

**PANDEMIC NARRATIVES: FOUCAULDIAN DISCOURSE ANALYSIS OF
MESSAGES COMMUNICATING THE NON-PHARMACEUTICAL
INTERVENTIONS AS COVID-19 MITIGATION STRATEGIES**

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**FACULTY OF INFORMATION AND COMMUNICATION STUDIES
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This dissertation titled “**PANDEMIC NARRATIVES: A FOUCAULDIAN DISCOURSE ANALYSIS OF MESSAGES COMMUNICATING THE NON-PHARMACEUTICAL INTERVENTIONS AS COVID-19 MITIGATION STRATEGIES**” is hereby accepted by the Faculty of Information and Communication Studies, U.P. Open University, in partial fulfillment of the requirements for the degree Doctor of Communication (DComm).

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BIOGRAPHICAL SKETCH

Maria Nornelyn Lim-Cachuela or “Nor” to many was born on February 16, 1978 in Negros Oriental. She finished her primary education at San Agustin Elementary School in 1990 and received a scholarship at Paranaque Science High School. After high school she went to pursue a Bachelor of Arts degree in Broadcast Communication from the Polytechnic University of the Philippines (Manila) which she completed in 1999.

She became an English Instructor at STI Paranaque from 1999-2003. While teaching, she enrolled at the Technological University of the Philippines (Manila) where she earned a Master in management (MIM) degree in 2002. She then enrolled at the Philippine Normal University in 2003 to complete 18 education units. In August 2004, she passed the licensure examination for teachers. That same year, she started earning her Master in Communication degree at the PUP-Open University System (Manila) and graduated in 2009. In 2016, she decided to continue her education journey by enrolling at the UP Open University in Los Baños, Laguna.

Although she did a few marketing works, she has found profound joy in teaching which led her to decide on working full-time. She has taught in different schools in Manila. In 2003, immediately after transferring residence in Cavite, she was invited to teach at Emilio Aguinaldo College. After a semester, however, she decided to resign and teach part-time at the De La Salle University-Dasmariñas (DLSU-D) instead. Due to personal and health concerns, it took a few years for her to accept a full-time position at DLSU-Dasmariñas.

She is now a full-time assistant professor and one of the senior faculty members of the Communication and Journalism Department under the College of Liberal Arts and Communication at DLSU-Dasmarias. Aside from facilitating lectures and handling various AB Communication and AB Broadcast Journalism classes, she also serves as the Communication Program Council Adviser and is involved in various committee works.

MARIA NORNELYN L. CACHUELA

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TABLE OF CONTENTS

CHAPTER	PAGE
BIOGRAPHICAL SKETCH	i
ACKNOWLEDGMENT	iii
LIST OF TABLES	vi
LIST OF FIGURES	vii
LIST OF APPENDICES	viii
LIST OF ABBREVIATIONS	ix
ABSTRACT	x
 I. INTRODUCTION	
Rationale and Background of the Study	1
Statement of the Problem	12
Objectives of the Study	12
Specific Objectives	13
Significance of the Study	13
Scope and Limitations of the Study	14
 II. REVIEW OF RELATED LITERATURE	
Risk Communication	16
Risk Mitigation	17
Non-Pharmaceutical Interventions (NPIs)	18
Pandemic Narratives	21
Feelings, Cognitions, & Behaviors of	22
Filipinos in the Pandemic	23
Filipinos and Social Media	24
 III. FRAMEWORK OF THE STUDY	
Theoretical Framework	29
Conceptual Framework	34
Operational Framework	37
Definition of Terms	40

IV. METHODOLOGY	
Research Design	46
Locale of the Study	47
Units of Analysis	48
Sampling Procedure	49
Data Gathering Procedure and Analysis	50
Budget for the Study	54
V. RESULTS AND DISCUSSION	
Discourse Strands on Non-pharmaceutical Interventions	56
Socio-historical Issues Associated to the NPIs	71
Purposes of Non-pharmaceutical Interventions	79
Prevention Considerations	80
Emerging Purposes and Insights	81
Variations of Practicing NPIs	99
Perspective towards the Non-pharmaceutical Interventions	108
Detailed Analysis of Typical Discourse Fragments	110
Typical Illustrations of the Discursive Practices	114
Emotional Claims on the Non-pharmaceutical Interventions	117
Synoptic Analysis	121
VI. SUMMARY, CONCLUSION AND RECOMMENDATIONS	
Summary	126
Conclusion	129
Implications	132
Policy Implications	134
Theoretical Implications	135
Pedagogical Implications	135
Recommendations	136
BIBLIOGRAPHY	139
APPENDICES	166

LIST OF TABLES

<u>TABLE</u>		<u>PAGE</u>
1	Analytical Matrix of the Study	54
2	Budget Schedule	54
3	Types of Preferred Non-Pharmaceutical Interventions	56
4	Socio-historical Issues Associated with Non-pharmaceutical Interventions	71
5	Perceived Purpose of Non-pharmaceutical Interventions	79
6	Purposes and Insights of Non-pharmaceutical Interventions	81
7	Variations of Stay-at-Home as Non-pharmaceutical Interventions	100
8	Variations of Wearing Face Mask as Non-pharmaceutical Intervention	103
9	Variations of Social Distancing as Non-pharmaceutical Intervention	105
10	Response to Non-pharmaceutical Interventions	109
11	Collective Symbols Used in the Discourse	111
12	Circumstances Illustrating Discourse Practices	115
13	Sentiments on the Non-pharmaceutical Interventions	118

LIST OF FIGURES

<u>FIGURE</u>		<u>PAGE</u>
1	Infographics of New Normal in our Homes, in the Workplace and in Schools	10
2	Operational Framework based on the Foucauldian Discourse Analysis Methodological Toolbox by Jager and Maier (2016)	37
3	Socio-historical Issues Associated with the Non-pharmaceutical Interventions	75
4	Perceived Purposes of Non-pharmaceutical Interventions	79
5	Variations of Non-pharmaceutical Interventions Practices	99

LIST OF APPENDICES

<u>APPENDIX</u>		<u>PAGE</u>
A	Samples of Facebook Comments for Analysis	166
B	Sample Table of Analysis	167
C	Summary of Variations of Non-pharmaceutical Interventions Practices	168

LIST OF ABBREVIATIONS

CDA	Critical Discourse Analysis
COVID-19	Coronavirus disease 2019
DOH	Department of Health
ECQ	Enhanced Community Quarantine
FDA	Foucauldian Discourse Analysis
GCQ	General Community Quarantine
HCW	Healthcare Workers
IATF	Inter-Agency Task Force
MECQ	Modified Enhanced Community Quarantine
NPIs	Non-pharmaceutical Interventions
PPRD	President Rodrigo Roa Duterte
RT-PCR	Real-Time Reverse Transcription Polymerase Chain Reaction
WHO	World Health Organization

