

EFFECT OF MESSAGE IN HEALTH COMMUNICATION: THE CASE OF VACCINE CAMPAIGN 'MR' 'MINISTRY OF HEALTH REPUBLIC OF INDONESIA

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ABSTRACTS

Public health campaign messages are intended to influence public attitudes and behavioral beliefs about health consequences. The operational formula for creating persuasive messages is health vulnerability multiplied by severity, using a loss framework to motivate the public to change behavior for healthy living. This paper intends to analyze the persuasive message of the MR vaccine campaign and see the response that occurred in the community to the health campaign. This paper attempts to examine the process of community social assessment that results in a response of rejection and a boomerang effect on campaign messages.

This paper concludes that the negative boomerang effect on the MR Vaccine campaign carried out by the Indonesian Ministry of Health is largely due to the ego involvement of key figures or opinion leaders that influence the perceptions and behavior of the audience receiving the message. Opinion leaders in this case are religious institutions such as MUI which publishes findings on the content of MR vaccine. The boomerang effect that occurs is the contrasting attitudes and behaviors of the audience of campaign message recipients who have anchor positions / principles that are opposite and far from the contents of the MR Vaccine campaign message.

Keywords: Message, MR vaccine, communication, health

INTRODUCTION

Measles Rubella (MR) immunization campaign is a mass immunization activity as an effort to decide the transmission of measles and rubella virus transmission in children aged 9 months to <15 years, without considering the status of previous immunizations. This immunization is mandatory and does not require individual informed consent (M. Dawn, 2016). Persuasive messages in public health campaigns are aimed at influencing public beliefs and attitudes towards health consequences. The operational formula for creating persuasive messages is health vulnerability multiplied by severity, using a loss framework to motivate the public to change behavior for healthy living. In the health sector, the dimensions of persuasive messages are physical health, time and effort, economic, moral, legal, social, psychological, physical health threats (death, illness, injury) (Rice, 2013). Based on this review, this paper intends to analyze the persuasive message of the MR vaccine campaign and see the response that occurred in the community to the health campaign. This paper attempts to examine the process of

community social assessment that results in a response of rejection and a boomerang effect on campaign messages. When receiving a persuasive message, an individual will respond according to personal opinions and considerations. This process of formulating personal opinions and considerations arises as a result of a social assessment process, where individuals evaluate persuasive messages based on the principles they believe in.

THEORETICAL FRAMEWORK

In the process of social assessment, the principle or position of an individual is the anchor on which the persuasive message is received. The founding anchor or principle of the individual can shift toward rejection or acceptance. (M. Sherif, 1961). Generally, a persuasive message can be well received by someone if the persuasive message is in line or close to the anchor position so that the persuasive message is received (assimilation). Meanwhile, a rejection response generally occurs if the persuasive message does not match the level of individual acceptance and is far from the anchor of the establishment. In the case of rejection, an individual can take action in contrast to the persuasive message received, which is called the boomerang effect (M. Sherif, 1961). In the book "Psychological reactance: A theory of freedom and control" written by Jack Williams Brehm and Sharon Brehm, the boomerang effect is part of the psychological reactance theory, which is roughly defined as a state that arises as opposition or resistance to perceived threats to choices personal. This boomerang effect is an impact in the context of attribution theory, impression management theory, cognitive dissonance theory, social valuation theory, adaptation theory, and perceptual defense theory. (Ringold, 2002).

Furthermore, the terms or conditions that cause a boomerang effect are if there are no good arguments contained in the message conveyed by the source with low credibility perception; occurs when a persuasive message is too far from the anchor of the establishment and position of the recipient, causing a negative effect; occurs when the sender uses communication norms that refute the principle or the establishment of the recipient of the message (counter norm); occurs when, after being influenced by the sender of the message, the recipient of the message becomes very aware that he is deviating from group norms; and occurs when communication triggers unresolved emotional aggression and stimulation. (Ringold, 2002). According to Brehm, psychological reactance is usually described as a sequence of responses to a perceived threat to personal choices. Before reactance can occur, individuals must feel free to hold attitudes or beliefs or engage in behavior. Perceived freedom can be divided into two components. One of them is the ability to take action or believe in certain values / principles. In this case "ability" involves physical or intellectual talent, maturity, or perhaps a certain level of wealth. The second is the awareness of having freedom that arises from experience, habits, or beliefs / norms / laws that apply.

