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QUALITATIVE CONTENT ANALYSIS OF HEALTH CRISIS INFORMATION ON THE MINISTRY OF HEALTH WEBSITE

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Abstract. Indonesia faces challenges in disseminating clear and accessible health crisis information, which is critical to strengthening community preparedness during disasters and health emergencies. This study aims to analyze the qualitative content of health crisis information presented on the official website of the Ministry of Health of the Republic of Indonesia, in particular through the article "Disaster Preparedness Tips" published by the Health Crisis Center. Using Krippendorff's (2018) qualitative content analysis, the study followed six stages, unitizing, sampling, recording/coding, reducing, infererring, and narrating, supported by categorization of messages into early warning and education & socialization. The concept of digital governance by Cordella and Paletti (2019) is used to evaluate whether website communication aligns with informative or participatory digital governance. The validity of the study was strengthened by using Miles, Huberman, and Saldana (2014) audit trail, researcher reflection, data presentation, and consistency checks. The study identifies research gaps, as previous digital health communications research has largely focused on social media, while government websites, despite their formal credibility, remain poorly explored. The results of this study highlight a pattern of one-way and informative communication on the Ministry of Health website, indicating the need for increased interactivity to better align with the principles of participatory digital governance and strengthen public engagement in health crisis preparedness.

Keywords: Content Analysis; Digital Government; Health Crisis; Website; Ministry of Health

I. INTRODUCTION

Indonesia faces major challenges in the public health sector, especially in relation to the ability of the National Health System to respond to various forms of health crises. Health crises in Indonesia can include infectious disease outbreaks, extraordinary events (KLB), non-natural disasters such as the COVID-19 pandemic, and the impact of environmental crises on public health. Based on the 2023 Global Health Security Index data, Indonesia ranks 46 out of 195 countries in preparedness for global health threats, with a score of 44.6 out of 100 (Johns Hopkins University, 2023). In this context, the dissemination of health crisis information is an important component that determines the speed of public response as well as the effectiveness of government intervention (World Health Organization, 2022).

The government of Indonesia, through the Ministry of Health, has provided an official channel in the form of a Health Crisis Center website that can be accessed through https://pusatkrisis.kemkes.go.id and is expected to be a source of information during and ahead of disaster situations when they occur.



Figure 1. Health Crisis Center Website

The Health Crisis Center Website provides information in the form of disaster and health crisis information, important information, health crisis center activities, Covid-19 articles, and disaster preparedness tips that aim to provide practical guidance to the community. However, previous research has shown that a number of ministry websites in Indonesia have not fully met the principles of good usability and accessibility, making it difficult for users to obtain public information efficiently. This is evidenced through e-government evaluations that highlight the low level of ease of access and readability of digital content by the general public (Lestari,

Hafiar, & Priyatna, 2024). The lack of use of interactive and visual elements such as graphics and videos also affects the low involvement of users, as the measurement results using the System Usability Scale (SUS) confirm the importance of visual displays in improving content understanding (Putri, Hadinata, & Nurwahyuni, 2023).

Government websites should be at the forefront of delivering critical messages to the public. In many cases, information conveyed through digital media is often just an administrative formality, without paying attention to communicative aspects such as simple language, attractive visualization, and ease of navigation.

The urgency of this problem is even more prominent when it is linked to the global agenda through the Sustainable Development Goals (SDGs), especially the 3rd goal (Good Health and Well-being), which focuses on good health and well-being, and the 13th goal (Climate Action), which emphasizes action on climate change and increasing adaptation capacity to disaster risk (United Nations, 2023). Both goals emphasize the importance of increasing public awareness and preparedness through clear and understandable information.

Based on the review of previous research conducted by the researcher, it was found that most of the discussions in the field of crisis communication and disaster risk showed a tendency to focus on the use of social media such as Instagram as the main means of disseminating public information. Platforms such as Instagram are widely studied because they are considered able to reach the public quickly and interactively, especially in increasing public understanding and participation in times of emergency. However, there is still a research gap because there are not many studies that examine the analysis of the content of information messages through the official government website.

The dependence of the community, especially the younger generation, on digital media as the main source and reference of information, and then the analysis of the content of the health crisis Information messages on the Health Crisis Center website are important to understand the extent to which the content presented is able to meet the public's need for accurate, clear, and easily accessible information.

Through this analysis, it can be identified how the message is structured, constructed, and functioned in building public understanding and preparedness for disaster threats. The results of this study are expected to be the basis for the development of more targeted, inclusive, and adaptive public communication practices. Therefore, the government website not only serves as a means of disseminating information but also as a strategic instrument in strengthening the resilience and preparedness of the community to face crisis situations.