ABSTRACT

Built on the Foucauldian Discourse Analysis' (FDA) theoretical-methodological assumptions, and Jäger & Maier's methodological toolbox on discourse, the study systematically illustrates and accounts the discursive formations, socio-historical events and socio-cultural practices that constitutes Non-pharmaceutical Interventions (NPIs) communicated on social media from March 25 to June 25 2020 which covers the implementation of Republic Act No. 11469 also known as "Bayanihan to Heal as One Act" [Bayanihan refers to a spirit of civic unity and cooperation among Filipinos] in the country. The collective and individual narratives on Non-pharmaceutical interventions [NPIs] (Stay-a-home, handwashing, social distancing and wearing of masks) found in the Department of Health Facebook page on social media to mitigate the risks of infection and transmission of COVID-19 raise the prevailing discourse and assertions that non-pharmaceutical interventions are sets of health protective behaviors and public health standards for prevention, detection, and treatment of COVID-19. Individual willingness to comply, support and cooperate largely driven by concern, empathy, frustration, worries, hopelessness, disappointment, and anger are constructed which are provoked by uncertainties, ongoing social, political, historical, and cultural realities and social conditions caused by the COVID-19 pandemic health crisis.

Keywords: Discourse, discourse analysis, non-pharmaceutical interventions, stay-at-home, hand hygiene, face masks, social distancing, Foucauldian Discourse Analysis, safety behavior

Chapter I

INTRODUCTION

Background and Rationale of the Study

The COVID-19 pandemic is a far-reaching health crisis affecting not only the Philippines but the world. It is reported that the outbreak was first identified in Wuhan, China, in November 2019 and later declared as a pandemic on March 11. Dealing with SARS-CoV-2 virus (COVID-19 disease) remains challenging due to its rapidly emerging nature and the limited information at hand. The absence of vaccine or direct treatment to the disease forced governments like the Philippines to rely on Non-pharmaceutical interventions (NPIs) that are aligned with the health policies of the World Health Organization. Alongside the NPIs, the government also imposed policies on community quarantine, travel restrictions, and issuance of social amelioration initiatives (De Silva, 2020). Aside from restricting movements, the government has intensified efforts on its a) testing and testing capacity; (b) the reduction of new cases; (c) contact tracing; (d) treatments; (e) securing a vaccine for the people; and (f) securing, enhancing, and augmenting of the healthcare facilities and resources of the country (Malindog-Uy, 2020).

The circumstances and new realities brought about by the overwhelming surge of COVID-19 cases have stirred communication activities and discussion in social media. Hashtags, mentions, and posts relating to COVID-19 are circulating narratives that place the experiences, reactions and sentiments of various stakeholders during this pandemic.

Understanding Pandemic and Origins of COVID-19

The word 'pandemic' was first used in 1666 (Morens, Folkers & Fauci, 2009) but was only defined in 1828 by epidemiologist and lexicographer Noah Webster as a synonym to the word epidemic. Recent definition refers to large-scale outbreaks of infectious diseases occurring over a wide geographic area affecting a large number that result in economic, social and political disruption" (Porta, 2014; Madhav, et. al, 2017). Pandemics are generally attributed to travel and integration, urbanization, changes in the land use and exploitation of the environment (Jones, et. al, 2008, Morse, 1995). The risks of pandemics are based on the severity of the illness, geographic scale, high attack rates and explosiveness, novelty, infectiousness, contagiousness and severity in low- and middle-income countries (LMICs) (Kvicala, 2003; Morens, et. al, 2009; Madhav, et. al, 2017). In 2020, the word 'pandemic' was declared as the 'word of the year' by two dictionary publishers Merriam-Webster and Dictionary.com based on record breaking number of searches made on the meaning of the word online (Italie, 2020).

Based on the United Nations' World Health Organization (World Health Organization, 2020) timeline, the COVID-19 outbreak started as a Public Health Emergency of International Concern or PHEIC from a report of the spread of an infectious disease caused by a newly discovered severe acute respiratory syndrome coronavirus 2 (SARS-Cov-2) in Wuhan China on December 31, 2019 (Wu, et. al, 2020, WHO, 2020). The disease was initially referred to as Novel Coronavirus Disease and later it was officially named as Coronavirus Disease-2019 (COVID-19, by the WHO on February 11, 2020), attacks an individual's respiratory system

resulting in pneumonia-like symptoms such as fever, dry cough, fatigue, and occasional gastrointestinal symptoms (Huang, et. al, 2020, WHO, 2020; Covello & Hyer, 2020; Guo, et al., 2020). By March 11, 2020, the WHO announced it as a pandemic (World Health Organization, 2020).

The new virus that causes COVID-19 was termed by the International Committee on Taxonomy of Viruses (ICTV) as SARS-CoV-2 and the disease as COVID -19 (Gorbalenya et al., 2020; Cui et al., 2020; Lai et al., 2020). Increasing evidence associates the virus to SARS-CoV outbreak in 2002 and the Middle East respiratory syndrome coronavirus (MERS-CoV) in 2012 (Cascella, et.al, 2020; Guo, et al., 2020, WHO, 2020). Several studies and scientific reports suggest that SARS-CoV-2 causing COVID-19 disease spreads from person to person through contact, droplet, airborne, fomite, fecal-oral, bloodborne, mother-to-child, and animal-to-human transmission (WHO,2020; Guo et al., 2020;Shen, et al., 2020; Jayaweera et al., 2020). The said virus primarily causes respiratory illness ranging from mild disease to severe disease and death, and some people infected with the virus never develop symptoms (Zheng, 2020).

The Global Response to the Pandemic

As the leading health organization, the World Health Organization (WHO) continues to investigate, assess risks, conducts research and innovation forums, conducts press briefings and issue reports to inform, provide technical guidance, and support to its 194 member states and the rest of the world. This is to address the need to have timely, reliable and actionable data and measurements to manage,

mitigate, suppress, and prepare for the possible continuation of the COVID-19 pandemic in the next year (WHO, World Health Statistics, 2020).

In response, governments across the globe have imposed strict precautionary measures or Non-pharmaceutical interventions such as social distancing, lockdowns and wearing of masks to save and protect the lives of their citizens until a vaccine is available or until the virus subsides (Annaka, 2020; Mamoon, 2020). Consequently, in different times and in different severity, many governments are dealing with an immediate crisis by ordering business closures, restricting travel, reallocating resources to meet urgent medical needs, distributing financial aids and issuing targeted communications (Eggers, O'Leary, Flynn, & Chew, 2020). As of this writing, the number of COVID19 cases has reached 157 million and has claimed the lives of almost 3.27 million worldwide (Worldmeters, 2021).

The Philippines and COVID-19

As a low-middle income country (LMIC) and with a population of 109 million, the country level response to the COVID-19 pandemic is closely coordinated, supported, and monitored by WHO's country office (World Bank, 2020; World Health Organization, 2020). The Philippines' health system is composed of public and private sectors that are assisted and monitored by local government units. Continuous efforts on strengthening the health system through reforms on policies and approach on health service delivery have improved life expectancy and immunization coverage, as well as a twofold reduction in infant and under-5

mortality. However, the preparation and response capacity to natural and human-induced disasters remains one of the main challenges that the country is facing.

