Social representations of media reception during the COVID-19 lockdown in Colombia: from messages to meanings

Representaciones sociales de la recepción mediática durante la cuarentena por la COVID-19 en Colombia: entre mensajes y significados

Representações sociais da recepção mediática durante a quarentena pela COVID-19 na Colômbia: entre mensagens e significados

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Abstract

Recent studies on COVID-19 have focused on the pandemic’s effects on public health and the biosafety controls and their socioeconomic implications. The current mixed-methods study takes a new look at the topic, combining qualitative and quantitative strategies to identify the social representations of media reception in a sector of the Colombian population during social isolation in the COVID-19 pandemic. The results indicate that these representations vary and are associated with the media channel and the effect the reception produces on mood and mental health. A total of 80 interviews and 1,068 online survey forms were applied in different regions of Colombia. The qualitative phase showed that the programs or messages received were represented positively when they came from audiovisual entertainment and contributed to the family unit and reduced stress during the lockdown. Meanwhile, media reception was represented negatively when the messages or news came from journalism or social networks and increased the misinformation, anxiety, and fear of contagion. The quantitative phase found that media reception decreased as the lockdown continued, due to information saturation and the proliferation of news emphasizing the risks of COVID-19. The results reveal the need to focus health communication on the development of information skills that allow people to learn and assess the veracity and relevance of information received during the pandemic.

Social Perception; Communications Media; Quarantine; COVID-19
Introduction

The COVID-19 pandemic poses a global public health challenge. Nations have taken measures to prevent the massive increase in transmission and avoid more deaths, as well as the health system's collapse, particularly in the Latin American countries, where conditions of inequality and social vulnerability exacerbate the pandemic's impact and limit the capacity of public health systems to respond. Meanwhile, the state of health emergency has led to social isolation in all age groups, which means that daily activities in work, leisure, and family time coexist in the same place, blurring the spatial and temporal limits between traditionally differentiated spaces for social production and reproduction.

The scope of the COVID-19 pandemic has thus sparked interest in government, the citizenry, and institutions like the World Health Organization (WHO) in intervening and assessing its impact, as well as among academics and researchers who have conducted epidemiological studies focused on comorbidities and the effects on COVID-19 patients, clinical management, personal safety, risk factor assessment in healthcare workers, and the pandemic's socioeconomic implications. The studies are relevant to the structural characteristics of Latin American societies, affecting not only healthcare personnel.

The president of Colombia and local governments have adopted policies and strategies for selfcare during the COVID-19 pandemic. First, they ordered the temporary suspension of school activities. Second, they limited urban mobility and increased the resources allocated for health and assistance for more vulnerable population groups. An important measure was the implementation of a lockdown (Decree 457 of March 22, 2020), effective March 24 and extended for preventive reasons until September 1st. The aim was to mitigate transmission, promote social distancing, and strengthen primary healthcare services.

Related studies have shown that during pandemics it is important to receive complete and trustworthy information from the health field, as well as to publish socially responsible information; that is, to inform the populace where to turn with suspected cases, which criteria to follow, and which preventive measures to take, thereby helping reduce uncertainty and confusion on how to act in relation to the pandemic, as well as to preserve the inhabitants' physical and mental health.

Recent studies indicate a relationship between the increase in the news produced and the messages issued by governments during the pandemic, with digital media featured as the prime channels for persons to receive information on COVID-19 transmission. Likewise, it is known that interest in being informed on COVID-19 by the journalism field is expressed as greater informational receptiveness, with news programs featured as the population's preferred medium.

Based on these media production logics, the analyses by Alfonso & Fernández point to a relationship between information oversaturation (“infodemic”) and increased misinformation and erroneous beliefs on COVID-19. Andreu-Sánchez & Martín-Pascual also revealed that false images or imaginary illustrations on COVID-19 prevail in all information sources except for those documented in textbooks or scientific articles.