Potential threats to freedom involve pressure to change attitudes, beliefs and / or behavior. Such threats can arise from direct obstacles (physical or legal), attempts to influence or persuade, and even restrictions that are imposed on their own preferences. Furthermore, Brehm

believes that the magnitude of reactance depends on three factors, namely the depth of one's beliefs about having freedom to believe the threatened values / principles, the importance of freedom, and the severity of the threat. These three things then influence the appearance of the boomerang effect. (Ringold, 2002). A negative boomerang effect can occur when attempts at changing one's behavior are done by threatening self-image and challenging the worldview of the recipient of the message. This boomerang effect can not only result in no change in behavior contained in persuasive messages. This boomerang effect is even able to strengthen the recipient's opinion of a world view that is contrary to the persuasive message (Maarav, 2018).

METHODS

The analysis in this paper uses the content analysis quantitative method. According to (Krippendorff, 2004) the content analysis method is a research technique for making conclusions that can be replicated and valid from a text (or other meaningful matter) into the context of its use. Primary data were obtained by analyzing the content of the propaganda statements of MR Ministry of Health RI's vaccine rejection in the online news media. The statements are then analyzed with social valuation communication theory where if there is a contrasting tolerance tolerance can backfire effect on the persuasive message delivered.

DISCUSSION

MR vaccine persuasive message

The Indonesian Ministry of Health campaigns for a mandatory MR vaccine for Indonesian children because it is proven to be 95% effective in preventing measles and rubella. The campaign was carried out in two stages, namely August - September 2017 for stage 1 and August - September 2018 for stage 2. The campaign strategy was carried out through two channels, namely the school and health facilities to the village level and public channels such as the distribution of related materials the impact of measles and rubella in public places. (Ministry of Health, 2017)

Persuasive messages constructed by the government are persuasive messages with the aim of influencing public beliefs and attitudes towards health consequences. This persuasive message is packaged in the form of Poster / Video and Message on Social Media. To influence public beliefs and attitudes the government gives an invitation message that is packed with threats about the dangers / consequences if the community does not vaccinate MR such as disability, death and infectious diseases.

Ego Contrast Opinion Leader

The 2010 census data conducted by the Central Statistics Agency showed that as much as 87.18% of the total population in Indonesia were Muslim (Akhsan Na'im, 2010). From these data it can be shown that the majority of Indonesia's population has an ego involvement with Islamic values. In this context, information related to vaccine content that was first released on the

website www.halalmui.org in September 2018 with an article titled "Positive, MR Vaccine Containing Pigs and Human Deploit Cells," (Tribunnews.com, 2018) has an influence strongly against community evaluation of MR vaccine.

In this article, which is currently inaccessible, explain what was stated in a letter by the Chairman of the MUI LPPOM to the Central MUI Daily Chairperson and read by the Deputy Secretary General of the Central MUI for Fatwa Drs H. Sholahudin Al-Aiyub MSi in the MUI Fatwa Commission Session in Jakarta , Wednesday (08/15/2018). The material used and the MR vaccine production process has been received from the SII of India through correspondence conducted and based on data provided by the producers in India there are ingredients derived from pigs namely gelatin derived from pig skin and trypsin derived from pig pancreas. Furthermore, there is also a material that has a great opportunity to come into contact with pig material in the production process, namely Lactalbumin hydrolisate as a protein-rich media in the vaccine production process, as well as material derived from the human body, namely human diploid cells. These findings then prompted the West Kalimantan MUI to issue an appeal to delay MR immunization. (Tribunnews.com, MUI Appeals People in West Kalimantan Postpone MR Vaccine Immunization, 2018)

Based on the report, it can be concluded that MR vaccine contains pig element which is illegal or is not allowed to be consumed by Muslims. This has become one of the resistance factors of the majority of Indonesian people to reject (contrast) the MR Vaccine campaign carried out by the Government.