In addition, experts have projected that the existing health care system and disaster preparedness plans of the country will not survive a greater magnitude of infections. According to the 2018 Philippine Health Review, there are inefficiencies and health inequities of the country's system due to lack of budget and maldistribution of human resources. In the 2018 Health Systems in Transition (HiT) review, Dayrit, et. Al (2018, p. xxi- reported that when it comes to infrastructure, the country has only 1,224 hospitals, 2,587 city/rural health centers and 20,216 village health stations. In terms of human resources for health, the top four cadres of institution-based health workers are nurses (90 308), doctors (40 775), midwives (43 044) and medical technologists (13 413). Amit, et al. (2020 p. 2) estimates that *the Philippine health care system can only provide 1 hospital bed and 1.3 physicians for every 1,000 patients*. The limitations and challenges of the country's health system are attributed to:

...insufficient hospital beds: unequal ratio on number of physicians and health workers to number of patients, limited to unavailability of equipment, medical supplies, and personal protective equipment; uneven surveillance capacity across regions and provinces; and inequity to access quality healthcare. The disaster preparedness plans of the local governments are geared to address natural disasters such as typhoons and floods, not the threats of epidemics or pandemics (Amit, et al., 2020, p. 2-3).

As the emergency health crisis continues, the Philippine government has been employing a multi-sectoral approach such as surveillance, contact tracing, infection prevention and control, laboratory and therapeutic access, clinical care, non-pharmaceutical intervention and mental health, risk communication and

community engagement, logistics support, subnational operations support, responding to outbreaks in high-risk areas (WHO Philippines, 2020; OCHA, 2020).

Key decisions and recommendations to contain the spread of the virus and mitigate its socio-economic impact are carried out primarily by the Department of Health (DOH) together with the Inter-Agency Task Force (IATF) that was created based on Resolution No. 10 series of 2014 based on Executive Order No. 168 series of 2014, precisely to manage any disaster and emergency in the country and give appropriate and timely advice to the President. Inter-Agency Task Force (IATF) is comprised of the Department of Health (DOH), Department of Foreign Affairs (DFA), Department of Interior and Local Government (DILG), Department of Justice (DOJ), Department of Labor and Employment (DOLE), Department of Tourism (DOT), Department of Transportation (DOTr), Department of Communication and Technology (DICT) (WHO Philippines CORONAVIRUS DISEASE (COVID-19) Situation Report 1, issued on March 9, 2020; De Silva, 2020).

On March 15, 2020, President Rodrigo Roa Duterte (PRRD) has taken extreme measures that placed Metro Manila and other cities under “community quarantine” requiring the public to strictly observe social distancing; suspending face-to-face learning and instead adapting blended learning classes, closure of sea, air, and land travel; establishment of checkpoints for temperature screening; temporary closure of non-essential business establishments; encouragement of work-from-home arrangements; and prohibition of mass gatherings and non-essential public events, curfews were implemented with heightened presence of uniformed personnel to enforce procedures (Marquez, 2020).

On March 25, 2020, RA 11469 or the “Bayanihan to Heal as One Act” [Bayanihan Act] was signed to authorize Pres. Duterte as he carries the policies of preventing the spread of COVID-19 and addressing the health scare created by the pandemic for the next three months or until June 25, 2020. Specifically the interventions include expanding the testing capacity from one national reference laboratory with the Research Institute of Tropical Medicine (RITM) to 31 licensed testing labs across the country; providing financial assistance and services like the Social Amelioration Program (SAP); conducting contact tracings; placing high-risk individuals in quarantine facilities; issuing personal protective equipment (PPE) for health workers and other frontliners; participating in the WHO solidarity trial to find an effective treatment to COVID-19; connecting clinicians to communities through webinars and telemedicine; granting logistical support in moving equipment and essential supplies and providing subsidy to low-income households ("100 days of COVID-19 in the Philippines: How WHO supported the Philippine response," 2020; Official Gazette, 2020; Sawadjaan, 2020).

A month after, on April 24, 2020, the government launched the public-private Task Force T3 (Test, Trace and Treat) to amplify the PCR (Reverse Transmission – Polymerase Chain Reaction) testing for Covid-19 from 4,500 per day, to at least 30,000 tests per day. Task Force T3's role also includes identifying the areas in the country that need machines, test kits and mobile labs. and certify permanent and temporary laboratories in the country (Mocon-Ciriaco, 2020).

On September 11, 2020, President Rodrigo Duterte signed into law the “Bayanihan to Recover as One” or the Bayanihan 2 which provides a Php165.5 billion fund to further address the health crisis (Ranada, 2020).

Risk Communication in the Pandemic

During public health emergencies, people need to know what health risks they face and what actions they can take to protect their lives and health (WHO, 2017). Thus, governments must act swiftly to communicate crisis information effectively and efficiently to members of the public; failure to do so will inevitably lead citizens to become fearful, uncertain, and anxious in the prevailing conditions (Chen et al., 2020). Risk communication is now challenged to not only respond to the crisis but to restore a sense of normality in the aftermath as well (Lachlan, 2010).

According to the World Health Organization (2020), risk communication is “the exchange of real-time information, advice, and opinions between experts and people facing threats to their health, economic or social well-being.” It is a multi-directional interactive process among interested individuals, groups and institutions sharing information and opinions (National Research Council, 1989; (“WHO | General information on risk communication”, 2020) about the nature, magnitude, significance, or control of a risk (Covello, 1992, p.359) for assessment, characterization, and management (McComas, 2006, p.76). It aims to understand, appreciate, and address the concerns of the stakeholders through effective participation and discourse (Palenchar, 2005) using forms of media, social media and community

engagement (Gamhewage, 2014; ("WHO | General information on risk communication", 2020).

In the Philippines, health risk communication is ensured by the Department of Health (DOH) as it provides regular updates and disseminates relevant information on COVID-19. At the time where no proven cure for COVID-19 has been developed yet (Wu, et. al, 2020) and information was still emerging on the transmissibility and epidemiology of the virus, the national government repeatedly communicates and enforces risk mitigation behaviors such as appropriate hand hygiene or handwashing (Jemal, 2018) social distancing and other non-pharmaceutical interventions (NPIs), such as carrying out contact tracing, limiting travel, quarantining citizens, and cancelling large gatherings such as sporting events, concerts, and schools (Ault, 2020, Koren & Pető, 2020, [Replication-Receiver, 2020]).

Through Administrative Order 2020-0015, the DOH issued guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation set to ensure strong observance and compliance to Non-Pharmaceutical Interventions (NPIs), like the use of face masks, hand hygiene (use of alcohol or hand sanitizers), proper handwashing (using soap and water while following the 20-second handwashing rule) , physical distancing measures and travel and activity restrictions (DOH, 2020 April 27, p. 3-4). These health standards are to be observed in all settings such as home, public places, offices and workplaces, high-density communities, food and other service establishments, schools, hotels and other accommodations, churches and places of worship, prisons and other places of detention, public transportation (air, land, and water transport), and health facilities. The NPIs are the known and

accepted risk mitigation strategies intended to increase physical and mental resilience, reduce transmission of SARS-CoV-2, reduce contact and reduce duration of infection (DOH, 2020 April 27, p. 22-23).