Other researchers have found that television and social networks increase the perception of fear when they tend to exaggerate a critical situation. For example, Salaverría et al. identified four types of mistakes or fake messages perceived as true, manifested in the form of jokes, exaggeration, decontextualization, and artifacts related to misinformation on social networks during pandemics. Pedrozo-Pupo et al. evidenced the prevalence of variables associated with perceived stress during the pandemic. In the study, prevalence of stress was high and related to the perception of inconsistency between health authorities and scientific studies. The authors suggest the need for further research on psychosocial aspects produced by the pandemic.

The current study adds to the understanding of COVID-19's social impacts, especially in Latin America, contributing a view from the communications media. We thus propose to answer two questions: What social representations do Colombians have in relation to media reception in pandemic contexts? What type of television programs, messages, and news did Colombians receive frequently during the COVID-19 lockdown?

Media reception refers to active exposure to mass media and to a space that produces emerging meanings within a sociocultural and historical context. The current study analyzed this reception based on exposure to messages, news, and programs from the communications media in the...
pandemic’s context. The analysis of media reception based on social representations helped identify processes of production of meaning at the communications level during the lockdown. The study’s design is consistent with the sociocultural perspective of reception that acknowledges the diversity of audiences, contexts, and meanings permeating these communication processes.

The above-mentioned questions are thus justified, because during global health crises, the media play a significant role of supplying information on relevant topics for society, especially those related to public health. However, it is important to acknowledge that the pandemic is a complex problem, and that although health information does not automatically change the population’s behavior toward diseases, it is necessary for citizenry to receive useful and truthful information from the media about what is happening.

Method

Durkheim was one of the first social scientists to identify social representations as collective mental productions. However, it was Moscovici that developed the concept’s theoretical framework, by defining it as an organized corpus of knowledge and psychological activities that impact the elaboration of behaviors and communication processes rooted in a system of values, notions, and practices that allow persons to orient themselves in a social context and to act on it.

Social representations thus permeate processes of consensus and disagreement on the production of meanings. They constitute a subjective and polymorphous formation in which culture, ideology, and socio-structural belonging leave their imprint and where affective, cognitive, symbolic, and valutative processes participate in their constitution. They are also the result of communication processes that allow developing forms of understanding and production of meaning of what happens around persons, including phenomena which apparently have no meaning.

Methodologically, Jodelet proposes three spheres for understanding communication processes concerning how social representations emerge. The first is subjective, where subjects create representations from their individual experiences and meanings. The second is intersubjective, a relational encounter in which representations are created from shared meanings. The third is transsubjective, involving the cultural apparatus, its structure, and persons’ positions of symbolic power.

Representations and communication processes are obviously inseparable, since communication is not only the transmission of messages but the active exchange of meanings between persons; that is, social representations involve relational and symbolic meanings, in the sense that they have to do with emerging perceptions, mediations, bonds, and interactions. The current study was based on this communication context and aims to identify the representations of media reception in contexts of the COVID-19 pandemic, as well as the types of programs, messages, and news received by Colombians during lockdown.

The study adopted a mixed-methods design, combining comprehensive and explanatory strategies in two phases: a qualitative phase that aimed to understand social representations of media reception and a quantitative phase that aimed to characterize the programs and information received during lockdown.

The qualitative phase used theoretical sampling. Selection of participants was intentional and voluntary, and they also met the following requirements: Colombians who had spent the lockdown in their own country and belonged to the urban or rural area of their respective regions. Participants thus came from 14 department capitals: Cartagena, Barranquilla, Bogotá, Medellín, Valledupar, Meta, Santa Marta, Maicao, Pasto, Tunja, Montería, Riohacha, Arauca, and Bucaramanga; and 18 rural municipalities: Piedecuesta, Funza, Turbaco, Bello, Alvarado, Acacias, Mahates, San Juan, Turbo, La Mesa, El Carmen, Sopaviento, Montecristo, Magangue, San Jacinto, Fundación, Morritos, and Talameque. The selection complied with ethical guidelines according to the principles of the Declaration of Helsinki on research with human subjects; thus, there were no participants under 14 years of age, since most parents resisted signing informed consent for their children.