The involvement of Islamic religious leaders who reject the MR Vaccine strengthens the involvement of the ego in contrast to the MR Vaccine campaign. In one of the video leaders of Islamic Religion Uztad Abdul Somad commented on "MR vaccine choose pigs or die?". This video became viral and redistributed and became a topic in various national media (Tempo.co, MR Vaccine Problem, Abdul Somad Choose Pork or Die, 2019).

A very strong ego involvement makes the campaign carried out by the Ministry of Health related to the implementation of the MR vaccine actually get a fairly large rejection response. Even Acting The Governor of Aceh, Nova Iriansyah, in September 2018 ordered the postponement of the vaccination process in Aceh Province due to the presence of pig in the ingredients of the vaccine. Acting Governor of Aceh issued the order despite knowing that the MUI fatwa had allowed it because it was considered an emergency, but for him, religion still forbade any element of pork for consumption. (Tempo.co, 2018). Besides that Plt. Aceh Governor Nova Iriansyah added that his party had issued instructions to the Health Office to continue to districts / cities to postpone the implementation of rubella immunization because the vaccine did not yet have halal certification issued by the Indonesian Ulema Council (MUI). (CNN, 2018)

Effects of the MR Vaccine Campaign message

The MR vaccine used has received a recommendation from the World Health Organization (WHO) and a marketing authorization from the Food and Drug Administration Agency. But in practice, there are pros and cons in the community. Based on surveillance

activities on the picture of measles and rubella in Indonesia, there are more than 11,000 suspected cases of measles and from laboratory confirmation results, 12 - 39% of them are confirmed measles (lab confirmed) while 16 -43% are definite rubella. From 2010 to 2015, there are an estimated 23,164 cases of measles and 30,463 cases of rubella. The number of these cases is estimated to be still low compared to the actual number in the field, considering that there are still many unreported cases, especially from private services and the completeness of surveillance reports that are still low. (M. Subuh, 2016)

At the end of 2018, the Ministry of Health issued a statement that the achievement of MR immunization was still low, which is still below 70%, from the target of vaccination as many as 95% with a population of 32 million children aged 9 months to 15 years in 28 provinces outside Java. (Ndoen, 2018). The low achievement was judged by the many health observers as the government's failure to improve public health resilience of infectious diseases that have the potential to become epidemic. In the MR Phase II Immunization Campaign Coordination Meeting held by the Presidential Staff Office, the low achievement of MR vaccine will have an impact on the high vulnerability of children's health to measles and rubella and can result in physical disability. If the case of a child with a physical disability due to measles and rubella transmission from the womb, then the economic burden of the family will increase to Rp. 300 - 400 million a year. This loss does not include the cost of time and the cost of lost productivity of the child's future. (KSP, 2018)

Besides the geographical factor in the logistics distribution of MR vaccines, another key factor that inhibits the achievement of MR vaccine is the parents' doubts due to the Islamic view that forbids the use of the element of pigs in vaccine-making materials. Although the Indonesian Ulema Council (MUI) has issued fatwa number 33 of 2018 which states that the use of MR vaccine of the Serum Institute of India (SII) product is permissible (permitted), but a group of people immediately decided to refuse MR vaccination for their children. (Republika.co.id, 2018). This is in line with what is explained by Sherif (Griffin, 2009). There is a distortion of the message reception by the public. According to Sherif, when an individual receives a message, the individual will automatically judge and compare the message with the perception he has. In the case of the MR vaccination campaign, the public tends to believe that vaccination is unlawful because it holds fast to the teachings of the religion they hold.