II. RESEARCH METHODS

This research is based on an interpretive paradigm, which is where researchers will develop the subjective meaning of their experiences in an attempt to understand the world in which they live and work (Creswell & Poth, 2018). Through

this paradigm, researchers seek to understand in depth how the message and information of the Health Crisis Center website is interpreted by the manager and his audience so that the meaning that appears can be understood in the context of social and communicative.

This study uses qualitative methods because it aims to understand and explore in depth the quality of the message content of the Health Crisis Center website in conveying information on disaster preparedness tips. Qualitative research emphasizes the collection of data in the form of words, images, or documents to understand the experiences, perceptions, and responses of research subjects (Creswell, 2014). In this study, the data collected include website content, how to deliver information, and interactivity.

This research focuses on "Disaster Preparedness Tips" articles contained on the website of the Health Crisis Center, especially in the period January - March 2025, which published five articles. The period was chosen because the period at the beginning of the year is relevant to the context of disaster in Indonesia. During March 2025, 261 natural disasters were recorded, with a predominance of hydrometeorological disasters of 99.62% and floods as the most frequent type of disaster at 72.41% (National Disaster Management Agency, 2025). In Central Java, in the first three months of 2025 (January – March), 91 disaster events were recorded, with flooding as the dominant event. This condition shows that the period January – March 2025 is a very relevant time to study how the Health Crisis Center presents health crisis information, especially related to hydrometeorological disasters such as floods.

In this study, researchers used qualitative data content analysis techniques. Content analysis is a research technique used to draw replicable and valid inferences from texts or other meaningful materials based on the context in which they are used (Krippendorff, 2018). This approach is carried out in a systematic and interpretive way to understand the meaning implied in communication messages, as well as to find patterns, themes, and structures of meaning that appear in the data. Through qualitative content analysis, the researcher seeks to interpret the content of the message in its social and communicative context so that a deep understanding of the phenomenon under study is obtained.

The stages of content analysis in this study were prepared based on Krippendorff (2018). The analysis process is carried out through six stages consisting of unitizing, sampling, recording or coding, reducing, inferring, and narrating.

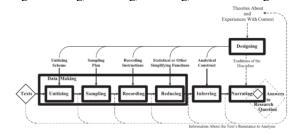


Figure 2. Stages of Content Analysis Krippendorff (2018)



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Stages of content analysis components, Krippendorff (2018), here is a detailed explanation:

1. Unitizing

In the initial stage, it focuses on collecting data that will be analyzed. In this study, the data analyzed is the article "Disaster Preparedness Tips" on the website of the Health Crisis Center.

2. Sampling

Simplification of the study by determining the sample of articles to be researched, at this stage the researchers took a sample of five articles on the "Disaster Preparedness Tips" website of the Health Crisis Center in the period January–March 2025.

3. Recording or Coding

At this stage, namely the process of recording the data that has been obtained, at this stage the recording is done in the narrative of sentences that are educative on five articles from the "Disaster Preparedness Tips" Website Health Crisis Center.

4. Reducing Data

The screening stage is carried out during the document analysis process, which aims to simplify the data to make it easier to understand and then conclude.

5. Inferring

The stage of drawing conclusions based on the data that has been processed. Conclusions must be in accordance with the formulation of the problem to answer the problem in the study and find common ground.

6. Narrating

The stage of describing the data that has been analyzed based on the conclusions and descriptions that have been obtained. Descriptions are prepared along with theories and concepts that support them so that research is not only based on the results of the researcher's thinking and understanding.

The primary data in this study were obtained directly through nonparticipant observation of the article "Disaster Preparedness Tips" contained on the official website of the Health Crisis Center in the period January – March 2025.

Furthermore, this study uses the concept of Digital Government (Cordella and Paletti, 2019), which refers to the concept of government that utilizes digital technology not only as a means of delivering information but also as an instrument to improve governance, public participation, and shared value creation. Cordella and Paletti (2019) explain that digital government moves in two main orientations: instrumental models, where technology is used to improve efficiency and information distribution, and value-driven models, where technology is used to strengthen collaboration, citizen participation, and more responsive policy making.

In this study, the concept of digital government was used to understand how the Health Crisis Center website presents health crisis information in digital format, as well as how the structure of the message indicates the government's position in the digital governance spectrum, whether it is still informative or has supported public involvement.