The New Normal or the New Public Health Safety Standards

The new normal is primarily set on public health safety standards that is described by the Department of Health's Research Institute for Tropical medicine (DOH-RITM) as:

a new way of thinking about, deciding on, and doing our usual affairs, with an invigorated sense to remain healthy by: reducing vulnerability by keeping a healthy lifestyle; reducing virus transmission by observing infection control measure; reducing contact with a potential disease carrier; reducing the duration of the infection by establishing effective disease management mechanisms; and ensuring governance and accountability by putting in strong healthy regulations and policies (Research Institute for Tropical Medicine, 6 May 2020)

The infographics (Figure 1) present the new normal health behavior prescribed by DOH-RITM published in <http://ritm.gov.ph> last May 6, 2020. It requires compliance to mandatory and optional sector-specific non-pharmaceutical health intervention in homes, workplace, and schools.

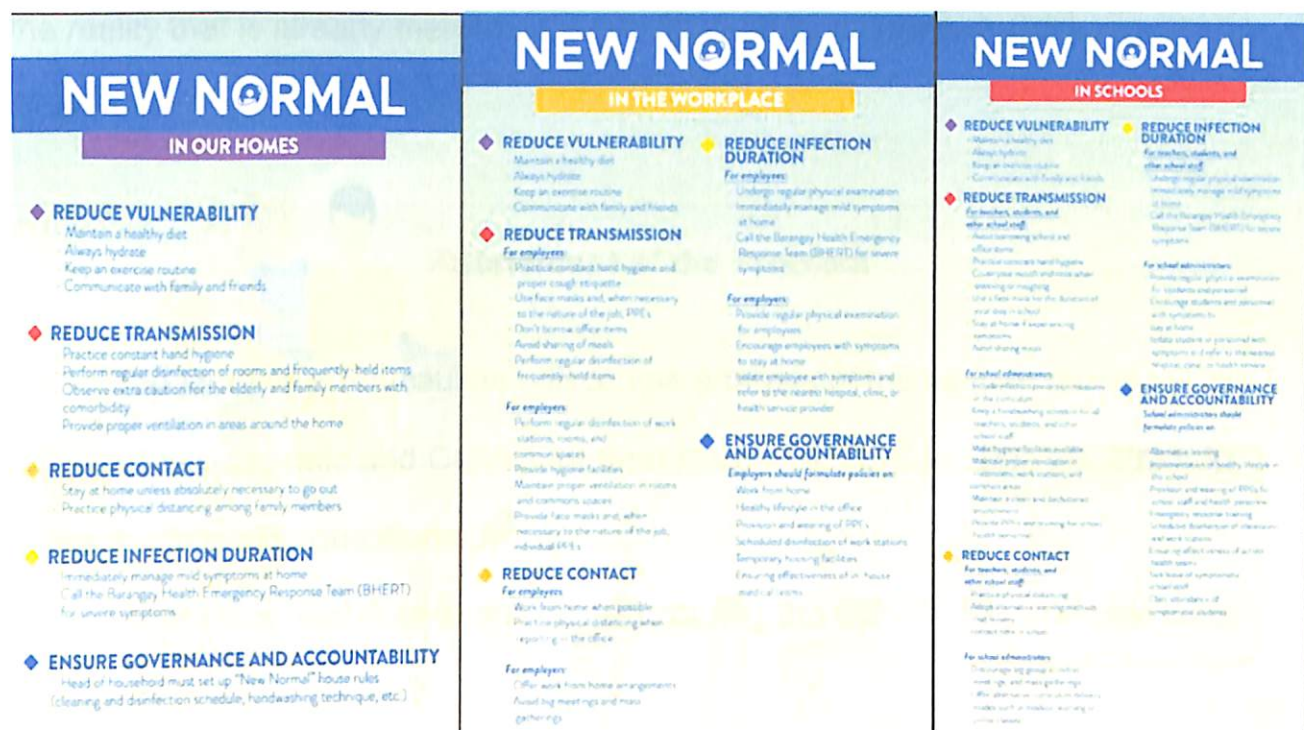


Figure 1. Infographic of New Normal in our Homes, in the Workplace, and in Schools by Department of Health's Research Institute for Tropical Medicine issued on 6 May 2020 at ritm.gov.ph/new-normal-in-our-homes-in-the-workplace-and-in-schools/.

The idea of the so-called 'new normal' strongly requires observance of all health safety practices or the observance of all health safety non-pharmaceutical practices such as wearing masks, testing, contact tracing, maintaining physical distance and staying at home (Department of Health, 2020; World Health Organization, 2020; Agence France-Presse, 2020).

As the 'new normal' sets in as part of social realities, this study worked on the pandemic narratives or the discourses in the form of comments in Facebook that place the views, reactions, and sentiments of the public during this pandemic towards the non-pharmaceutical interventions (NPIs) (Handwashing, wearing of face masks, and social distancing) through Foucauldian Discourse Analysis (FDA) of Michel Foucault. His theoretical and methodological framework determines what he describes as the "history of the present" that points to a "a deeper understanding of

the reality that is already there” (Hekman, 2010 cited in Bacchi & Bonham, 2014, p. 176).

Statement of the Problem

The study is a Foucauldian discourse analysis of the various narratives on NPIs on the pandemic and COVID-19 from March 25, 2020 to June 25, 2020. It posits the following questions:

1. What discursive formations on NPIs during the COVID-19 pandemic were articulated in social media?
2. How did the discursive formations about the non-pharmaceutical interventions (NPIs) evolve in Social Media?
3. What socio-historical events and socio-cultural practices materialized from the discursive formations about NPIs on the pandemic and COVID in social media?

Objectives of the study

General Objective

In general, the proposed study aims to analyze the discursive formations, socio-historical events (discursive events), and the socio-cultural practices evident on social media discussions on non-pharmaceutical interventions which are (1) social distancing, 2) handwashing, and 3) use of facemasks, during the initial stage of the COVID-19 pandemic.

Specific Objectives

1. To describe the discursive formations, the socio-historical context (discursive events) and discursive positions of the public on the observance of non-pharmaceutical interventions (NPIs) as articulated in social media that are singled out for this proposed study.
2. To determine how discursive formations constituted non-pharmaceutical interventions (NPIs) as prevention of COVID-19 infections and transmission.
3. To resolve the social realities that provoked the discourses on the observance of non-pharmaceutical interventions (NPIs) in social media during the early period of the COVID-19 pandemic.