Next, 80 interviews were performed with men and women. Interviews were held after informed consent, with open questions on how participants perceived the lockdown and how they related it to the information received from the media. We had expected participation by a hundred persons, but
only 80 accepted the invitation and answered the interview. All the interviews were transcribed and coded with the AtlasTi 8 software (http://atlasti.com/), which allowed identifying emerging categories thanks to the constant comparison method proposed by grounded theory.25,26

The qualitative phase applied online survey forms to identify the messages, TV programs, and news received during lockdown. Participation was voluntary; as in the qualitative phase, the selection criterion was Colombians spending lockdown in their country. Data collection was done with the support of 165 university students who were trained online to access and apply the instrument. This group was responsible for sending the questionnaires via e-mail and social networks to persons in their family circles at both the local and national levels.

The survey consisted of two reliable scales, the Information Media Scale (IMS) and the COVID-19 News Scale (CNS). Both were designed by the research group. A total of 1,068 online survey forms were applied following informed consent by participants, of whom 36.1% were men and 63.9% women. Age brackets in years were: 15 to 18 (14.4%), 19 to 26 (36.4%), 27 to 39 (15.9%), 40 to 59 (28.9%), and 60 to 91 (4.5%).

According to the size of the Colombian population and based on a 2.5% error, deviation of 1.96, and sample variance of 0.25, we expected 1,537 participants, but only 1,068 answered the invitation. Meanwhile, the pilot test in 120 persons of different ages allowed assessing the understanding of the survey’s content and identifying a mean overall response time of 15 minutes per participant.

The IMS included 9 items that assessed, in a range from 1 (never) to 4 (very frequently), the media reception of the most widely viewed or received programs or messages during lockdown, for example: series or films, reality shows, cultural programs, comedy programs, information in social networks, memes or caricatures, religious information, daily news, and programs with medical information. The items explain 59.9% of the total variance in media reception (KMO = 0.77; \(\chi^2 = 2,331; p = 0.00\)). The scale’s internal consistency was 0.71.

The CNS included 8 items that assessed, in a range from 1 (never) to 4 (very frequently), the media reception of news on COVID-19. The survey participants answered questions on news received concerning the virus: infected individuals, COVID-19 deaths, recovered individuals, uninfected persons, and medical feats and recommendations. These items explained 67.7% of the total variance in the reception of news (KMO = 0.83; \(\chi^2 = 3,817; p = 0.00\)). This scale’s consistency was 0.83. These values indicate that although the data collection occurred in a context mediated by use of digital technologies and the pandemic’s conditions require maintaining social distancing, both the scales and the data obtained with them achieved good levels of statistical reliability.

The information was processed with the SPSS 26 software (https://www.ibm.com/). Data from the survey form were updated as soon as the participant answered the entire form; thus, no incomplete survey forms were saved. The students that supported the process made sure the survey form reached its destination, resending it if necessary. No personal information was collected that would allow identifying participants, in order to comply with the ethical guidelines that ensure anonymity in online surveys for research purposes.27 Only the principal investigator and coordinator had access to the database for both the interview and survey with the respective passwords.

**Results**

As described in the method, the findings referred to two phases, one qualitative and the other quantitative. For a better understanding of the results, the two phases will be presented separately. However, they are interrelated in the discussion in order to respond to the study’s mixed methods approach and to highlight similarities and differences from other studies.

**Qualitative phase**

This phase allowed identifying various ways that Colombians represented media reception during lockdown. The representations included three spheres of media access: audiovisual media, journalism, and digital media, the latter covering messages from social networks and the web. This allowed considering the media channel as an analytical category in the study. Nevertheless, subcategories
emerged from the representations that can be seen in Figure 1, designed as a network or thematic structure with the support of the AtlasTi 8 software.

As shown in the structure, in the audiovisual sphere, participants represented media reception as frequently watching series and films during social isolation. This media reception favored entertainment and family integration, which participants reported as contributing to family unity, strengthening communication, amusement, and reduction of the stress produced by the lockdown. The following quotes are examples:

“The fact that the family gets together and spends time talking, sharing a film, reduces the stress, and takes our minds off the worries caused by the coronavirus” (Interviewee #1).