The data validity technique in qualitative research is an attempt to ensure that the data collected and the analysis

carried out truly reflect the phenomenon under study and can be trusted by the reader (Miles, Huberman, & Saldana, 2014). In this study, validity was maintained through four main strategies. First, the audit trail, which is documenting the entire process of collecting, selecting, and analyzing data systematically so that the research flow can be traced and verified. Second, the researcher's reflection, namely the recording of assumptions and biases to maintain objectivity and minimize subjectivity in data interpretation. Third, the data presentation, presented through direct quotes, concrete examples, or observation results so that readers can assess the validity of the findings and see the relationship between the data and their interpretation. Fourth, consistency checks, by involving the supervisor to ensure that the findings and analysis are logical and consistent.

III. RESULT AND DISCUSSION

This study provides an overview of the study of the message content of the Health Crisis Center website in conveying health crisis information to produce a deep understanding of the construction, clarity, and relevance of the message to the needs of the public in the message content of the article "Disaster Preparedness Tips" on the website, in which it was found that the process of delivering messages in a descriptive manner is the data in this study.

The first stage is the unitizing stage, which collects the analyzed data, namely the article "Disaster Preparedness Tips" on the website of the Health Crisis Center. Then, at the sampling stage, namely determining the samples to be studied, namely five articles of "Disaster Preparedness Tips" in the period January – March 2025. At the recording/coding stage, all data units are coded based on the keywords "flood," "rainy season," "disease," "health," "risk," "prevention," and "examination." In total, there are 28 units of messages made related to the above keywords, which are arranged based on two types of message groups, namely "early warning" and "education & socialization."

Table 1. Number of Message Units By Message Type In The Article "Disaster Preparedness Tips" Period January – March 2025

Message	Article Title				
Type	Beware of	5 Steps to	4 Rainy	5 Ways to	The Flood
	Post-Flood	Prevent	Season	Prevent	Has
	Diseases	Post-Flood	Comorbid	Post-	Receded,
		Disease	ities	Flood	Do The
				Disease	Following
					5 Steps
Early	4 unit	3 unit	3 unit	3 unit	2 unit
Warning					
Education	3 unit	3 unit	2 unit	3 unit	2 unit
and					
Socialization					





Figure 3. Article "Beware of Post-Flood Disease"

The article "Beware of Post-Flood Disease" contains early warning messages and health education for the public to be aware of the risk of post-flood disease. Through sentences such as "floods are one of the disasters that often occur in Indonesia..." and "after floods inundate people's dwellings, many diseases will usually appear that can interfere with public health," this article emphasizes the importance of vigilance and early prevention. The educative message also appears in the invitation to "hasten in conducting an examination at the nearest health facility if experiencing symptoms of the disease," which confirms the importance of quick action in maintaining post-flood health.



Figure 4. Article "5 Steps to Prevent Post-Flood Diseases"

The article "5 Steps to Prevent Post-Flood Diseases" emphasizes early warning messages and health education so that people are a lert and able to prevent post-flood diseases. Through quotes like "sanitation policy is an important thing... in order to avoid various risks of disease." This article invites the public to take preventive steps to stay healthy and be able to carry out normal post-flood activities.



Figure 5. Article "4 Rainy Season Comorbidities"

The article "4 Rainy Season Comorbidities" conveys early warning messages and health education so that people are more aware of diseases that often arise during the rainy season. The article asserts that "the rainy season is also bad for public health, especially if hygiene and health are not taken into account," and mentions specific examples such as "influenza is the most frequent disease in the rainy season" and "dengue fever is also one of the diseases that can occur in the rainy season."



Figure 6. Article "5 Ways to Prevent Post-Flood Disease"

The article "5 Ways to Prevent Post-Flood Disease" contains early warning messages and health education to increase public awareness of the impact of floods. This article describes that "flood disasters that occur during the rainy season have had a serious impact on people's lives," including on health aspects, as mentioned, "dirty puddles that enter people's homes cause many various potential diseases, such as skin diseases, diarrhea, and leptospirosis."



Figure 7. Article "The Flood Has Receded, Do the Following 5 Steps"

The article "The Flood Has Receded, Do the Following 5 Steps" emphasizes preventive and educational actions so that people remain vigilant after the flood. Through appeals such as "avoid floodwater because of the possibility of contamination of hazardous substances and the threat of electrocution" and "pay attention to the health and safety of families by washing hands using soap and clean water," this article invites people to maintain cleanliness and health.

At the reducing stage, 28 units of data encoding results are simplified into 14 main focuses, which are divided into two large groups, namely 7 early warning message focuses and 7 education & socialization message focuses. The keyword "flood" is reduced to a condition that "impacts on public health." In addition, the word "health" is reduced as a followup impact of floods, which cause new health problems and exacerbate chronic diseases, so people need to understand the post-disaster health consequences. The "rainy season" is reduced to a period that "increases the risk of diseases such as diarrhea, ARI, dengue, and leptospirosis." "Disease" is reduced to risks inherent in the context of floods and rainy seasons that require people to be aware of clinical signs and changes in environmental conditions. Then, "risk" is reduced to the assertion that disasters and extreme climatic conditions increase public health vulnerability through environmental contamination as well as changes in sanitation.