Significance of the Study

The various responses of the government to mitigate and to address the pandemic in the country evokes the proliferation of stories, news, and discussions in social media. Shared messages, information, knowledge, and public health narratives continue to circulate in these extraordinary times. Aside from the narratives that come from the unprecedented transmission and social impact of COVID-19, it would be both imperative and beneficial to also explore the accounts relating to the non-pharmaceutical interventions (NPIs) as part of the new normal. Information managers, communicators and media professionals who are purveyors of information and knowledge may draw contemporary insights and best practices on health messaging, health risk communication and crisis communication. Navigating communication as the front and center of the pandemic intends to expose the social realities and fill the research gaps in communicating the NPIs.

The study's use of the Foucauldian discourse analytical method is a significant contribution to Philippine communication and media studies. This method has had extensive use in the study of news articles, television programs, and films in Western countries. The method is useful in emerging the resistive elements in the narrative of the pandemic. The method also enables to reveal the social, historical and cultural workings that go into forming the discourse on the pandemic and COVID-19. Aside from the compliance to the new social practices guided by the NPIs, it is also equally important to explain the resistance and inconsistencies in the enactment of the NPIs for insights helpful in the reinforcements and improvements of health and risk communication policies.

Scope and Limitations of the Study

The initial impetus of the study are the discourses (from texts), circulating in social media that are looped to the observance of non-pharmaceutical intervention practices (hand hygiene, wearing of mask, and social distancing). The study limits its analysis within the discursive formations and discursive practices expressed in social media specifically in Facebook from March 25, 2020 to June 25, 2020 or while Republic Act No. 11469 "*Bayanihan to Heal as One*" Act (Bayanihan Act) is carried out to combat the COVID-19 pandemic in the Philippines.

Among the available variations of Critical Discourse Analysis, this research was constricted to the framework and methodological underpinnings of the Foucauldian Discourse analysis. Specifically, the study worked on the comments

posted during the community quarantine in the Department of Health's (DOH) official Facebook page.

To facilitate selection of texts to include in the study, the social interactions that are posted in the daily virtual press briefing and bulletins of the Department of Health (DOH) were evaluated and sorted in terms of relevance and similarity. Keywords and hashtags were made as additional references to facilitate categorization of relevant samples.

The research questions were answered through Foucauldian Discourse analysis methodological toolbox designed by Jäger & Maier (2016) and excludes the dispositive analysis or the building of knowledge into linguistically and non-linguistically performed practices.

Chapter II

REVIEW OF RELATED LITERATURE

This chapter presents the review of literature and studies relevant to the current study and the same was used to conceptualize this research. It provides understanding and knowledge regarding important concepts on risk communication, risk mitigation, social media, non-pharmaceutical interventions (NPIs) and pandemic narratives. Thereby outlining both knowledge and practices that constitute the non-pharmaceutical interventions in the early stages of the COVID-19 pandemic.

Risk Communication

In such uncertain times, the World Health Organization stresses the importance of having an engaging communication which requires sharing with the public explicit information of the risks, events and interventions at such a given time is highly recommended along with building trust and collaborating with people in the community (Communicating Risk in Public Health Emergencies, 2020). WHO (2020) further suggests that information and communication systems should be tailored to the needs of users and local stakeholders.

Defined as the two-way communication or the interactive exchange of information about the existence, nature, form, severity, or acceptability of risks among risk assessors, managers, news media, interested groups, and the public (Muralikrishna & Manickam, 2017; Intrieri, et al., 2020). According to DiClemente, et.al, (2017), the essence of risk communication lies in the effective and accurate

exchange of information about health risks and hazards during crisis or emergency where risk awareness, understanding and promotion of health-protective behaviors among individuals, communities and institutions are needed.

Risk communication provides information that allows exposed individuals to be more receptive and responsible in making informed choices regarding risks, decision making and risk sharing (Wogalter, et.al, 1999). Byrd & Cothorn (2005) argue that even if the scientific and technical methods and results are sound, presenting such information also adds to the potential for misinterpretation and misunderstanding. Likewise, Harvey (2012) discovered in a study about the cyanobacterial outbreak in Guatemala, that health risk communication can be ineffective when there is scientific ambiguity, distrust of government and miscommunication on local cultural perceptions.

Government risk communication has been considered an important work to improve public awareness, which can thereby prevent this infectious disease from breaking out (deBruin, et. al, 2020, p.5; Duong, et. al. 2020).

Risk Mitigation

Part of risk communication are the specific measures that are based on information from risk and exposure assessment called risk mitigation (de Bruin et al., 2007). Defined as an interdisciplinary process of planning for disasters and having a way to lessen the negative impact, it includes risk acceptance and risk transfer. Risk acceptance is accepting a risk for a given period to prioritize other

risks. Risk transfer allocates risks between different parties, consistent with their capacity to protect against or mitigate the risk (Rouse, 2018).

Neighboring countries in Asia such as Hong Kong, Singapore, Japan and South Korea have managed to stabilize the increase in the number of cases in the span of two to three weeks by applying combinations of risk mitigation measures. The important lessons learned from them is that citizen awareness, social trust in authorities and well-coordinated risk mitigation communication are important factors (de Bruin et al., 2020).

Non-Pharmaceutical Interventions (NPIs)

In the absence of effective drugs and vaccines, governments have implemented stringent non-pharmaceutical interventions (NPIs), (Wilder-Smith & Freedman, 2020) which included active case detection and isolation of infected persons, maintaining social distance, closure of schools and universities and most businesses, working from home where possible, quarantining and monitoring close contacts and releasing multimedia epidemic and protection information. These measures effectively contained China's COVID-19 epidemic by March 2020 (Lau, et. al, 2020).

Several literatures on risk mitigation measures on the pandemic affirm that appropriate implementation of non-pharmaceutical interventions provide the valuable time needed for the production and distribution of antiviral medications. Mobility restrictions, physical distancing, hygienic measures, socio-economic restrictions,

communication, and international support mechanisms are the best way to prevent the spread of infectious diseases and decrease the burden on health care services (Anderson, et. al, 2020; Bruin et al., 2020, Khan, et al., 2020; Davies, et al., 2020; Markel, et. al, 2007, p. 644). In its Global Influenza Program Report in 2019, the WHO expounds that non-pharmaceutical interventions (NPIs) are the only readily available pandemic countermeasures that could always delay and reduce the transmission and impact of an epidemic or pandemic and in all countries.

The study of Zhao, Huang, Silva, and Battle (2020) identified major gaps in COVID-19 prevention and symptom awareness. Data from their survey reveal over-reliance and complacency of the respondents towards staying at home. More than that, respondents are unaware of the clinical symptoms of the disease and will not likely seek professional care once they get infected.

According to Kantor & Kantor (2020), the adherence of Americans to NPIs as the first line of prevention and mitigation relied much on the directness, familiarity and recommendations given and were associated with the belief that it is effective and it is not overly inconvenient. Thus, handwashing was commonly observed while approaches such as wearing masks or goggles, disinfecting surfaces, and avoiding face touching were not frequently observed.