In the phenomenon of the MR Vaccine Campaign, the boomerang effect occurs due to persuasive messages that are far from the anchors of the majority community establishment in Indonesia. MR vaccine which is believed to have a content that is not in accordance with the beliefs of the majority community in Indonesia becomes an aspect that refutes the principle / establishment (counter norm), where when individuals process the message and then take action to carry out the vaccine according to the directions of the MR Vaccine Campaign message, then he will considered to deviate from group norms. Based on data reported by the Indonesian Ministry of Health, there are eight regions with the lowest presentation of MR vaccine achievements, namely Aceh (4.94 percent), Riau (18.92 percent), West Sumatra (21.11 percent), West Nusa Tenggara (20 , 37 percent), Bangka Belitung (26.45 percent), South Kalimantan

(28.31 percent), South Sumatra (29.53 percent) and Riau Islands (34.50 percent). (Kompas.com, If MR Immunization Fails, Indonesia Prepares for Measles Against KLB, 2018) These eight regions are areas with Muslim population dominance.

The emergence of the MR Vaccine Campaign caused a contrast / rejection reaction because the MR vaccine was considered to be a threat felt by the recipient of the message against personal choices and beliefs. Reporting on the content of MR vaccines by the mass media has further strengthened public confidence in the message content that contrasts with their founding anchors / principles so that it has increasingly led to public rejection of MR vaccines in various areas such as MR vaccine rejection in Ambon (Gatra.com, 2018), Yogyakarta (Kompas.com, 8 Schools in DIY Reject Immunization because It Is Considered Haram, 2017), North Sumatra (RRI.co.id, Two Regencies in North Sumatra Reject MR Vaccine, 2018), Cirebon (liputan6.com, 2016), and Riau Islands (Kompas.com, Many Parents Fear, MR Immunization in New Riau Islands Realized 23 Percent, 2018), as well as a prolonged polemic in Aceh (Kompas.com, MR Vaccine Polemic in Aceh Not Completed, 2018) and intimidation experienced by health workers in Gorontalo (Kompas.com, KSP: There are MR Immunization Officers Threatened with Parang, 2018)

Negative reporting about the side effects of MR vaccine also reinforces the involvement of the ego contrasting audiences with MR vaccine, such as the death of a toddler in Garut (Kompas.com, 2019), the death of a toddler in Ternate (RRI.co.id, 2018) after the MR vaccine, a child experiences alarming symptoms after receiving MR vaccine in Pangkal Pinang (Kompas.com, An Elementary School Girl is Pillared to the Hospital after being given MR Immunization, 2018), the death of a toddler in Jayawijaya after getting an MR vaccine (Kompas.com, Health Office Investigates Cases of Killed Children After MR Immunization in Jayawijaya, 2018).

CONCLUSION

From the discussion above, it can be concluded that the negative boomerang effect on the MR Vaccine campaign carried out by the Indonesian Ministry of Health is largely due to the ego involvement of key figures or opinion leaders that influence the perceptions and behavior of the audience receiving the message. Opinion leaders in this case are religious institutions such as MUI which publishes findings on the content of MR vaccine. This finding then becomes a rival persuasive message for the MR Vaccine Campaign's persuasive message. The audience assesses the persuasive message formed by the MUI according to or close to the founding anchor / principle of its beliefs, so it decides to take assimilation measures that is choosing not to participate in and participate in MR vaccine immunization activities.

On the contrary, this audience assesses the persuasive message formed by the Ministry of Health of the Republic of Indonesia to take MR vaccine immunization across or away from its anchor / principle of belief given that the MR vaccine content is contrary to belief values. To that end, the audience decided to take contrasting action, namely refusing to do the Ministry of

Health's recommendation for MR vaccine immunization. This contrasting action then had a boomerang effect on the Ministry of Health's MR vaccine campaign.

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Although the way the campaign is an important element in success, the message content needs to be packaged carefully to achieve behavior change. Theoretical-based messages that discuss certain population beliefs and values can significantly change behavior. More specifically, messages that target outcome expectations (ie, beliefs about the consequences of doing behavior), normative beliefs (that is, beliefs about other people's normative behaviors and prohibitions that are relevant), and personal beliefs or self-efficacy (ie, beliefs that a person can do a behavior, even if in difficult conditions) will have more influence in producing behavior change.