On the focus of education & socialization, messages show that the article "Disaster Preparedness Tips" contains seven main focuses that contain action guidelines and practical calls to action. In the focus of disease prevention, it shows tips to maintain environmental cleanliness, increase endurance, and



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consume nutritious foods as a first step in disease prevention. The focus of the health examination displays an invitation to immediately check with health facilities when symptoms of disease due to flooding appear.

The focus of technical steps contains guidelines such as cleaning the house, using personal protective equipment, and ensuring clean water for daily needs. The family health focus displays messages for people to take care of themselves and their families' health, including avoiding direct contact with floodwater and washing their hands after exposure to dirty water. The focus of awareness raising shows an appeal for people to remain attentive to health during the rainy season and after floods. Finally, the focus of prevention information contains education about common diseases and how to prevent them as part of government socialization to the public.

In the concept of digital government by Cordella and Paletti (2019), the distinction between informative and participatory communication models has direct implications for forms of citizen engagement. The informative communication Model operates in a one-way pattern, where the government plays the role of information provider and citizens become passive recipients with no space for dialogue or feedback (Mergel, 2013).

In this model, the digital platform only serves as a channel of information distribution in accordance with the instrumental orientation of digital government that emphasizes efficiency and message delivery. In contrast, the participatory communication model reflects the value-driven orientation of digital government, which is when technology not only conveys information but also opens up space for interaction, collaboration, and citizen contribution through mechanisms such as self-reporting, digital forums, comment features, and feedback channels (OECD, 2020). The between informative and participatory communication forms a significantly different level of citizen engagement, informative creates minimal engagement, while participatory encourages public activeness, contribution, and collaboration in the context of digital governance.

The article "Disaster Preparedness Tips" for the period January – March 2025 shows that the communication pattem built by the Health Crisis Center of the Ministry of Health of the Republic of Indonesia represents the practice of digital government at an early stage as explained by Cordella and Paletti (2019), namely the main function of the government as information provision and risk awareness formers.

This pattern reflects the government's efforts to build public value through the dissemination of information relevant to the context of disasters in Indonesia, while encouraging preventive behaviors such as maintaining cleanliness, conducting early checks, and implementing mitigation measures independently. In terms of the form of communication used, it is still one-way (bureaucratic digital communication), without participatory features such as feedback or social media integration.

This shows that the practice of digital government on the website is still in the information-sharing phase, and has not developed towards co-creation or collaborative governance

that emphasizes public participation. In terms of the use of simple language and message content that is consistent with the context of post-disaster health, it shows that there are efforts to apply the principle of inclusive communication in building digital literacy and public awareness of disaster issues. The website of the Health Crisis Center has contributed to the provision of public value through informative and educative digital communication, although it still needs to be improved towards interactivity and collaboration within the framework of modern digital government.

The results of the analysis showed that the article "Disaster Preparedness Tips" on the website of the Health Crisis Center of the Ministry of Health of the Republic of Indonesia acts as a means of government digital communication in disseminating disaster-based health information in an informative and educational manner. Through the presentation of a simple, clear, and action-oriented message, this website has succeeded in building public awareness of health risks due to floods and rainy seasons. However, communication that is still one-way shows that the digital government functions that are carried out are still focused on delivering information, not fully leading to collaboration and public participation, which are the main characteristics of inclusive and participatory digital governance.

IV. CONCLUSION

Based on the results of qualitative content analysis of five articles titled "Disaster Preparedness Tips" on the website of the Health Crisis Center of the Ministry of Health of the Republic of Indonesia, it can be concluded that the construction of government digital communication messages focuses on two main functions, namely early warning and public health education and socialization. Through messages that are arranged to be informative, instructive, and easy to understand, this website acts as a means of disseminating public information about disaster risk and prevention efforts. The concept of digital government (Cordella and Paletti, 2019) and the content show the role of government as a credible provider of digital public information as well as a public value builder through increasing public health awareness. However, the results of the study also confirmed that the practice of digital communication on this website is still one-way (information sharing) and has not reached the participatory and collaborative stage (co-creation of public value) that allows active involvement of the community in the digital disaster communication ecosystem. The website of the Health Crisis Center has performed a good informational function, strengthening aspects of interactivity and digital visualization are still needed so that the public value generated can be more optimal in supporting inclusive and responsive digital governance.



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