In contrast, the July 3-6 Social Weather Station (SWS) data indicated that a large majority of Filipinos continue to practice health measures to prevent contracting the COVID-19 disease by wearing face masks (77%), washing their hands (65%) and observing social distancing (59%) (Gonzales, 2020).

In a wider perspective, a study of 1,908,197 confirmed COVID-19 cases in 190 countries from 23 January to 13 April 2020 by Bo, et. al (2020) uncovered that social distancing and the simultaneous implementation of two or more NPIs effectively reduce the spread of COVID-19 and should therefore be the strategic priorities for containing COVID-19.

In China, quick crisis information sharing online focused on how the government is handling the crisis along with factors such as dialogic loop, content type and positive emotional valence facilitated and translated to citizen engagement (Chen et al., 2020).

On the other hand, enhancing the community quarantine has resulted in the spread of misinformation and conspiracy theories about COVID-19 as the Filipinos spend more than 10 hours a day on the Internet. Tan (2020) believes that the public relied mostly on rumors, speculations, conspiracy theories and urban myths, thus, scientific facts and official reports from the experts and the government were mostly misinterpreted distorting the perception of the public towards the pandemic and its solutions.

According to the actionable risk communication model by Wood et al (2011 cited in Hornmoen & Backholm 2018), community members who are sharing what they have done to guard against risks with others who have not done much is the most effective motivator for preparedness and not public officials. In other words, one needs to involve community members in communicating preparedness messages.

In a similar note, the mental model theory (Morgan, Fischhoff, Bostrom, & Atman, 2002), highlights that effective risk communication requires understanding of pre-existing public perceptions of high dread risks such as pandemic threats to convince people to prepare better for them.

Pandemic Narratives

In the review on narratives of the past pandemics, Khan, et al (2020) highlights the recurring nature and persistence of pandemics. It was evident that influenza, cholera, plague and HIV pandemics all created profound social and economic consequences, changes in behavior, discrimination, and fear which consequently forced authorities for response, treatment and testing. Their analysis concludes that pandemics reshape society with new lessons both as a caution and preparation for future pandemics.

Film narratives of the pandemics also remind and caution. Davis (2014) explained in his article that mediated pandemic narratives in films have served as hermeneutical agency where the public is advised to remain critical of the realities of the pandemic.

Daymon and Criezis' (2020) study revealed that COVID-19-related issues and content presented in online platforms such as Telegram, Twitter and Rocket.chat offered a means of expression and developed kinship. The guided media ecosystem shaped coronavirus messaging among Islamic State. Interestingly, the media presentation of the pandemic developed a stronger sense of community; maintained

and shaped in-groups, out-groups, and notions of the “other, supported and advised; and offered opportunities to express anger, fear, and antipathy in an uncertain world.

Mohamad (2020) detailed that young people are creatively and effectively demonstrating pro-social distancing initiatives such as the case in Brunei Darussalam using social media platforms such as Instagram, Twitter, and Tik Tok. Apparently, Mohamad (2020) found out that young people shared in their social media accounts the narratives of fear, responsibility, annoyance, fun, and resistance. The expression of collective actions on social media, underscore social engagements, participation and reach in risk communication.

Feelings, Cognitions and Behaviors of Filipinos in the Pandemic

Based on Dr. Gastardo-Conaco's (2020) findings of a research under the Department of Science and Technology and National Research Council of the Philippines (DOST-NRCP) conducted from January to May 2020 taken from social media data, the Filipinos were generally “worried and afraid” during the Enhanced Community Quarantine (ECQ) mostly for the elderly, followed by family and last for young people. They also felt angry, concerned, disappointed, worried, frustrated, hopeful, suspicious, anxious, sarcastic, and helpless. The same study shared that the top three infection prevention practices of the Filipinos are: (1) wearing facemask when going out of the house; (2) staying home and to go out only to buy food and other necessities; and (3) practicing physical/social distancing.

Gastardo-Conaco (2020) further disclosed that Filipinos are relatively positive and remains agreeable towards being under community quarantine. However, the respondents find it difficult working or studying from home, getting regular medical care and prescription, and staying in the house for more than two weeks. When it comes to their main source of information, the respondents go to the internet, friends, family and the newspaper to get information. However, they find the newspaper, radio and television as the more satisfying and comprehensive information sources compared to the internet and friends.

Apart from getting more information about the government's response and pandemic updates from the national government, Filipinos also stated that their other sources include medical experts and local government. However, in terms of information quality and reliability, medical experts are considered as the most sufficient and reliable while the national government was least sufficient and reliable.

Uncertainties caused by the lack of clear information about the SARS-CoV 2 virus, and changes in the day-to-day activities have caused confusion, fear, anxiety, stress and depression. Premier Value Provider Inc. or PVP, an insights and solutions company found out that working millennials and Gen Z workers are experiencing a high level of stress while complying with Work From Home (WFH) arrangements (Mendez, 2020). The study of Nicomedes and Avila (2020) on the panic of Filipinos during the COVID-19 pandemic revealed that lack of information dissemination from experts and misinformation have reinforced health-related fear and phobias. The National Center for Mental Health has also recorded an increase in the number of cases of people who want to communicate with experts in the crisis

hotline mostly due to anxiety, depression because of the quarantine and lockdown going on (Ilas, 2020).

Filipinos and Social Media

In social media, participants collaborate as both producers and consumers of contents such as information and knowledge so there are no more boundaries when it comes to sharing contents (Bruns, 2007; Kaplan & Haenlein, 2010 as cited in Oprea, 2019).

The impact of social media to risk communication capacity building is more evident as more time is spent in social media. Ortiz-Espina (2019) described social media as a 'noteworthy passage for information' that is an integral part of the everyday life of one-third of the world population. It is therefore likely that social media as a communication platform can be well utilized in health risk communication and help improve emergency preparedness and response, reduce costs of disaster, improve transparency of decisions, and increase the potential of acceptance of outcomes (Abu Salim, 2019). It is an excellent listening tool to help 'feel the pulse' of the public, picking up risk incidents (Hornmoen & Backholm 2018). The boost on the availability of social media platforms, along with citizen journalism and 24-journalism is bridging the gap of the perception of the public and the perception of the authorities/regulators/experts in issues that are to be addressed such as risk communication (Hornmoen & Backholm, 2018; Abu Salim, 2019).

The Philippines, for five years in a row, remains as the social media capital of the world. This means that 76 million Filipinos or 71% of the population are active in social media spending an average of 4 hours and 13 minutes per day (Jabec, 2020; Kemp, 2020). The power of social media as a primary, alternative, or additional method of communication to create, support and strengthen the link between people has become more evident given the realities of COVID-19 pandemic. Users and communication practitioners agree on the leverage of social media in a time where communicating information and knowledge is a primary concern (White, 2019). In essence, social media allows 'participation and interaction, (Seargeant and Tagg 2014: 4) that leads to a fully decentralized and democratized access to discursive power (Morris and Ogan 2002: 137–138). According to Digital 2020 July Global Statshot report, produced in partnership with We Are Social and Hootsuite, 4.57 billion people or nearly 60% of the world's population are now active social media users. The growth of the global internet traffic or the increase in various digital activities is seen because of the new digital behaviors that people adopted during confinement. During the pandemic, Filipinos relied heavily on social media apps as primary source of news and a platform for product placement ("Insight: Unfolding four key technology insights on Filipinos' digital behavior on Twitter," 2020) For example, Twitter 72% of the Filipinos are watching more videos while 69% of them are spending more time on social media (Kemp, 2020).