“I think we’ve learned to spend more time as a family, to be united, watching movies, series, sharing positive messages, and playing board games for amusement and to forget the situation we’re experiencing” (Interviewee #2).

The reports revealed how audiovisual reception is valued positively by participants, to the extent that it strengthens family ties and opens spaces for dialogue and familiar encounters through the collective reception of series or movies. Audiovisual reception is also a resource that helps relieve tense moments in families because of the pandemic.

Concerning journalism, participants associated the information they received with negative news, which could affect their mood and mental health, besides becoming a focus of anxiety. Some quotes related to these categories were:

Figure 1

Representations of media reception during lockdown.
“Although the news on coronavirus is very discouraging, I’ve tried not to get too stressed out during the lockdown” (Interviewee #3).

“When you have to manage so much fake and true information, you feel stressed and powerless...” (Interviewee #4).

The representations related to negative news meant that journalistic information was understood in two ways: first, as a factor generating stress and discouragement, which affected participants’ emotional health; second, as an object of doubt and suspicion due to the proliferation of fake news, a perception that question the credibility of the information received, thus exacerbating the concerns and uncertainties vis-à-vis the pandemic’s evolution.

In the digital sphere, the media reception came from social networks, which was represented as a strategy of domination, besides being used to manipulate public opinion. The quotes include criticisms, such as:

“I try not to think about the information people send on WhatsApp, since it’s mostly retweets to sow fear” (Interviewee #5).

“I’m stressed out from the amount of news that appears on social networks. If you don’t check how true it all is, it can hurt your mental health” (Interviewee #6).

The participants associated the manipulation with circulation of unfounded information from messages and with the psychological effect of experiencing social fears that can be harmful to health.

In this sense, the social representations associated with the pandemic involved a paradox: while people have devoted time to being with the family through audiovisual entertainment like series or movies, talking and sharing (a kind of momentary oblivion from experience with the pandemic outside the home), the media reception from news programs and social networks has increased the constant stress and anxiety of hearing about increases in COVID-19 cases. In turn, this has increased the level of uncertainty; people are not sure if the information they receive is backed by truth or merely part of a momentary media trend.

**Quantitative phase**

The Figures 2 and 3 show the weekly evolution in media reception during the lockdown from March 24 to June 5, 2020, in Colombia.

The data in Figures 2 and 3 indicate that the reception of news and entertainment programs in the audiovisual sphere was frequent or very frequent at the beginning of the lockdown and intensified between the third and sixth weeks, when the government extended the restrictions on mobility and the health controls to attempt to flatten the transmission curve. However, reception in the journalism field decreased steadily starting in the seventh week of lockdown. This decrease is consistent with the qualitative results, that relate the interviewees’ attitude of avoiding or regulating access to messages referring to the pandemic due to the saturation and proliferation of news contents that fuel anxiety, fear, and stress.

This discussion relates to the work by Alfonso & Fernández, who describe how the COVID-19 health crisis has produced an infodemic, characterized by the abundance of fake news and its rapid spread among persons and media, coinciding with warnings by the WHO. Table 1 shows the type of frequent audiovisual and digital media reception during lockdown.

The data in Table 1 show that the messages most viewed by Colombians among memes, caricatures, and general information (including news) came from social networks and the Internet (78.7% and 86.8%, respectively). Next came the reception of series and films (71%), cultural and educational programs (54.9%), and medical and scientific programs (52.5%) from TV and streaming channels. Reality programs, comedy, and religious programs were the least viewed.

Table 2 shows that in the journalism field, news information on the pandemic received the most audience from Colombians during lockdown. The data indicate that recommendations on selfcare were the most frequently received type of information, with 89.3%, suggesting the concern for reliable knowledge on physical care during the pandemic. Next came the news related to the increase in COVID-19 cases and deaths, with 85.9%.
Figure 2
Audiovisual reception of entertainment programs during lockdown.