Thus, for behavioral change interventions to be effective, first the factors underlying behavior in the population need to be understood. In other words, one must determine the extent to which behavior is influenced by attitudes, norms, or self-efficacy and then identify critical beliefs that underlie important psychosocial variables in the MR Vaccine campaign.

BIBLIOGRAPHY

- Akhsan Na'im, H. S. (2010). *Kewarganegaraan, Suku Bangsa, Agama, dan Bahasa Sehari-hari Penduduk Indonesia HASIL SENSUS PENDUDUK 2010*. Jakarta: Badan Pusat Statistik.
- CNN. (2018, September 13). *Vaksin Rubella Masih Jadi Polemik di Aceh*. Retrieved from CNN Indonesia: <https://www.cnnindonesia.com/nasional/20180913125259-20-329898/vaksin-rubella-masih-jadi-polemik-di-aceh>

- Gatra.com. (2018, Nov 8). *Kadinkes Ambon: Masih Banyak Warga Muslim Tolak Vaksin MR*. Retrieved from Gatra.com: <https://www.gatra.com/detail/news/363565-Kadinkes-Ambon:-Masih-Banyak-Warga-Muslim-Tolak-Vaksin-MR>
- Kemendes. (2017). *Petunjuk Teknis Kampanye Imunisasi Measles Rubella (MR)*. Kementerian Kesehatan RI.
- Kompas.com. (2017, August 27). *8 Sekolah di DIY Tolak Imunisasi karena Dianggap Haram*. Retrieved from Kompas.com: <https://regional.kompas.com/read/2017/07/27/16100021/8-sekolah-di-diy-tolak-imunisasi-karena-dianggap-haram>
- Kompas.com. (2018, August 20). *Banyak Orangtua Takut, Imunisasi MR di Kepri Baru Terealisasi 23 Persen*. Retrieved from Kompas.com: <https://regional.kompas.com/read/2018/08/20/12480541/banyak-orangtua-takut-imunisasi-mr-di-kepri-baru-teralisasi-23-persen>
- Kompas.com. (2018, August 15). *Dinkes Selidiki Kasus Bocah Tewas Usai Imunisasi MR di Jayawijaya*. Retrieved from Kompas.com: <https://regional.kompas.com/read/2018/08/15/17270531/dinkes-selidiki-kasus-bocah-tewas-usai-imunisasi-mr-di-jayawijaya>
- Kompas.com. (2018, September 12). *Kalau Imunisasi MR Gagal, Indonesia Siap-siap KLB Campak Lagi*. Retrieved from Kompas.com: <https://nasional.kompas.com/read/2018/09/12/19501281/kalau-imunisasi-mr-gagal-indonesia-siap-siap-klb-campak-lagi>
- Kompas.com. (2018, September 12). *KSP: Ada Petugas Imunisasi MR yang Diancam dengan Parang*. Retrieved from Kompas.com: <https://nasional.kompas.com/read/2018/09/12/19292451/ksp-ada-petugas-imunisasi-mr-yang-diancam-dengan-parang>
- Kompas.com. (2018, Sept 17). *Polemik Vaksin MR di Aceh Belum Selesai*. Retrieved from Kompas.com: <https://regional.kompas.com/read/2018/09/17/17111301/polemik-vaksin-mr-di-aceh-belum-selesai?page=2>
- Kompas.com. (2018, August 30). *Seorang Siswi SD Dilarikan ke Rumah Sakit usai Diberi Imunisasi MR*. Retrieved from Kompas.com: <https://regional.kompas.com/read/2018/08/30/14492121/seorang-siswi-sd-dilarikan-ke-rumah-sakit-usai-diberi-imunisasi-mr>
- Kompas.com. (2019, Oct 1). *Balita Meninggal 5 Hari Setelah Divaksin MR, Dinkes Garut Turunkan Tim*. Retrieved from Kompas.com: <https://regional.kompas.com/read/2019/10/21/17245841/balita-meninggal-5-hari-setelah-divaksin-mr-dinkes-garut-turunkan-tim?page=all>
- Krippendorff, K. (2004). *Content Analysis An Introduction to Its Methodology*. California: Sage Publications, Inc.
- KSP. (2018, September 12). *Penuhi Hak Anak Indonesia Terima Imunisasi MR Agar Terhindar Virus Campak dan Rubella*. Retrieved from ksp.go.id: <http://ksp.go.id/penuhi-hak-anak-indonesia-terima-imunisasi-mr-agar-terhindar-virus-campak-dan-rubella/>
- liputan6.com. (2016, March 15). *Isu Vaksin Babi, 15 Tahun Daerah Ini Tolak Imunisasi*. Retrieved from liputan6.com: <https://www.liputan6.com/regional/read/2458943/isu-vaksin-babi-15-tahun-daerah-ini-tolak-imunisasi>
- M. Sherif, C. I. (1961). *Social Judgment: Assimilation And Contrast Effects In Communication And Attitude Change*. Connecticut: Yale Univ. Press, New Haven.

