As mentioned earlier, the majority of users started using drugs during their teenage years, approximately between 12 to 16 years old. At such an age, teenagers are in the developing or growth phase both physically and psychologically. Most users feel that their age factor was the influence towards their social pattern. Some parents gave too much trust to their children when their children were just begining their teenage years, even though it helped users in their independency process at the same time. The teenage friendship pattern which is still vulnerable during the identity searching process, has an antisocial behavior tendency, in not knowing how to follow the social flow without getting carried away.

The unstable mental condition can make an individual who is still very vulnerable to get influenced by the environment outside himself, and therefore the immature aspect of a person may become the tendentious factor for the person to start using drugs or another substance. The teenage mind pattern is still dominated by self satisfaction and the need for acknowledgement from his environment (friends). Teenagers tend to search more about their

roles among the society from their group environment rather than how to be accepted by the society based on their own self concept.

Another aspect of the tendentious factor within users themselves is their tendency to use the drugs or substances resulting from a lack of religious understanding and its implementation. This category was stated by the least of users, they are: Kk, Ald, Gt, Ra, Tp, Bb. Weak in religious life understanding within their homes or family had made these users very vulnerable to becoming involved in drugs or substance abuse. A weak commitment towards the religious teachings such as praying or *shalat* had made the users abandon or even leave the norms, the law, and the strong religious teachings. As stated by these users:

> "I know that I hardly ever pray, and that is one of many factors why I got involved with drugs." (Gt.)

> "If a user wants to recover, it won't be enough to just doing rehab, instead he must come back to the religious path, like praying or *shalat*, and getting closer to Allah SWT, because before I used drugs, I admit that I hardly ever prayed or did *shalat*, even though at that time, my dad had a private tutor to teach me in reciting the holy Qur'an." (Bb.)

Basically every human being has a basic spiritual need or religious belief. If this need is unfulfilled, then a person will often search for it by escaping into negative things, such as drugs. This is relevant with a research done by Hawari (2010) which found that religious obedience among user groups is far lower than the non-user groups.

Other than the significant other and the social comparison aspects, some self concept characteristics give an influence in forming the self concept itself. If a person prefers the upper (opinion which helps in raising self-esteem) instead of downer (opinion which decreases the self-esteem) then he can see himself better than reality. And so does the other way around, many people see themselves worse than they actually are.

If a person considered himself worse than he really is, then it would put him into a state of depression and that can cause extreme anxiety. Having bad perceptions about his environment could also form a negative self concept, such as having a low judgement of self-ability, avoiding challenges, seeing a problem only from one side, blaming others without any clear evidence, feeling dissatisfied with self-condition and the environment but never putting any effort into fixing it, causing conflict between different wishes and hopes. Some of the previously mentioned negative self concepts are the common symptoms which happen to users and become their reasons in determining their actions to become drug or substance users. As described by user Dn:

> "I often got scolded by my father, and I got beaten once when he found out that I smoked, but sometimes he got angry at me without any reasons. I know that I dropped out of school because I'm too lazy to study at school, so I often skipped classes because I prefer to work and get money. Then finally I often hung out with some friends at the traditional market. Yes, I make my money at the market. At first, I started to use marijuana and drugs like nipam pills, nipam lexotan, and rophypnol, and I've even tried to mix them with some gasoline. People may get scared whenever they see me, but I feel just fine as long as I can make my own money."

From the user experience shown, it is a rare thing that a user uses only one kind of drug, instead they try to combine various kinds of drugs, and it's done in order to increase the user's physical impact or the term known among users is "getting higher" (physical effect such as euphoria, a state when users seem to have overly excited mood and out of control and capable of doing immoral behavior).

Recognizing and identifying whether a person is getting involved with any drugs or substance abuse is very hard, and even could cause unpleasant conflicts or fights among various disciplines involved. The problem can get worse with there being some stigma among the society which can cause an individual to always try to hide his habits which are considered as bad or

evil. Data about users' experience shows that only when the used dosage has reached the addiction (dependence) phase (intensified user), will those users then come to a place such as a hospital, or a medication or rehabilitation center to get some help. They also seek help if their assets or belongings have been used up to buy drugs, or maybe after their parents have found out about it because users often steal valuable things around their homes to be traded or sold to buy drugs. Another problem which makes the introductory effort hard to do is the tendency of polydrug use which means that an individual abuses more than just one type of drug. There even are users who try any type of drug just to find out the impacts of consuming them.