Figure 3
Reception of daily news during lockdown.
Table 1

TV programs and messages received during the lockdown weeks.

| Audiovisual and digital information                  | Frequent and very frequent consumption (%) |
|------------------------------------------------------|--------------------------------------------|
| General information from social networks             | 86.8                                       |
| Memes or caricatures circulating on internet and social networks | 78.7                                       |
| Series and films                                     | 71.0                                       |
| Cultural or educational programs                     | 54.9                                       |
| Programs with medical or scientific content          | 52.5                                       |
| Comedy programs                                      | 51.8                                       |
| Religious programs                                   | 40.5                                       |
| Reality shows                                        | 31.8                                       |

Source: research team.

Table 2

Journalistic information on COVID-19 received during lockdown.

| Topics related to the pandemic                          | Frequent and very frequent consumption (%) |
|---------------------------------------------------------|--------------------------------------------|
| News on recommendations to prevent transmission         | 89.3                                       |
| News on the increase in COVID-19 cases                  | 85.9                                       |
| News on COVID-19 deaths                                | 85.9                                       |
| News on number of uninfected persons                    | 60.0                                       |
| News on persons recovered from COVID-19                 | 59.9                                       |
| News on medical achievements or feats in relation to COVID-19 | 43.2                                       |

Source: research team.

A smaller proportion involved the reception of news on uninfected and recovered persons and medical feats against the virus, ranging from 43.2% to 60%. The data analysis indicates that the journalistic type of media reception was largely focused more on preventive issues and alarming messages on risks of transmission.

Discussion

In the public health context, it is important for people to have access to truthful and relevant information on the COVID-19 pandemic in order to know the preventive measures to avoid coronavirus transmission and spread. It was thus essential to understand the social representations of media reception in Colombia during the lockdown and the type of programs, information, and messages received during this period. Scientifically backed health information can contribute to the empowerment of this information’s reception and people’s preparedness to make decisions on their health 28.

The results obtained with the methodological strategies or phases evidenced various ways of representing the media reception during lockdown, associated with the source of the news, programs, and messages received, as well as the impact of reception on people’s mood. The participants represented messages or programs positively when the reception came from audiovisual media. People related these media with watching series or films that fostered entertainment, relaxation, and family unity.
Likewise, media representation was valued positively by participants when audiovisual reception by the family was perceived as an adjuvant to the reduction of stress, discouragement, and anxiety during lockdown. However, it was only a passing relief, considering that entertainment does not necessarily generate social consciousness during a pandemic. The positively valued representations contrast with the negative assessments attributed to the information from news programs and social networks that were associated with increased discouragement, stress, uncertainty, and distrust.

The results corroborate other studies signaling that social representations are mediational and can emerge from collective exchanges 23, as in the audiovisual sphere, whose representations resulted from family interaction, affective bonds, and perceived wellbeing from TV reception, aspects that allow other views of the potential integrative role of these media during the pandemic, especially when the media reception helps strengthen the bonds between persons while reducing stress. This is particularly true during a lockdown that involves tensions in family cohabitation.

Thus, the reception of audiovisual entertainment programs can potentially serve as a mechanism for collective coping to manage stress and momentarily forget the pandemic. However, studies in Latin America (e.g., Peru) have shown a negative assessment of the audiovisual contents broadcast by television, which are associated with exaggerations and fears during the pandemic 14. It is thus necessary for communications media to assess the pertinence of their contents and seek to produce quality entertainment for screen time and an awareness that provides opportunities for health education 29.

In the digital sphere, negative representations emerged in relation to messages received from the internet and social networks. These messages were associated with manipulation of public opinion and misinformation, generating fear and social panic and impacting Colombians’ mental health. Most participants’ reported frequently receiving this type of message. This finding corroborates other studies indicating that digital media are the most widely used channels to remain informed during the COVID-19 lockdown 10. There is also empirical evidence that social networks often manipulate information 15 and spread fake news as true; the fake news then goes viral and becomes part of a social belief that lacks scientific evidence 30.

Misinformation and manipulation via social networks and the internet were perceived as a problem, negating the credibility of the information source and channel. The literature states that the increase in mistaken beliefs on COVID-19, e.g., that hot baths prevent infection or that the virus is not transmitted in warm climates, is related to misinformation on social networks. This highlights the need to inform and educate people in order to foster autonomy, critical capacity, and decision-making in relation to the health information received through these media and develop more fully within the pandemic’s complex reality 12.