Malindog-Uy's report (2020) explains that social media platforms have increased its relevance as more Filipinos have turned to social media to communicate and to participate in discussions and debates. Social media applications such as Twitter, Facebook, Instagram, and blogs have distinctly

extended opportunities of interaction and modified how users participate and collaborate. Both social media and mobile messaging can be used to communicate risks mitigation measures in real time and promote appropriate behavioral patterns in health crises like the COVID-19 pandemic.

The review of related literature affirms a strong sense of novelty on the pandemic caused by COVID-19. Literature on previous epidemics and pandemics helped establish preliminary insights such as predicting the impact and effective risk communication approaches. From the materials available to the researcher, it was evident that the world is still navigating through the pandemic with varying and limited information and insights. First, the critical points of the communication efforts of the authorities as revealed in several literatures on risk communication and risk mitigation have emphasized not only the value of effectively and efficiently communicating health safety interventions but also the active role of social media as a communication platform. Based on the study by Harvey (2012) on the cyanobacterial outbreak in Guatemala, health risk communication can be ineffective when there is scientific ambiguity, distrust of government and miscommunication on local cultural perceptions. The WHO for example, set up a 'WhatsApp' group to provide information and risk mitigation instructions on mobility restrictions, socio-economic restrictions, physical distancing, and hygiene measures. Other countries also launched national communication measures structured in news and information websites/platforms jointly combating fake news, aiming to encourage awareness, understanding and compliance towards restrictions. In short, the value of having trustworthy and well-coordinated communication channels to create community trust and compliance should not be overlooked (de Bruin (2020).

Second, studies on the citizens' ideologies, engagement, compliance and practice of safety health measures relating to non-pharmaceutical interventions or NPIs either vary or are inconsistent. For example, in China, Huang, et. al (2020) uncovered that there is an over-reliance towards staying at home with a strong tendency not to seek professional care once they get infected. On the other hand, Americans commonly observe handwashing as non-pharmaceutical intervention because it is not overly inconvenient and they find it effective compared to wearing masks, disinfecting surfaces, and avoiding face touching (Kantor & Kantor, 2020). Filipinos on the other hand would prevent contracting the COVID-19 disease by wearing face masks (77%), washing their hands (65%) and observing social distancing (59%) (Gonzales, 2020). Another finding from 190 countries identified social distancing and simultaneous implementation of two or more NPIs will effectively reduce the spread of COVID-19 (Bo, et. al., 2020). These literatures reveal that ideologies and biases of the public will help produce and reproduce Non-pharmaceutical interventions (NPIs) as the new normal which therefore means that there is indeed a need to explore more on the discourse practices, socio-historical events and socio-cultural practices.

Third, reports disclose the global digital growth and acceleration in both social media adoption and use (Kemp, 2020) which is attributed to the need for updates on the COVID-19 pandemic (Perez, 2020a) and to compensate for the restrictions imposed by the governments (Fox, 2020). The Filipinos, in fact, have become more active, participative, and cooperative in social media (Nortajuddin, 2020) specifically in Facebook (Kemp, 2020; Nortajuddin, 2020).

Lastly, several research works exposed prevailing sentiments indicative of the feelings, behaviors and cognitions of the people towards the lack of information dissemination from experts and misinformation reinforced health-related fears and phobias (Nicomedes and Avila, 2020). Majority of the Filipinos during the enhanced community quarantine (ECQ) are worried, afraid (Gastardo-Conaco, 2020) and lonely (Lee, et. al., 2020). The elderly, family and youth felt angry, concerned, disappointed, worried, frustrated, hopeful, suspicious, anxious, sarcastic, and helpless. These accounts reflect the overall sentiments and mental health concerns of the people caused by the pandemic which are parts of the discursive events and narratives that materialized during the pandemic.

There is a lack of literature that critically analyzes the discursive formations (knowledge) and the discursive position of the public's narratives during the pandemic specifically on the observance of Non-pharmaceutical interventions. Apparently, research literature relating to individual and group social media engagements during this COVID-19 pandemic are quite limited or may not have been published yet. Although DOST-NRCP's data were comprehensive and insightful, there is a strong need to identify and reconstruct the socio-historical milieu and socio-cultural discussions relating to the non-pharmaceutical interventions which could be best examined in the lens of critical discourse analysis.

In the current phenomenon, how information, beliefs and discussions are communicated in social media can either mitigate or aggravate the prevention and transmission of COVID-19 in respective countries.

Chapter III

FRAMEWORK OF THE STUDY

The communicative practice-based approach of this study would fit well as discourse analysis on NPIs which levels with the perspective of Foucault's version of Critical Discourse Analysis.

Theoretical Framework

According to Janks (1997), Critical Discourse Analysis (CDA) shares with communication the assumption that language does not represent, but rather constitutes the social world wherein subjects within discourse act as both participants to and subjects in the pattern of social oppression. CDA as an approach in communication presents not only the interdisciplinarity of the method with rhetoric and composition but also the interest in combining texts, interviews and archival data found in troubling laws, policies and political argumentation (Bartesaghi & Pantelides, 2017). From a theoretical perspective, Fairclough (2001) describes CDA as social ontology wherein abstract social structures and concrete social events are considered as parts of social reality and the dialectical view of the relationship between structure and agency, and of the relationship between discourse and other elements or 'moments' of social practices and social events (p. 1).

As an approach to Critical discourse analysis (CDA), Foucault's Discourse Analysis (FDA) offers an equally diverse methodological and loose approach in interpreting and explaining different areas of a social relationship system including

revealing the causes of social issues and constructing knowledge that could lead on to social change (Jäger & Maier, 2016; Fairclough, 1995; van Dijk, 2008; Locke, 2004 cited in Sudajit-Apa, 2017).

French Philosopher, psychologist, historian Michel Foucault's theory of critical discourse referred to as the Foucauldian Discourse Analysis (FDA) suggests that discursive practices could be best answered by knowing how expressions evolved, who they are expressed by, what the social status of it is, and in which context they are used (Foucault, 2002 cited in Yerlikaya, 2019; Powers, 2013; 6-11). Foucault's line of work on discourse serves as a "device" of interrelated discursive and non-discursive practices that materialize in the world (Pinho, et. al, 2009, p. 129). As a social theory, it provides a structuralist view that sees discourse as a kind of practice that belongs to collectives rather than individuals; and as located in social areas or fields (Foucault 1988, 1990, 2005 cited in Diaz-Bone, et al., 2007).