Drug or substance impacts that influence the brain and behavior when being used vary widely depending on users' desire, the setting where the drugs are used and also the amount of drugs used. Drugs or substance can affect their personalities, images, or their self-values thus anything that is usually under control will be out of control and thereby damaging the individual's personality balance. Their self control will be weak or even disappear which makes users become very sensitive such as by getting annoyed or angry easily, sometimes feeling overly excited (euphoria), they can also be disoriented toward themselves and their environments, and through a sudden shock can feel confused or desperate and so on. The existence of tendentious factors is not sufficient, and it needs other trigger factors in order for a person to become involved in substance abuse.

Concluding Remarks

The result of this research reveals some of the self tendentious factors that cause different impacts on individuals so that they decide to become drug or substance users. The self factor described in this paper is based on the informants' experiences in doing their interaction with their friends in their environments

and reference groups. Some other factors may include: having the curiosity and will to try, comparing themselves with their group friends, having a weak personality (being antisocial), feeling unhappy, having the inability to solve personal problems, and having the tendency to engage in negative behavior.

By looking at the tendentious factors, it would be best for parents or family to be able to plant the positive concept seed into children that drugs or substances are an extremely dangerous matter in life. This positive self-concept should be planted in their minds as early as possible, and during our interaction with others. Sometimes there are friends in our gangs who will ask individuals to join them in doing some negative or bad behavior. Parents should be able to develop their children's potentials by leading them into positive activities, giving them a positive environment, and by also fulfilling their basic needs for inclusiveness or the feeling of being involved, being needed and trusted to become independent children.

The Personalistic System of Healthcare in Indonesia: A Case Study

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Healthcare is not universal. Schiavo (2014) contends that "conception of health and illness are influenced by culture, race, ethnicity, age, gender, socioeconomic conditions, and geographical boundaries, among other factors." In the same vein, Jonas et al (in Parker et al., 2009) suggest, each society defines healthcare in a rather unique way and develops its diagnostic and treatment theories, practices and tools to serve patients and cure their illnesses. What is defined as illness, what factors cause it and the way to overcome the ailment are affected by the culture of healthcare practitioners and that of the patients. Medical providers who totally adhere to the biomedical (science-based) system of healthcare without realizing the existence of other healthcare systems might underestimate patients' use of religious prayers, traditional healers, herbal medicine, special

foods, and other ways of alternative therapies. Waitzkin (2009) suggests that any effort by modern medical providers to describe patients' physical ailments may have little or no meaning to a patient from a different culture.

Whether we agree or not, alternative therapists have their own symbolic universe of the ailments and their causes and offer specific solutions which are different and may be contradictory to biomedical solutions. It is in this context that we aim to explore the varieties of alternative healthcare that are widespread in Indonesia, the focus being that based on the personalistic system. The personalistic theory assumes that "illness is due to the purposeful intervention of supernatural being (e.g., a god), a nonhuman being (e.g., a ghost or evil spirit), or a person who has supernatural powers (e.g., a witch)" (Parvanta & Bass, 2020).

In practice this personalistic system is often complemented with herbal medicine (the naturalistic system). Both systems are often termed "complementary and alternative medicine" (CAM), that is, therapies and healing practices beyond the conventional biomedical treatment (Ho, 2014; Ho & Koenig, 2014). Sociolinguistic studies of medical discourse have emphasized the biomedical system of healthcare and have neglected other systems such as complementary and alternative medicine (Kim, 2014). This study is expected to contribute to this scarce discourse.