The proliferation of misinformation on COVID-19, the anxiety, and information saturation 12 are aspects that allow understanding why the media reception was highly frequent between the first and fifth weeks of the lockdown and began to decrease progressively starting in the seventh week. Some studies have called this phenomenon an “infodemic” or “information fog”, in which people opt to decrease their media reception to avoid bewilderment 8 and stress 11.

Even so, in-depth studies are needed in Colombia on the relationship between fear, anxiety, media reception, and perceived stress. Research is also needed to analyze whether these variables present sociodemographic differences, because in the case of fear associated with COVID-19, evidence in other countries has shown that the perception of fear increases with age, while more schooling is associated with less fear and fatalism towards the pandemic 14. The exaggerated use of information and decontextualization are part of the tricks and strategies used to misinform during pandemics 15.

In the journalism area, media reception was represented negatively, a finding that emerged in the qualitative phase, where the news received was viewed as a factor that affected Colombians’ mental health. This bears a relationship with the quantitative phase, where the high rate of news received during lockdown was perceived as discouraging. While the reception of news on recommendations for selfcare was frequent during lockdown, for participants, most of the journalistic information focused on news on the increase in COVID-19 cases and deaths.

Journalists thus have the ethical and social duty to provide complete and truthful information, especially considering that empirical evidence indicates that the spread of socially responsible information helps reduce uncertainty and preserve people’s physical and mental health during the pandemic 9. It is also important for journalists to inform truthfully on the number of uninfected and
recovered persons and the medical achievements in recuperating patients, which are the kinds of news stories that are received less frequently by participants.

To provide a complete informative angle helps people maintain more balanced mental health and remain better informed and less stressed during the pandemic. It is thus important to focus more on the work by healthcare personnel, which can help avoid physical aggression and threats from people unfamiliar with the issue. Journalists require more training and capacity-building in health to perform their work professionally and with educational quality during the pandemic. Significantly, there was less media reception of medical or scientific contents than of memes, caricatures, and messages from social networks, an issue that needs to be addressed by the communications media and governments.

It is also important to consider the future of journalists’ social representations on the pandemic, since they influence the public’s attitudes and behaviors, as well as communication practices in public health. In order to inform with social responsibility, journalists must know, corroborate, and adequately interpret data from governments and public health agencies. Journalists must also be familiar with basic epidemiological terminology in order to understand the pandemic. From this perspective, the WHO has issued guidelines to journalists on how to avoid panic without generating a false sense of security and to adopt transparency when informing on the precautionary measures during the pandemic. Transparency is considered an essential risk communication strategy to inform and foster trust in the public.

**Conclusion**

Social representations of media reception in the context of the COVID-19 lockdown emerged from communication processes mobilized by participants through their interactions, experiences, and meanings through the reception of information from the media. In general, the study found that these representations vary and are assessed both positively and negatively by participants, depending on the information received, the media channel, and the way its reception can affect family and psychological wellbeing and people’s mood during lockdown.

Meanwhile, considering the perceived misinformation on COVID-19 in the digital sphere, communication strategies in health should focus on supporting the development of information skills that allow citizens to find, corroborate, and analyze the information they receive in order to grasp and prove its veracity and relevance. It is extremely important to study the role played by public health information during the pandemic. The communications media, allied with the health sector, can offer humanitarian conditions in times of the pandemic. Their social task can help raise awareness of the risks and the precautions people should take before, during, and after the lockdown.
Contributors

M. Garcés-Prettel participated in the study’s conception and design, data collection, quantitative analysis, discussion, and elaboration of the manuscript. L. R. Navarro-Díaz participated in the development of the theoretical framework, background research, and analysis of the information. L. G. Jaramillo-Echeverri participated in the methodological design, qualitative analysis, and discussion of the manuscript. Y. Santoya-Montes coordinated the data collection and quantitative analysis.

