

DYNAMICS OF SOCIAL SERVICES COMMUNICATIONS DURING THE COVID welfare-19 PANDEMIC IN “TULUS KASIH” SOCIAL WELFARE INSTITUTIONS IN BANDUNG CITY, WEST JAVA

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Abstract

The neglected elderly need extra protection, services, and treatments to maintain the coronavirus transmission in the social rehabilitation centre. The elderly condition is vulnerable and has increasingly become the focus of attention during the outbreak of the Coronavirus. Thus, communication of social services during the Covid-19 pandemic to elderly social welfare institutions needs to adapt to the Covid-19 pandemic situation. This study examines the communication dynamics of social services for the elderly during the pandemic at the Tulus Kasih Elderly social welfare institutions. This study uses a qualitative method with a case study approach. Data collection techniques are interviews, observation, focus group discussions, and literature studies. In addition, in-depth interviews were conducted with nine supervisors. Researchers also conducted the focus discussion group with the leaders and employees of the Tulus Kasih Elderly Social Welfare Institutions. The results showed that the dynamics of social service communication during the Covid-19 pandemic ran in a conducive manner. Social services in nursing homes could be carried out adaptively so that they were able to meet basic needs, maintain physical health, support the development of psychological, social, and spiritual aspects for neglected older people. The study concluded that the dynamics of social service communication during the Covid-19 pandemic at the Tulus Kasih Elderly Boarding School were different from social service communication before the pandemic. Thus, social services change in the context of service communication for physical, psychological, social, and spiritual health.

Keywords: Health Communication, Social Services, Elderly Social Welfare Institutions, Covid-19.

INTRODUCTION

According to data released by the World Health Organization (WHO), more than 95% of deaths due to Covid-19 occur at 60 years or older (WHO, 2020). This situation means that the elderly are the group most at risk of being exposed to Covid-19. In addition, one of the social problems for the elderly population is neglect because there is no one to take care of them for various reasons, either because they are poor and have no family, or their families neglect them.

Citing and following up on the line of thought from the data released by WHO, it is interesting to review the urgency of social services during the Covid-19 pandemic in Indonesia at elderly social institutions, both government and private. Older people need to get extra protection, services, and treatment to prevent the spread

of the coronavirus in social rehabilitation homes.

West Java is one of the provinces in Indonesia that has a large number of older people. According to the West Java Provincial Social Service, at the beginning of 2020, there were 500 thousand neglected older people in West Java scattered in urban and rural areas. According to Central Statistics Agency (2020), the proportion of the elderly population in West Java Province in 2020 was 10.05%, or an increase from 2010, which was 7% and in 2015, which reached 8.1%. Therefore, it is estimated that the number of older people in West Java Province will double by 2035 to 16%.

The increasing proportion of the elderly population in West Java certainly affects local government policies in various aspects of development, including spatial planning, provision of infrastructure, health services, and social services. Moreover, the elderly need more social services than the young population, given the emergence of various problems in the elderly.

Based on data on social rehabilitation services in the province of West Java, four social rehabilitation homes belonging to the Social Service of West Java Province only have service capacity for 350 older people, of which 345 elderly have filled. Meanwhile, Social Welfare Institutions – Elderly throughout West Java numbered 100 institutions with a capacity of around 2500 elderly, but filled by 2800 elderly or experiencing over-capacity.

Table 1. Data on Social Rehabilitation Services in West Java Province

No	Nursing Home	Number of Nursing Homes	Capacity	Number of occupants	Capacity Left	Note
1	Social Rehabilitation Center for Social Service of West Java Province	four	350	345	five	According to capacity
2	Social Welfare Institutions – Elderly (LKS-LU)	100	2500	2800	None	Over capacity

Source: West Java Provincial Social Service (2021)

The Government has enacted Law No. 13 of 1998 concerning Social Welfare Institutions for the Elderly, both potential and non-potential, which is formally the responsibility and authority of the Ministry of Social Affairs of the Republic of Indonesia. Older people have the right to receive social services according to their needs and problems. Besides being the responsibility of the Government, the community is allowed to play a role in the implementation of social welfare through a Social Welfare Institution (LKS).

Service to elderly clients is unique because it relates to its distinctive characteristics, commonly called geriatric syndromes (Safitri, 2018). The geriatric syndrome is a collection of health-related symptoms often complained by the elderly, including immobility, instability, incontinence, intellectual impairment, and hearing, vision and smells impairment. In addition, they suffer from depression, malnutrition, impecunity, iatrogenic, insomnia,

immune deficiency, impotence, and impaction.