Indonesia has a population of over 270 million people who live in the thousands of islands scattered throughout the archipelago. Some ethnic groups in the country may even have distinct healthcare systems based on their culture which they have inherited from their forebears. The Hindu Balinese in Ubud, for instance, use Ayurveda that originally came from India and emphasizes the use of traditional and naturalistic healthcare to get over various ailments (Putri, 2015), while the villagers in Desa Pasir, Madura, use hot and cold sands by lying or sleeping on the sands to take care of their health (Rachmad & Surokim, 2015).

Contemporary studies on alternative healthcare practices in Indonesia have been existent, albeit smaller in number than studies on biomedical healthcare practices. To illustrate, Permana (2012) found that the reasons people seek alternative healthcare include: belief in this form of healthcare, knowledge of the healthcare, and value of the healthcare. More specifically,Yani (2017) studied health communication involving supranatural alternative medicine. She found that the patients suffering from life-threatening diseases abandoned the biomedical treatment and chose the supranatural medicine because they were disappointed with and were not cured by the expensive biomedical treatment, while they found love, happiness, and meaningful life in the supranatural treatment.

In this paper, instead of exhausting all the alternative healthcare practices found in Indonesia, we will focus on the personalistic system of alternative healthcare practices, including those promoted through media, especially television. Specific cases will be highlighted to get glimpses of the vast number of such alternative therapies throughout the country.

Three Systems of Healthcare

Healthcare can be categorized into three basic systems (Mullavey-O'Byrne, 1994; Sullivan, 2001): *the Biomedical (Scientific) System*, *the Naturalistic System,* and *the Personalistic System*.

The biomedical system is intertwined in the emergence of natural sciences that can be traced to the Renaissance (Hardey, 1998).This is the dominant model of healthcare in the Western world (Berry, 2007; Begley & Ockey, 2012). This model has penetrated formal healthcare and healthcare education in Western countries for centuries. It has also penetrated many countries in other continents, including Asia. This model is governed by the following tenets: the separation of mind and body; the machine metaphor for the body, assuming that physicians act

like engineers to repair what is dysfunctioning in the body; the merits of technological interventions and the adoption of a technological imperative; the reductionist explanations about the biological changes, ignoring the social and psychological factors; and by placing emphasis on the disease as a phenomena caused by external entities such as parasites, viruses and bacteria (Nettleton, 2006). The adherents to the biomedical system assume that an objective reality (disease) exists which is independent from people's attempts to comprehend and control it and apart from their social and psychological factors (Marks et al., 2000).

Somewhat overlapped with the biomedical system is the naturalistic system which uses a variety of herbal medicines. This system is used especially in Eastern Asian countries such as China and Korea. In the naturalistic system, the healer examines how the person gets ill and what kind of illness it is. According to this healthcare model, to be healthy the body elements must be in a balanced condition. Therefore, it assumes that illness is caused by the imbalance of these elements in the body, since they are too cold or too hot, experience high emotion or have a poor diet (Sullivan, 2001). Natural and environmental forces are also considered factors that make the human system imbalanced.

Based on the naturalistic Chinese perspective, health is seen as the consequence of balance between and within varying entities inside and outside the person. Disease or illness is assumed to be the result of disharmony among all these entities or seen as the result of ordinary activities that have gone wrong, for instance, the effects of climate, fatigue, hunger, wounds or parasites (Porter, 1997). The two elements of the human body that need to be in balance are two life forces, *Yin* and *Yang*. *Yin* is the female force often associated with dark, cold and wet, and *Yang*, the male force often associated with light, hot and dry. So *Yin* illnesses have to be treated with hot foods such as chicken, while *Yang* illnesses have to be treated with cold foods such as vegetables, although the terms cold and hot do not refer to the temperature condition (Schiavo, 2007).

Like two other healthcare models, the personalistic model can be found in many countries all over the world, especially in underdeveloped and developing countries inhabited by tribal groups. Indonesia is no exception. Embedded deep in the Indonesian traditional culture this personalistic system of healthcare maintains that illness is caused by the acts of other human beings or supernatural forces such as witchcraft or sorcery. Health and illness are also often perceived as being the result of unseen intervention of displeased spirits or God. This system often sees the ill person as having committed a sin to other people, animals, or plants. The proponents of this system consider that plants have their own life, knowledge, and wisdom. It is believed that to have sound health, individuals have to be in harmony with the nature. In short, healing is considered to have a spiritual dimension (Renfrey & Dionne, 2001).