- Maarav, A. L. (2018). The boomerang effect of psychological interventions Social Influence. *Social Influence*, 39-51.
- Ndoen, E. (2018, October 31). *Di balik gagalnya target cakupan imunisasi MR di Indonesia*. Retrieved from theconversation.com: <https://theconversation.com/di-balik-gagalnya-target-cakupan-imunisasi-mr-di-indonesia-106000>
- Republika.co.id. (2018, September 17). *Empat Faktor Melencengnya Capaian Imunisasi MR*. Retrieved from Republika.co.id: <https://www.republika.co.id/berita/nasional/umum/18/09/17/pf6zy1328-empat-faktor-melencengnya-capaian-imunisasi-mr>
- Rice, C. K. (2013). Theory and Principles of Public Communication Campaign . In C. K. Rice, *Public Communication Campaigns* (p. 9). London: SAGE Publications.
- Ringold, D. (2002). Boomerang Effect in Response to Public Health Interventions. *Journal of Consumer Policy*, 27-63.
- RRI.co.id. (2018, September 18). *Bocah SD di Ternate Diduga Meninggal Pasca Suntik Vaksin MR*. Retrieved from RRI.co.id: http://rri.co.id/post/berita/572924/kesehatan/bocah_sd_di_ternate_diduga_meninggal_pasca_suntik_vaksin_mr.html
- RRI.co.id. (2018, August 6). *Dua Kabupaten di Sumut Tolak Vaksin MR*. Retrieved from RRI.co.id: http://rri.co.id/post/berita/557957/kesehatan/dua_kabupaten_di_sumut_tolak_vaksin_mr.html
- Tempo.co. (2018, August 7). *Gubernur Aceh Instruksikan Penundaan Pemberian Vaksin MR*. Retrieved from Tempo.co: <https://nasional.tempo.co/read/1114600/gubernur-aceh-instruksikan-penundaan-pemberian-vaksin-mr>
- Tempo.co. (2019, 12 17). *Soal Vaksin MR, Abdul Somad Pilih Babi atau Mati*. Diambil kembali dari Tempo.co: <https://nasional.tempo.co/read/1126561/soal-vaksin-mr-abdul-somad-pilih-babi-atau-mati>
- Tribunnews.com. (2018, August 21). *MUI Imbau Umat di Kalbar Tunda Imunisasi Vaksin MR*. Retrieved from Tribunnews.com: <https://www.tribunnews.com/nasional/2018/08/21/mengandung-babi-mui-imbau-umat-di-kalbar-tunda-imunisasi-vaksin-mr>
- Tribunnews.com. (2018, August 20). *Vaksin MR Positif Mengandung Unsur Babi dan Organ Manusia, Ini Penjelasan MUI Kalbar*. Retrieved from Tribunnews.com: https://jakarta.tribunnews.com/2018/08/20/vaksin-mr-positif-mengandung-unsur-babi-dan-organ-manusia-ini-penjelasan-mui-kalbar?page=all&_ga=2.202683473.1332451718.1576976418-1358462634.1564477123