With the characteristics of geriatric syndrome, it is not an exaggeration if the elderly group is categorized as a vulnerable group. Therefore, this condition is increasingly becoming the focus of attention during the outbreak of the Coronavirus.

Responding to the opportunity given by the Government to play a role in the implementation of social welfare, in the city of Bandung, the Pondok Lansia Tulus Kasih Foundation was established. This foundation provides services and physical, spiritual and social care and protection to meet the needs of the elderly so that they can enjoy a reasonable standard of living. Currently, there are 27 clients of Pondok Lansia Tulus Kasih, some of whom are elderly who need special care due to illness and deterioration in their physical and psychological conditions.

However, since the first case of Covid-19 in Depok City, West Java, the Government has set several policies that affect people's lives in various fields. The policy relates to implementing health protocols and imposing restrictions on community activities in public places, namely schools, offices, recreation areas, shopping centres, and others. In addition, the Government advise people to do all their activities at home and reduce or even stop their everyday mobility.

The policy of imposing restrictions on community activities and health protocol rules impacts the implementation of social rehabilitation services at the Tulus Kasih Elderly Social Welfare Institutions. This cottage is very concerned with the protection of its clients during the Covid-19 pandemic. The most likely impact of restrictions on community activities and health protocol rules is the dynamics of communication in social services for the elderly. Several things were different from nursing home services before and after the pandemic.

The Covid-19 pandemic situation impacts interpersonal communication carried out by owners and companions with elderly clients at the Tulus Kasih Elderly Social Welfare Institutions. Interpersonal communication between clients and employees usually occurs when the client occasionally shares his or her complaints, although this is not often the case. This communication process usually occurs when the employee accompanies the client bathing, feeding, or accompanying leisure time. Interpersonal communication is done with empathy. De Vito (2011) states that empathy is a person's ability to "know" what is being experienced by another person at a particular moment, from the other person's point of view, through the eyes of others. A person who can empathize can understand the motivations and experiences, feelings, attitudes, and hopes and desires.

This study uses an interpretive paradigm. Researchers view the object under study as unique and containing the original truth (Cardoso et al., 2017). One of the theories in the interpretive paradigm that is relevant to this research is the Groupthink theory.

Based on the background of the problem, this research is formulated as follows: how are the dynamics of social service communication during the Covid-19 pandemic at the Tulus Kasih Elderly Social Welfare Institutions ? While this study aims to examine the dynamics of social service communication which includes the context of communication of physical health services, mental health, social health, and spiritual health of elderly clients during the pandemic at the Tulus Kasih Elderly Social Welfare Institutions.

LITERATURE REVIEW

Communication in Social Rehabilitation

Social rehabilitation is a process of functionalization and development to enable a person to carry out his social functions properly in community life. Based on the Regulation of the Minister of Social Affairs No. 5 of 2018, Social Rehabilitation for the Elderly is an effort to assist the elderly in recovering and developing their social functions.

At each stage, there will be stages of data collection and descriptive analysis related to the communication process that occurs between the service provider (organizer) and the client who lives in the elderly home and during the implementation of advanced social rehabilitation.

Stage diagrams and communication of social rehabilitation for the elderly in the nursing home

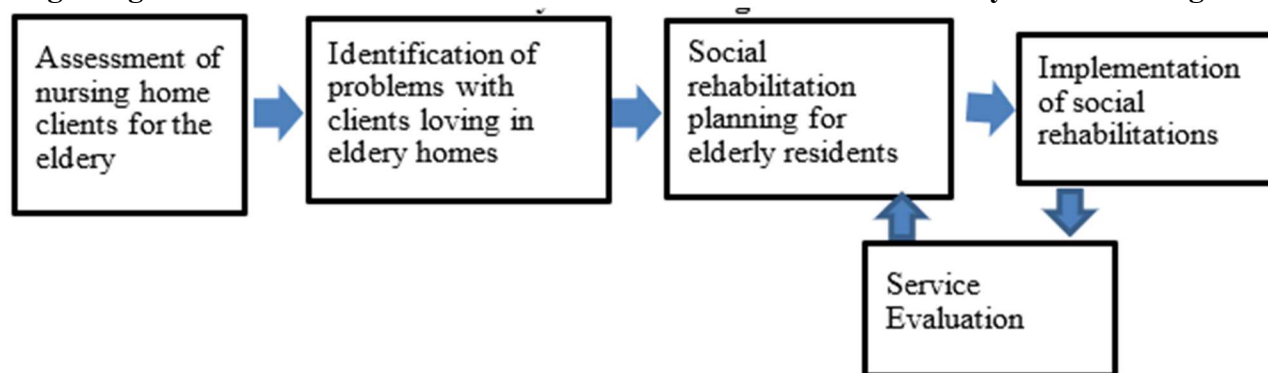


Figure 1. Stages and Communication Diagram of Social Rehabilitation for Elderly in the Nursing Home

At each stage, data collection and descriptive analysis will be stages related to the communication process that occurs between the service provider (organizer) and the client who lives in the elderly home and during the implementation of social rehabilitation for the elderly.