While the proponents of the biomedical system adhere to the objective-scientific approach in examining the reality of disease or illness, the healer in the personalistic system seeks to find out who or what caused the ailment to explain why the ailment has occurred and to determine alternative solutions in order to get over the suffering, for example, through rituals, prayers, chants, amulets, etc. The proponents of the personalistic system acknowledge the social construction approach which assumes that illness is best conceived as an intersubjective reality that cannot be examined through positivistic-quantitative approaches. It is difficult to verify such a problem through the traditional way of scientific endeavor since illness is experienced as a complex phenomenon attributed with various meanings, be it physical or psychological, or whether it be individual, social or cultural (Mulyana, 2016).

The proponents of the social construction theory, which includes many healthcare providers themselves, assume that individuals with different social and cultural backgrounds may attribute different meanings to the same physical or psychological illness. According to this approach, and regardless of cultural

differences, even drugs given to the patient to combat the patient's disease may not only influence the patient's body but also the patient's emotions. Different healthcare providers may use different approaches to the same problem, define similar symptoms differently, and hence propose different solutions. For the proponents of the social construction theory as formulated by Berger and Luckmann (1966) the medical belief systems, like any other belief systems, are systems created through people's interpretations. They are culturally specific, produced and negotiated creatively and designed to overcome particular practical problems (Nettleton, 2006). In brief, the biomedical system of healthcare, including its content and practices, no matter how scientific and empirical it is, like the naturalistic system or the personalistic system, is socially constructed.

This study is part of a larger research project which lasted three years from 2016 to 2019. The whole project involved Focus Group Discussions (FGD) with several types of alternative therapists (energy transfer therapists, massage therapists, herbalists and others), media key persons in charge of media (alternative) healthcare programs which include television programmers, officers of KPID (Provincial Broadcasting Commission), officers of *Dinas Kesehatan* (Health Provincial Offices, a smaller unit of the Health Ministry), and communication academics (lecturers). We have done this FGD in Bandung in the Province of West Java, Surabaya in the Province of East Java, Palembang in the Province of South Sumatera, Batam in the Province of Riau, and in Makassar in the Province of South Sulawesi. Each FGD lasted between two to four hours.

To comprehend the larger picture of the personalistic system of healthcare practices, we have interviewed dozens of common people as patients, and dozens of physicians (medical and general practitioners) in Jakarta, Bandung, and Yogyakarta. We have also observed and undergone some of those health practices in several research locations. Apart from the fieldwork, we have observed television programs (including those in *Youtube*) taken

from sample areas and contents of the internet; we have used contents of the printed media, so far as the materials enriched the study. Past research findings have also been added. So in a way, this study contains some metaresearch.

Bringing about Research Results

In Indonesia the three systems of healthcare: the biomedical, the naturalistic, and the personalistic can be found throughout the country.The biomedical system is more dominant in big cities and cosmopolitan areas. However, in remote areas naturalistic and personalistic healthcare systems are more commonplace than in cities, although it does not mean that in cities the two systems are much less important than the biomedical system. Indonesia is a good case where people may combine the three systems of healthcare simultaneously. They may go to physicians and take the prescribed medicine when they suffer from headaches, high-blood pressure, cough, heart failure, and even cancer, but they also drink *jamu* liquid made of herbs at a different time of the day (based on the naturalistic system) and pray to God to alleviate their suffering at prayer times (based on the personalistic system).