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References

1. Moratalla AZ, Agea AA. Ciudad COVID 19: una nueva inequidad en el espacio y el tiempo urbano. Urbano 2020; 23:4-9.
2. Guan WJ, Liang WH, Zhao Y, Liang HR, Chen ZS, Li YM, et al. Comorbidity and its impact on 1590 patients with COVID-19 in China: a nationwide analysis. Eur Respir J 2020; 55:2000547.
3. Zhou F, Yu T, Du R, Fan G, Liu Y, Liu Z, et al. Clinical course and risk factors for mortality of adult inpatients with COVID-19 in Wuhan, China: a retrospective cohort study. Lancet 2020; 395:1054-62.
4. Balibre JM, Badia JM, Pérez IR, Antona EM, Peña EA, Botella SG, et al. Manejo quirúrgico de pacientes con infección por COVID-19. Recomendaciones de la Asociación Española de Cirujanos. Cir Esp 2020; 98:251-9.
5. Cheung JC, Ho LT, Cheng JY, Cham EY, Lam KN. Staff safety during emergency airway management for COVID-19 in Hong Kong. Lancet Respir Med 2020; 8:e19.
6. Organización Mundial de la Salud. Evaluación de los factores de riesgo para la enfermedad por coronavirus (COVID-19) en trabajadores de la salud: protocolo para un estudio de casos y controles. Geneva: Organización Mundial de la Salud; 2020.
7. Bárcena A. Coyuntura, escenarios y proyecciones hacia 2030 ante la presente crisis de COVID-19. Santiago: Comisión Económica para América Latina y el Caribe; 2020.
8. Bórquez B, Luengo-Charath MX, Anguita V, Bascanán ML, Pacheco IM, Michaud P, et al. Uso y difusión responsable de la información en pandemia: un imperativo ético. Rev Chil Pediatr 2020; 91:794-9.
9. Segura MS. Con alerta, pero sin pánico. El rol de los medios durante la pandemia. Rev Fac Cienc Méd (Córdoba) 2020; 77:55-8.
10. Lázaro-Rodríguez P, Herrera-Viedma E. Noticias sobre COVID-19 y 2019-nCoV en medios de comunicación de España: el papel de los medios digitales en tiempos de confinamiento. Profesional de la Información 2020; 29(3). https://revista.profesionaldelainformacion.com/index.php/EPI/article/view/epi.2020.may.02.
11. Masp P, Aran-Ramspott S, Ruiz-Caballero C, Suau J, Almenar E, Puertas-Grasell D. Consumo informativo y cobertura mediática durante el confinamiento por el COVID-19: sobreinformación, sesgo ideológico y sensacionalismo. Profesional de la Información 2020; 29(3). https://revista.profesionaldelainformacion.com/index.php/EPI/article/view/epi.2020.may.12.
12. Alfonso IR, Fernández M. Comportamiento informacional, infodemia y desinformación durante la pandemia de COVID-19. Anales de la Academia de Ciencias de Cuba 2020; 10:209-15.
13. Andreu-Sánchez C, Martín-Pascual MA. Imágenes falsas del coronavirus SARS-CoV-2 en la comunicación de la información al comienzo de la pandemia del COVID-19. Profesional de la Información 2020; 29(3). https://revista.profesionaldelainformacion.com/index.php/EPI/article/view/79361.

14. Mejía CR, Rodríguez-Alarcón JF, Garay-Ríos L, Enríquez-Anco M, Moreno A, Huancahuari-Nanac N, et al. Percepción de miedo o exageración que transmiten los medios de comunicación en la población peruana durante la pandemia de la COVID-19. Rev Cuba Invest Bioméd 2020; 39:e698.

15. Salaverría R, Buslón N, López-Pan F, León B, López-Goni I, Erviti MC. Desinformación en tiempos de pandemia: tipología de los bulos sobre la COVID-19. Profesional de la Información 2020; 29(3). https://revista.profesionaldelainformacion.com/index.php/EPI/article/view/epi.2020.may.15.

16. Pedrozo-Pupo JC, Pedrozo-Cortés MJ, Campo-Arias A. Perceived stress associated with COVID-19 epidemic in Colombia: an online survey. Cad Saúde Pública 2020; 36:e00090520.