Interpersonal Communication

According to Devito, interpersonal communication is a process of sending and receiving messages between two people or a small group of people with effects and feedback (Devito, *The Interpersonal Communication Book*, 2007). Some characteristics need to be in interpersonal communication to encourage the effectiveness of these activities, including the need for openness, empathy, supportiveness, positiveness, and equality (Liliweri, 1991).

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Group Communication

Group communication has a purpose in sharing information and when there is problem-solving. Group members can know the personal characteristics of other members correctly if there is good communication (Wiryanto, 2005).

In addition, group communication also involves interpersonal or interpersonal communication. The principle of group communication and interpersonal communication is almost similar; namely, messages sent to other

individuals are also responded to with a message that the recipient has interpreted before being delivered in response to the message sent (Ahmadi, 2008).

Groupthink Theory

Groupthink can also be defined as a situation in the decision-making process that shows a decline in mental efficiency, reality testing and moral judgment caused by group pressures (Rakhmat, 2008).

This theory explains that in groups with high cohesiveness, the members will be more enthusiastic in carrying out their duties. Members also feel empowered to carry out additional tasks. However, group members are usually not willing to raise their objections to the solution. This is because collective thinking always attaches importance to good relationships, staying united, having a spirit of togetherness, and having high cohesiveness. Members in groups often engage in a style of considering something of consensus-seeking over common sense considerations. Groups that have a resemblance between their members and have good relations with each other tend to fail to recognize the existence of opposing opinions. They suppress conflict in order to socialize well between members. The concept of Groupthink is also driven by an in-depth study of group communication that has been developed by Raimond Cattell (Richard and Lynn, 2008).

RESEARCH METHODS

This study used qualitative research methods. The type of research is a case study. According to Mulyana (2018), a case study is a comprehensive description and explanation of various aspects of an individual, a group, an organization (community), a program or a social situation.

The research was conducted at the Tulus Kasih Elderly Social Welfare Institutions in Bandung from April-September 2021. Data collection was carried out through in-depth interviews with nine nursing home staff. In addition, observations participated in activities in the nursing home and focus group discussions (FGD) with nine nursing homes and the nursing home leaders.

The elderly assistants work 24 hours a day, seven days a week, with under 2 million. They even sleep in the same room with the elderly to take care of the elderly. If a companion is not allowed to work, the task is delegated to another assistant. The division of tasks with other assistants is only based on mutual understanding, not on a specific schedule.

All data that has been collected, either through interviews, participating observations, literature reviews and FGDs, is then analyzed through the stages of data reduction (data reduction), data presentation (data display), and conclusion drawing and verification (conclusion and verification). Finally, researchers draw objective conclusions based on the subjectivity of the data provided by research informants and notes from participating observations.

RESULTS AND DISCUSSION

The results of this study indicate that there are dynamics of communication in the services provided by Pondok Tulus Kasih to elderly clients during the Covid-19 pandemic. However, the communication skills of the nursing home service leaders, administrators, and supervisors are pretty reliable in managing the nursing home during the pandemic. Furthermore, service communication between service providers (organizers) with clients and employees is quite conducive so that elderly clients are not worried about the pandemic. However, group

members are usually not willing to raise their objections to the solution. This collective thinking is always concerned with good relationships, staying united, having a spirit of togetherness, and having high cohesiveness (Richard and Lynn, 2008).

Tulus Kasih Elderly Social Welfare Institutions provides communication services and physical, spiritual and social care and protection to meet the needs of the elderly so that they can enjoy a usual standard of living.