Many Indonesians seem to follow what most Asians believe to be the nonbiological causes of illness, especially "imbalance" of cold and hot food, lack of harmony with nature, and too many emotions and are less satisfied with the Western healthcare services (Kazarian & Evans, 2001). According to a socio-economic survey in 2004, 72.44 % of the Indonesian population conducted self-treatment and 32.87 % used traditional medicine. At that time there were approximately 280,000 traditional healers who practiced 30 branches of expertise in Indonesia (*pusakapusaka.com,* 3 April 2019). In another survey, it was found that among 30 % of the Indonesian population who complained that they were ill, 40 % sought alternative healthcare, while 60 % visited hospitals and physicians (*republika.co.id*, 21 November 2016)

The superstitious healthcare

Part of the personalistic system of healthcare is "superstitious" in nature. In many villages among the widely dispersed islands of Indonesia many people still believe that witchcraft may cause illness and even death. They often think that the sicknesses of babies or children have been caused by evil spirits. To wipe away the illness, families often ask the help of a shaman who believes that this world is not only inhabited by humans but also by spirits that occupy mountains, caves, rocks, rivers, forests, trees, etc. and that these spirits must be appeased in order to cure the illness, and the people believe that it is these spirits that have caused the illness. These traditional spiritual healers may use traditional medicine (herbs), plain water possessing a "magic formula," and/ or carry out certain rituals (including chanting). Sometimes the shaman asks the family of the sick person to provide certain animals, for example a white chicken or a black chicken, black goats, eggs, certain kinds of flowers, etc. It is assumed that the shaman can transfer one's ailment to these items.

A common term for a person who is considered to have the capability to cure people by using his or her "healing expertise" is *orang pintar* (smart person). One of the most popular smart persons is Ponari from Jombang, East Java, especially in the past when he was still a boy. He has intensively practiced this personalistic system of healthcare for many years by providing water (to be drunk by his patients) from a basket with a stone in it, regardless of the efficacy of the healing process. More recently, another well-known contemporary *orang pintar* is Ningsih Tinampi in Karangjati, Pasuruan, East Java. As reported by TV One (3 December 2019), thousands of patients will have been waiting for treatment until the year 2021.In the past many patients had to wait months to get the treatment. Every day Ningsih has to treat between 60 and 100 patients, each patient having to pay a regular fee of Rp. 300,000,-, while each special patient (who does not want to wait long) has to pay Rp. 1,500,000,-TV One reported that although many patients came to be treated by Ningsih

Tinampi with ailments such as stroke, vertigo, gastric acid, and various kinds of physical pains, many ailments were considered by her as being caused by *santet* (black magic). That is why the most popular treatment is called *Lepas Pocong* (Releasing Ghosts) charging a patient Rp. 5,500,000,- TVOne reported, the head of the Indonesian Physicians Association of the Pasuruan Regency, Sujarwo argued that in fact many of those patients had to be treated professionally (based on the biomedical system).



Ningsih Tinampi's personalistic system of healthcare (Source: makassar.tribunnews.com)

In South Sulawesi, these *orang pintar* (smart persons) include some people suffering from oligodactyly (lobster-claw syndrome) who work as *Paraji*, that is, traditional healers whose expertise to cure people has been inherited from their parents. These people are considered as having supernatural powers enabling them to give favors to the environment, for example, by leading the ritual *Mappare lise tasi* ritual in the Village of Ulutaue. In this ritual people feed the spirit of the sea by bringing *tuli* (food) composed of colorful rice, eggs, banana leaves as the cover of the food, *sirih* leaves and some money folded with the *sirih* leaves. Through this ritual, it is expected that the fishermen will be given safety and much sustenance by the 'sea guard' named *pajjagatasi* (Mulyana & Sulaeman, 2016).

Based on our interviews with dozens of patients and physicians, we have found that some patients visiting these physicians believe in unscientific and even superstitious causes of illness. For instance, in one case, a dentist recommended that a patient's tooth be pulled out, but the patient was worried and refused the dentist's recommendation because the patient believed a myth that the patient would go blind. In another case, an orthodontist asked her assistant to provide tea to a fainted patient. The assistant said that it could not be done as tea was prohibited according to the patient's belief as a Seven-Day Adventist. Still another interesting case is where a patient did not produce a lot of breast milk because she was always exhausted. When the doctor told her to sleep more, especially during the day time, the patient did not do it because she believed that if a woman who had just given birth to a baby slept in the middle of the day she would get worms inside her body.