17. Cantú A, Cimadevilla G. Orientación, consumo, recepción y uso de los medios: una propuesta de articulación conceptual. Intercom (São Paulo) 1998; 21:41-54.

18. Uchôa E, Vidal JM. Antropología médica: elementos conceptuales e metodológicos para una abordagem da saúde e da doença. Cad Saúde Pública 1994; 10:497-504.

19. Durkheim E. Representations individuelles et representations collectives. Paris: Université du Québec; 1898.

20. Moscovici S. Notes towards a description of social representations. Eur J Soc Psychol 1998; 18:211-50.

21. Perera M. A propósito de las representaciones sociales: apuntes teóricos, trayectoria y actualidad. La Habana: Centro de Investigaciones Psicológicas y Sociológicas; 2003.

22. García Y. Representaciones sociales: aspectos básicos e implicaciones en la psicología. Rev Psicogente 2003; 11:4-16.
Resumen

Las investigaciones recientes sobre la COVID-19 se han centrado en los efectos de esta pandemia en la salud pública, así como en los controles de bioseguridad y sus implicaciones socioeconómicas. El presente estudio mixto aporta una nueva mirada acerca del tema, combinando estrategias cualitativas y cuantitativas para identificar las representaciones sociales de la recepción mediática, en un sector de la población en Colombia, durante la cuarentena por la COVID-19. Los resultados indican que estas representaciones son diversas y están asociadas con el canal mediático y la afectación que produce la recepción en el estado de ánimo y la salud mental. En total, se realizaron 80 entrevistas y 1.068 encuestas online en diferentes regiones de Colombia. En la fase cualitativa se encontró que los programas o mensajes recibidos fueron representados positivamente, cuando provienen de entretenimiento audiovisual y contribuyen a la unidad familiar y a reducir el estrés en la cuarentena. De modo contrario, la recepción mediática fue representada negativamente, cuando los mensajes o noticias recibidas provienen del periodismo o las redes sociales y aumentan la desinformación, la angustia y el miedo al contagio. En la fase cuantitativa se encontró que la recepción mediática disminuyó a medida que transcurrió la cuarentena, debido a la sobresaturación informativa y a la proliferación de noticias enfatizando los riesgos de la COVID-19. Los resultados revelan la necesidad de dirigir la comunicación en salud al desarrollo de habilidades informacionales que permitan a la ciudadanía aprender a evaluar la veracidad y relevancia de la información recibida en la pandemia.

Percepción Social; Medios de Comunicación; Cuarentena; COVID-19

Resumo

As pesquisas recentes sobre a COVID-19 têm focado os efeitos da pandemia sobre a saúde pública, bem como nos controles de biossegurança e suas consequências socioeconômicas. O presente estudo misto traz um novo olhar sobre a questão, combinando estratégias qualitativas e quantitativas para identificar as representações sociais da recepção midiática em um setor da população na Colômbia, durante a quarentena causada pela COVID-19. Os resultados apontam que estas representações são diversas e estão associadas ao canal informativo e ao modo como afetam o estado de espírito e a saúde mental. No total, foram realizadas 80 entrevistas e aplicados 1.068 questionários online em diferentes regiões do país. Na fase qualitativa verificou-se que os programas ou mensagens recebidas foram representados positivamente, quando provenientes de entretenimento audiovisual, contribuindo para a unidade familiar e para reduzir o estresse na quarentena. Já a recepção midiática teve representação negativa, quando as mensagens ou notícias recebidas procedem do jornalismo ou das redes sociais, aumentando a desinformação, a angústia e o medo do contágio. Na fase quantitativa verificou-se que a recepção midiática diminuiu à medida que transcorria a quarentena, por causa da saturação informativa e da proliferação de notícias enfatizando os riscos da COVID-19. Os resultados revelam a necessidade de direcionar a comunicação em saúde para o desenvolvimento de habilidades informacionais que permitam à população aprender a avaliar a veracidade e a relevância da informação recebida durante pandemia.

Percepção Social; Meios de Comunicação; Quarentena; COVID-19

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