In the dynamics of communication for elderly social services for physical health during the Covid-19 pandemic. Prior to the pandemic, the services included routine medical check-ups once a month, incidental doctors, acupressure/physiotherapy four times a month, stretching exercises/brain gym every day, entertainment and karaoke every afternoon, 24 hour assistance. During the pandemic, activities involving outside parties were stopped so that during the pandemic, there were no visits by doctors, physiotherapists, or Koran teachers. The nursing home carried out these activities. However, communication with health consultants is still done online. If there is a sick client, as long as the nursing home can handle it, the caretakers will try to handle it themselves. If they need a recommendation from a health worker, an nursing home health consultant can be contacted at any time online.

In order to maintain the client's condition in the nursing home to minimize contact with health workers, during the pandemic, the client's intake is also added with supplements and vitamins needed to maintain body immunity and also several kinds including vitamin C, D, Zinc, Honey, Black Seed, and other herbal ingredients. Elderly clients and accompanying employees are also required to participate in the vaccination program.

A communication approach about additional intake, application of health protocols, and participation in vaccination programs that inevitably must be carried out by the client requires a persuasive communication approach by the institution's organisation. The limited ability of most clients to absorb information, therefore explanations about covid-19 are considered ineffective to make clients follow the provisions of the nursing home during the pandemic. The caretaker of the nursing home usually persuades the client by conveying information known to the client in general regarding the condition of the body that is not good. Finally, the client is willing to carry out all the provisions applied by the nursing home during the pandemic. As Shertze and Stone (1980) say, experts, assist one or several related people understand themselves, connecting their understanding of themselves with the environment, and choosing, determining, and making plans based on the concepts that exist themselves and their environment. The environmental demands of the prevailing norms. Helping individuals through the process of personal interaction between the counsellor and the counselee so that the individual being consulted can understand himself and his environment, make decisions and set goals based on the values he believes in. As a result, the individual being consulted can feel happy and act effectively. Counselling is a face-to-face relationship process between the counsellor and the counselee to resolve the problems experienced by the counselee (Prayitno, 2004).

Other activities, such as physical guidance in the form of gymnastics and stretching, will still be carried out during the pandemic, but with the implementation of a reasonably strict health protocol. The implementation of this strict health protocol is specifically intended for companions and administrators, and guests who come to the nursing home. For example, companions are required to wear masks and wash their hands regularly every time they go to work. They are also required to wear gloves to perform certain activities such as preparing food and cleaning the client's body.

For clients themselves, masks are used in certain conditions. Due to the client's physical condition, masks are allowed not to be used at certain times, such as when exercising, singing, or when no outsiders are gathered in the same room. Since clients have limited mobility, when they gather with other clients, it is considered safe. However, companions are still required to use Personal Protective Equipment (PPE) in masks when interacting with clients.

Masks must be used by clients when receiving visits, both from family and other guests. However, this protocol creates problems when communicating. With the use of masks, minimization of touch, and the limited distance and the physical condition of the client, most of whose sense of hearing is not optimal, the communication process is quite constrained. In ordinary conversation, without using a mask, the message interpretation process is strengthened by looking at the articulations of the communicators. However, by closing the mouth when speaking, articulation readings can no longer be carried out. The communication process runs by relying on the sense of hearing accompanied by nonverbal language through body movements.

The dynamics of communication for elderly services for mental/psychological health during the Covid-19 pandemic.

Tulus Kasih Elderly Social Welfare Institutions has made rules regarding visit restrictions that prevent elderly clients from meeting outsiders a lot during the pandemic. Usually, apart from the nursing home partners who come for physical, mental and spiritual guidance, many students also come for internships. In addition, the general public also came, especially during the month of Ramadan. This condition makes some clients whose memory is still good somewhat drop. They feel lonely. Therefore, the nursing home increases its stimulating activities in karaoke, brain games, and motor games to motivate and entertain clients. Managers and assistants also motivate clients as much as possible to stay enthusiastic and happy.

This empathic communication ability is owned by the mentor who communicated verbally and non-verbally. Non-verbal delivery of empathy can be done by active involvement through facial expressions and appropriate gestures, concentrated gaze, body posture, physical closeness, and appropriate physical touch or caresses. The supervisor carries out the dynamics of service communication in the nursing home by creating an open situation. According to De Vito (2011), communication can take place effectively if in an open situation. The relationship of mutual support will lead to effective interpersonal relationships. Supportive attitude is shown descriptively not evaluative, spontaneous not strategic, and provisional not certain.

Although visits are limited, the client's interaction with family (for clients who still have a family) can still be well established. Clients are now more often using the video call feature on their devices. Communication with family can also continue to run well. The COVID-19 pandemic has made communication with the family online, including mental and spiritual guidance activities. This makes mentors and clients have to adapt to participate in online activities. This adaptation process can run smoothly, so it does not hinder the implementation of activities in the nursing home.