The Islamic way of healing

Many hospitals in Indonesia, especially those affiliated with religious organizations (particularly Christianity and Islam) also believe in the personalistic system by utilizing the intervention of clergy to motivate patients to observe more religious prayers and by providing patients with holy books to read so that the spiritual enlightenment gained by the patients will make their recovery faster. Many hospitals affiliated with different religions provide holy books in the patient rooms, for instance in Catholic hospitals such St. Carolus Hospital in Jakarta and Borromeus in Bandung and Islamic hospitals such as Islamic Hospital Cempaka Putih in Jakarta and the Al Islam Hospital in Bandung.

Islamic healing can be considered as a distinct subculture in Indonesia whose major population are Muslims. This healthcare system is often referred to as *Thibun Nabawi*, meaning the healthcare system of the Prophet (Muhammad, Peace be Upon Him). According to Usman et al (2028), therapeutic communication

in the treatment of *Thibbun nabawi* derives from the concept of holistic Islamic health, which purports to help the cure process of the patient's illness as well as to strengthen his or her mental and spiritual power. Because of this, Usman et al (2028) suggest that the therapist's religiosity plays an important role in the healthcare. This religiosity is embedded in the therapist's personality resulting from a long process in the life of the therapist which can be reflected in verbal and nonverbal messages conveyed by the therapist; the therapist believes that it is God who is the healer, while he or she so considers himself or herself as a mediator who must be patient and hopeful to get blessings from God Almighty.

Ruqyah (healing treatment through religious chanting) and *hijamah* or *bekam* (cupping therapy) are instances of the Islamic healing which are considered to have derived from Prophet Muhamad's tradition. Honey, dates, olive oil, and *habbatus sauda* (seeds of Nigella Sativa) are natural medicine often recommended in the Islamic healing. As Jamil (2014) suggests, although there are differences in the practices of the Islamic healing among therapists, common types include prayers, reciting the Qur'an, *zikr* (chanting) and contemplation. Since Indonesia is inhabited by a Muslim majority, many clinics and/or stores in big cities throughout the country offer healthcare services based on the Islamic tradition. One of these clinics which has dozens of branches throughout Indonesia is Bekam and Ruqyah Center (BRC).

There are two main instances of Islamic rituals that can be explained through the three healthcare systems logically, namely prayers and fasting. Proponents of all three systems agree, and even based on the results of medical examinations that those people who observe prayers and fasting consistently are more likely to be healthier than those who do not. Soleh (2001) elaborated the favorable effects of midnight prayers (*tahajjud*) on Muslims' health based on medical parameters. According to his book, which is based on his doctoral dissertation at Airlangga University Surabaya which he finished in the year 2000, the night

prayers improved the bodily immunity of the actors and their ability to cope with stress.

Some contemporary Islamic healing practices have been inserted into hypnotherapy practices, not only attended by people in prepaid direct sessions, but also in hypnotherapy practices inserted into Islamic religious programs, such as "Islam itu Indah" (Islam is Beautiful) on Trans TV. In one hypnotherapy workshop attended by one researcher in Bandung, a trainer taught self-hypnosis by tapping meridian points in the body (top of head, forehead, chin below lower lip, among others) with fingers many times while he kept saying, "*O, Allah, although I have been suffering from a migraine (or any other ailment), I sincerely accept this ailment*."

Some physicians we interviewed believe that in addition to the power of prayers to overcome illness, sins could cause illness. In an interview, a religious medical specialist related that he found a female patient who complained about her illness, but the medical laboratory showed no clear evidence. When asked if she had a personal secret, the woman admitted that as a gold seller, she often cheated by reducing the weight of gold she sold. "That what makes you ill," said the medical practitioner. This incidence explains that one's anxiety emerging from cheating can lead to his or her illness.

The alternative therapy and its promotion on media

In the provincial capital cities of Indonesia where the population is dense, alternative healthcare practices have been promoted through public and private television programs (including pay television), radio programs, and local newspapers. There is no less promotion in the internet and through billboards, plates and signs set in front of the therapy clinics in many cities. Many small and simple abodes are places are used to offer alternative healthcare to those in need.

In addition to the central and regional public television stations (TVRI), there are hundreds of private television stations (including pay TV stations) in all 34 provinces in Indonesia. Many of them have promoted CAM and alternative healthcare practices. In 2014 the number of all TV stations was 394, and over 400 in 2018. While the national public television station (TVRI) broadcasts nationally, apart from 14 private commercial television stations with national coverage, and dozens of pay private TV stations, each province has its own provincial public television station (TVRI) and private local television stations.

A common way of broadcast is through time-blocking or semi time-blocking. In a way it is like buying a segment of time (30 minutes to one hour) per program. The therapists may use this segment of time a few times a week. They may also use sponsors to contribute to the cost of the program. A standard program is a talk show involving the conversation between media presenters and therapists. While the therapy practices are shown on these programs, testimonies are given by former patients who have recovered from their illnesses. Some interactive consultations between therapists and television audiences are also possible. In some cases the therapists advertise their services through running texts on different programs which cost cheaper.

In the *Hitam Putih* (Black White) Program on Trans 7, guided by a male presenter who is also a magician, there was a portrayal of a therapist named Pak Masudin who was able to cure a deaf boy in 30 seconds by "pressing and opening" the listening nerves in the head of the boy. This treatment is clearly based on the personalistic system. In another case, guided by a popular female physician who is also and a celebrity, ANTV once broadcast a healthcare program about an alternative therapist who was able to transfer a disease from a person's body to a chicken. In another program guided by another female presenter, when answering the question of one member of the TV audience, a healer named Asari advised that those who have low sexual libido should avoid fornication or adultery. Most recently through MNC Television

the spiritual healer Ustadz Dhanu emphasized that prayers had to be observed by a woman named Hilda Marhenda who were suffering from kidney problems, migraine, and whose ovarium had been operated due to her past sins to her parents. "*The spirits had a kingdom in her head and her stomach that causes her illness,*" said Ustadz Dhanu, the spiritual healer while Hilda was also present among the audience in the TV studio.

In Palembang, the alternative therapist often promoted by PAL TV is Jeng Jumaroh who was an expert in herbal medicine to cure ailments with the basic concept "Back to Nature." In addition to television, the herbalist Jeng Jumaroh has also used internet (web) to promote and sell the naturalistic medicine. Through her service on this private television, Jeng Jumaroh intends to enhance holistic health, not only physically but also by promoting positive thinking and a healthy diet. According to her, until recently she had 11,000 listed patients, but there could now be more patients, including those not listed. Broadcasting once a week, Jeng Jumaroh used consultation (questions and answers) in her weekly PAL TV program. Commenting on her herbal medicine, Jeng Jumaroh said, "The *Tempuyung* leaves have benefits. Just try. A person suffering from fever does not always need antibiotics but can use *Cakar Ayam* leaves ... Essentially I want to say that the medicinal plants we have inherited from our ancestors are very beneficial". She believed that based on her knowledge, she just tried the best she could to cure people. According to her, recovery belongs to God. Jeng Jumaroh's opinion is parallel with the views of many medical doctors and *orang pintar* that whether people recover or not from their ailments depends on God. This again implies that many therapists in Indonesia, regardless of the system of healthcare they embrace, to some extent believe in the personalistic system of healthcare involving health recovery as God's grace.

In Surabaya, East Java, one alternative therapist is Gito who provides his own style of healthcare services. Gito is better known as Ali in the alternative healthcare arena. He has been involved

in alternative healthcare since the year 2000. His expertise is one of multitherapy, including energy transfer, nerve tapping and acupressure. Gito explained that the basic idea is the activation of all the body's organs. He said that he is also able to repair the broken bones. "My diagnosis is not similar to a physician's diagnosis. I do it with my soul and can detect the nerves and muscles in the human body because God has created such organs with their signals that can be learned and detected. The accuracy is quite good, close to 80 % or 90 %." Gito claimed that besides giving a treatment he also used herbal medicine produced by a company that has become his partner in the healthcare. Having known that promoting alternative healthcare through brochures was a failure, Gito utilized several television stations in East Java. The TV program was usually interactive in nature. He has mastered the alternative skills through self-learning, that is by learning the legacy handed down from his ancestors. His first live television program was in fact on Jak TV in Jakarta, then he turned to TV Banten, and then to MNC TV.