There is no significant difference between management and employees in terms of communication before and after the pandemic. Meetings between management and employees are still held face-to-face, even if they wear masks and maintain a distance. However, during this pandemic, meetings are held more frequently. Although previously, meetings were only held once a month, during the pandemic, meetings were held once every two weeks to monitor the condition of clients and employees of the nursing home.

The dynamics of communication for elderly services for social/psychosocial health during the Covid-19

pandemic in nursing homes apply special provisions. In addition to the general provisions during the pandemic, special provisions are applied when a client or employee is exposed to COVID-19. All employees and clients will take the PCR Swab test if it is known that there are residents of the nursing home who have been exposed. In addition, all residents of the nursing home, both clients, employees, and administrators, are required to follow tracing and testing. This was done some time ago after the second vaccination. The nursing home's communication with outside parties, agencies, and the general public have been drastically reduced during the pandemic. This situation resulted in a reduction in donations to the nursing home by 70-80 per cent. With this condition, the nursing home needs to implement a good communication strategy to keep in touch with the 20-30 per cent of donors who are still surviving. With high schools that usually send their students for internships and other agencies that regularly donate, the Whatsapp application communicates through the communication process. Even when invited to a virtual meeting, the nursing home tries to maintain good relations with the agency consistently.

At that time, there were sick clients and employees. The nursing home health consultant suggested testing the client and the employee. After being taken to the hospital and doing an Antigen SWAB, the client and employee were declared reactive. While looking for a treatment room at the hospital, the caretaker brings the client back to the nursing home and asks him to stay in his room before he gets to the hospital where the client will be treated. While the exposed client is still in the nursing home, other clients are not allowed to leave. All nursing homes are sterilized by spraying disinfectant. Meanwhile, exposed employees are required to self-isolate in their own homes.

After coordinating with the public health centre, hospitals, and even the city government, the nursing home finally received a recommendation from the deputy mayor to leave the exposed client at RSKIA Kopo. However, it did not take long for the nursing home to immediately coordinate with the public health centre to conduct a PCR SWAB test for all employees and clients. For hospitalized clients, the nursing home fully surrenders client care to the hospital. Meanwhile, for employee care, the nursing home supplies supplements and medicines. The nursing home also makes one room at the front for self-isolating employees with no place in their homes.

So far, no clients or employees have died from COVID-19. However, around June, there was a client who died, but not caused by covid-19. For this condition, if the patient still has a family, the institution will hand over the authority to manage the corpse to the family. However, usually, the family gives it back to the nursing home. The bodies whose management is handed over to the nursing home will be buried in the nursing home. The TPU has collaborated with the nursing home, namely TPU Cibarunai, by paying 2 million rupiahs. Even if residents die to COVID-19, the nursing home prefers to hand over its management to the government to be treated according to health protocols.

The dynamics of communication for elderly services for spiritual health during the Covid-19 pandemic in nursing homes. Transcendental communication also plays a vital role in keeping away anxiety and bringing happiness to clients in the nursing home. During the pandemic, the caretaker of the nursing home admitted that the prayers offered were specific. The clients and employees who had also been exposed admitted that their transcendental communication with God was more intense during self-isolation. Dhikr and Koran are one of their ways to calm their hearts and make them more optimistic.

Every day, clients wake up on average around 04:00, but often they wake up early. Then they were directed to

take a bath. In this nursing home, all the elderly take a bath using hot water. For the elderly who bathe in a bathroom where hot water is not provided, the pramuwerdha will help prepare hot water for them to bathe. After they finished bathing, some older people gathered in the viewing room to watch religious lectures together. Many are silent in their rooms. Around 06.30, the clients have breakfast together. When the sun conditions are good, the clients are directed to sunbathe after breakfast and then exercise with unique movements to train their motor and muscles. New clients can move freely after exercising while enjoying a morning snack. Usually, they chat with their friends or watch TV. In the afternoon, after lunch, the clients have a particular schedule for naps, and in the afternoon, they can enjoy free time by doing karaoke together. In this nursing home, there is no special skills guidance given to clients. There used to be knitting skills, but not many were interested. Moreover, many of the clients in this home are non-potential clients. For religious guidance, especially Islam, recitations are routinely held twice a month. Before the pandemic, there were recitations with congregations outside the nursing home twice a month. For non-Muslims, there was spiritual guidance by bringing religious leaders to the nursing home. However, during the pandemic, religious activities were carried out in the nursing home. Religious activities are not carried out by visiting lecturers at the nursing home. There are no more Tausiah activities/religious lectures for Muslim clients, which usually take place twice a month. The Ustad is from Sarijadi, alternately 2 people, namely Ustadz Asep and Ustadzah Popon. Ustadz Asep usually guides recitations every first Thursday at 10, while Ustadz Popon every last Wednesday at 08.00. This activity usually lasts for 30-60 minutes. Meanwhile, for non-Muslims (Christians), there is a Pastor's visit once a month, but there are no more religious activities at the nursing home during the pandemic. The research results can be described in the research model, as follows:

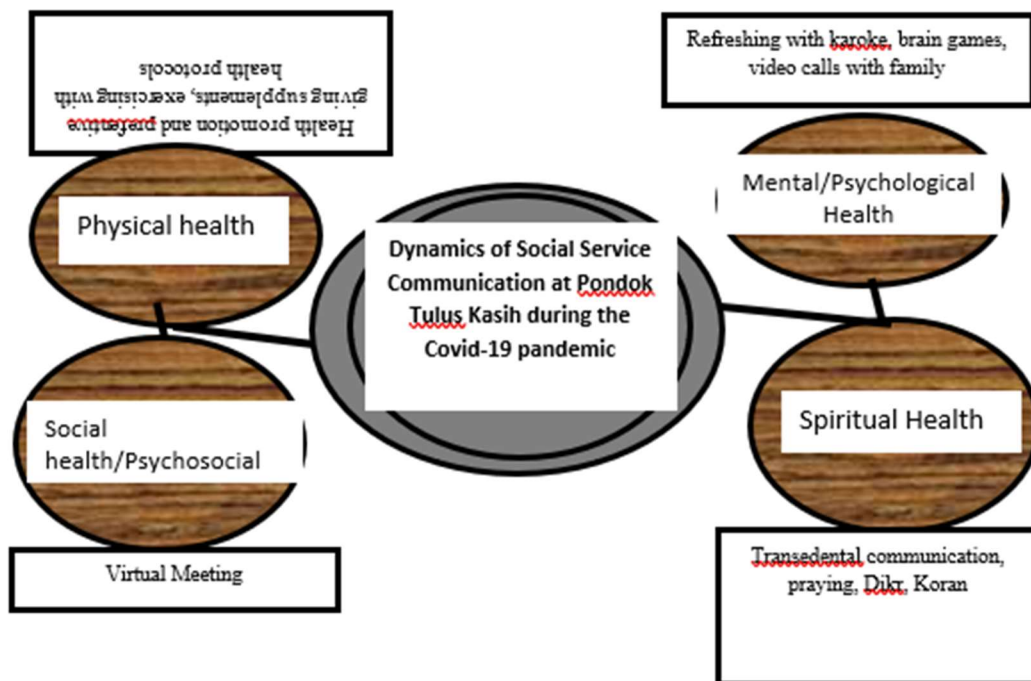


Figure 2. Social Service Communication Dynamics Model in the Pandemic Period
 Source: Research Results, 2021

The dynamics of the communication dynamics of social services during the Covid-19 pandemic at Tulus Kasih Elderly Social Welfare Institution run in a conducive manner. Social Services at the nursing home can be carried out adaptively to meet basic needs, maintain physical health, support the development of psychological, social, and spiritual aspects for further development. According to Maritasari and Lestari (2020), the elderly need health communication with doctors, health workers, and clergy as communicators. Elements of growth and development are psychological and health aspects, namely cognitive, motor, social, independent, and spiritual. Therefore, the approach to the communication context for the elderly is physical, psychological, social, and spiritual as support.

CONCLUSION

The study concluded that the dynamics of social service communication during the Covid-19 pandemic at the Tulus Kasih Elderly Social Welfare Institutions were different from social service communication before the pandemic. Changes in social services during the Covid-19 pandemic occurred in communication services for physical health, psychological health, social health, and spiritual health. For example, activities for checking blood sugar, cholesterol, blood pressure, exercising with strict health protocols, giving supplements, and fulfilling basic needs are communication services for physical health. The dynamics of service communication for psychological health includes refreshing with karaoke, brain games, motor games, video calls with family. Meanwhile, social service communication includes virtual meetings and virtual friendships. While Dhikr, reciting the Koran, attending religious lectures on television are part of spiritual service. The weakness of this research is that the research is limited to only in Pondok Kasih. This research would be better if it was carried out in a government-owned and privately owned.

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