Meanwhile, in Makassar, South Sulawesi, a TV station that regularly broadcasts alternative healthcare is Celebes TV. Named *Talk Healthy*, the program is broadcast every Saturday from 09.00 to 10.00 AM. The form of program is usually a discussion (talkshow) sponsored by product companies. However, Celebes TV also broadcasts other alternative healthcare programs lasting for 30 minutes through time-blocking. These programs offer products and healthcare services. The types of alternative therapy desired by the public at the time of the FGD were *Terapi Garang Arang, Ratu Givana, Sinshe Mayang*, and *Jacket Warsito*. Our FGD with the informants in Makassar indicated that many people who suffered from cancer did not want to visit physicians, as they were scared to do so. Instead, they went to see shamans or they used herbal medicine based on the information they knew through word of mouth or media advertisements or commercials. Another reason why they preferred to go to alternative healers is that it cost cheaper than to go to medical doctors. However, when they

failed to cure their ailment, they finally visited medical doctors but by then it was often too late so that some of them passed away.

CAM is often promoted in media all over Indonesia, not only through electronic media but also printed media, especially local newspapers. In Palembang such local printed media include *Tribun, Sriwijaya Post*, and *Sumatera Expres;* in Surabaya, *Duta Masyarakat* and *Harian Surya*. Of all the kinds of therapies advertised in the electronic media, the internet, billboards, plates, local newspapers, and even through word of mouth, therapies to overcome sexual impotence and to enhance sexual libido are commonplace. In West Java and Jakarta, among well-known therapists who have claimed to be able to boost sexual libido was an old woman named Mak Erot whose career has since been continued by her grandchildren. Mak Erot is now like a brand. Those not related to Mak Erot and her family also offer similar Mak Erot treatment: massage, herbal medicine, and chants. The service cost is often called *mahar* which literally means dowry.

Treatments to enhance sexual libido have also been advertised by some local private TV stations in various provinces, such as by one TV station in Palembang. It normally broadcast after 10 PM as the target were adults. Local and provincial newspapers also have a lot of advertisements, such as the provincial daily newspaper *Tribun Jabar* published in Bandung, West Java. In its edition (December 24, 2017), for example, of five advertisements, all advertisements offered such treatment. One mentioned that it had a permit from *Dinas Kesehatan* (The Regional Department of Health). All advertisements mention the *mahar*, respectively 200 rb, 300 rb, 400 rb, 300 rb, and 300 rb (ranging from 14 to 30 US dollars). There is a statement under the advertisements that the content of the advertisement material is fully the responsibility of the advertisers.

Summing Up

There are varieties of healthcare in Indonesia. The three healthcare systems delineated so far (the biomedical, the naturalistic, and the personalistic) are not mutually exclusive; rather, they are complementary to each other.

In Indonesia the nonbiomedical system (naturalistic system combined with the personalistic system) of healthcare is dominant and commonplace apart from the biomedical system. These alternative healthcare practices can be found in many big cities as well as in small towns all over the country. This follows the trends that are also found in most countries all over the world. Even some medical practitioners who embrace the biomedical system have also used the personalistic system by saying that medical recovery is the grace from God. The personalistic system of healthcare in particular has been intensively practiced by *orang pintar* (smart persons). It has also been broadcast on electronic media, especially television, in addition to its publication and advertisements in the printed media and the internet.

As far as electronic media is concerned, there has not been a uniform application of the media regulations for the advertisements and the portrayals of the alternative healthcare practices on the media, including those based on the personalistic system. In addition, there has not been solid coordination and supervision among authoritative institutions for these alternative healthcare programs on media, whereas some of the programs might harm audiences or even deceive them. Such institutional cooperation, especially in the form of joint regulations, is deemed necessary to prevent harmful impact on the audiences.

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