Phillips and Hardy (as cited in Heracleous, 2006, p. 101) identified that the two main contributions of Foucauldian discourse analysis are discourses as totalities determining subject positions and constituting objects or the discursive formations (Archeology) and discourses as manifestations of the will to power, linked to practices and institutions (Genealogy).

Jäger (2001 cited in Pearse, 2014, p. 9) on the other hand, identified five central issues in Foucauldian critical discourse analysis which are: what (valid) knowledge exists, how this knowledge has developed, how it is transmitted, the

function of such knowledge for the creation of subjects and the influencing of society, and the effect of this knowledge on social development.

Foucault's idea of discourse leads to "systems of thoughts composed of ideas, attitudes, courses of action, beliefs and practices that systematically construct the subjects and the worlds of which they speak" (Pears, 2014, p.39; Lessa, 2006, p. 3). or as a "*way of representing social practice(s), as a form of knowledge, as the things people say about social practice(es)*" (Van Leeuwen, 1993; Wodak & Meyer, 2015) that entails organizing produced knowledge through the collective understanding of the discursive logic and the acceptance of the discourse as social fact (structure of knowledge) of the historical period in which it arises (Adams, 2017; Diaz-Bone, et al., 2007). It is the production of knowledge through language (Hall, 1997, p. 72). Discourse shape and enable social reality, which means that it is not a mere ideology but how reality is brought into being by human beings, individuals, collectives or the "subjects/actors" (Jäger & Maier, 2016, p. 2). For Foucault, meaning and meaningful practice is constructed within discourse (Hall, 1997, p.75). Generally, discourse analysis drawn on Foucault seeks to dissect, disrupt and render the familiar strange by interrogating what is true and what is false. It inquires verifiable, falsifiable discourses that bear on them, and the effects in the real to which they are linked (Graham, 2005, p. 4). Identifying and analyzing discourses requires exploring systems of statements that must be understood as products of a socio-historic process in which the discourse as a field of knowledge and a system of rules emerges; Diaz-Bone, et al., 2007, p. 6-7).

Known as the 'discursive relations' along with non-linguistically performed practices, materiality enables 'objects' to form and be passed on as objects of discourse and constitute the conditions of their historical appearance. Discourses guide the individual (subjects/actor) and creative creation of reality. It determines the action that creates materializations (Jäger & Maier, 2016, p. 1; Introna, 2011, p. 113). Maier & Jäger (2016) elaborates that discourses are not only reflections of reality but are in essence materialized realities that are formed, shaped and enabled truths of the society.

According to Hall (1997, p. 80), Foucault's view of discourse is always historically specific wherein power and knowledge is connected to contexts and histories. His work is imbued with an attention to history that was expressed in his conceptions of "genealogy" and "history of the present" (Garland, 2014, p. 367). Described as a 'history of focal points of experiences', Foucault's framework includes: (1) a review of the history of the discourse (first called archaeology then later on genealogy); (2) an analysis of how the discourse functions presently; and (3) an analysis of the effects of discourse on power relations (Powers, 2013, p. 7). Foucault emphasizes the importance of engaging in a pure description of discursive events by treating the material in its original neutrality for historical continuity then examines the historical conditions of the actual existence of statements (O'Farrell, 2020). Foucault (2002) also argues that a given discourse reflects power structures, and that what one deems to be true or valid knowledge is based on the discourse of a particular moment in history.

In FDA, systems of language are structured and constituted by the formation rules of objects, divisions, enunciative modalities, concepts, and strategies (Arribas-Ayllon & Walkerdine, 2017) to denote a historically contingent social system that produces knowledge and meaning (Adams, 2017).

Under his method of genealogy, Foucault explains that deciphering discursive practices includes examining the situation where people are forced to act and speak out the rules produced in certain periods and the facts that can be directly observed (Powers, 2013, p. 7, Diaz-Bone, et al., 2007; Foucault, 1980, p. 117).

The Foucauldian catchphrase states that power and knowledge are inseparable. Contrary to the idea that power is repressive, negative, and sourced from a single direction that is typically from a specific course moving from top to bottom, Foucault views power to be productive and traverses through a 'net-like organization' (Foucault, 1980; p. 98) where people are caught up in its circulation in all levels of social existence. Divided into the themes of the object (topic of discourse), subject (the position taken by an individual and power (Foucault, 1982; Hall, 2001; El-Ela, et al., 2016). Foucault's approach is positioned through the concept of power that is more of a strategy than a possession because it has positive effects such as the individual's self-making, and because, as a condition of possibility for any relation, it is ubiquitous, being found in any type of relation between the members of society (Balan, 2010). FDA is focused on how knowledge regulates the conduct of others in discursive practices (Hall, 1997, p. 75). Knowledge for Foucault, as described by Jäger & Maier (2016, p. 1) sets knowledge as *"all elements of thinking and feeling in human minds, or in other words, all*

contents that make up human consciousness.” In the FDA, all kinds of knowledge contained in discourses can be analyzed whether they are transmitted through everyday communication, by science, by the media, etc. (Jäger & Maier, 2016, p. 1). Focusing on discourse- as- knowledge also relates to matters of the social, historical, and political conditions under which statements come to count as true or false (McHoul and Grace, 1997 cited in Hook, 2001, p. 4).

Conceptual Framework

Building on Foucault’s theoretical-methodological insights, this study constitutes a critical analysis of the discourses to account for both discourse practices and social practices of NPIs (social distancing, wearing of mask, handwashing) that is linked to the socio-historical milieu or within the synchronic perspective set on the early period of the COVID-19 pandemic in the Philippines.

Thinking discourse in other words, will reveal different even multiple origins of discourse allowing the ‘rediscovering of connections, supports, blockages towards identification of the material components acting upon and within discourse, to an analysis of the multiple analytical ‘salient’ towards regularizing collectivity (Said, 1983, p. 186; Derek, 2001, p. 22).

The main value of Foucault’s theoretical insights to this study is to provide a dynamic, historical, and critical perspective on the emerging discourses on knowledge, power and reality surrounding the normalization of non-pharmaceutical interventions in the COVID 19 pandemic. In view of the ongoing global pandemic

and the limited knowledge available, Foucault's concept of discourse situates how the active subjects (public) express their thoughts, feelings and actions which could be conventions, negotiations, and conflicts (Poudel & Aase, 2015, p. 48). Foucault's contributions on discourse analysis that is taking the hidden power of knowledge known, inspires and leads this study to discover the materializations related to the prevention of infections and transmission of COVID-19 disease.

Considering that more Filipinos have been spending more time online with their devices to entertain themselves and to get COVID-19 updates during quarantine or community lockdowns, social media interactions in Facebook were examined and analyzed. The study singled out comments that were posted in the Department of Health Facebook page from March 25, 2020 to June 25, 2020 that form discourse on non-pharmaceutical interventions such as staying-at-home, social distancing, wearing of face mask and hand hygiene to prevent the spread of COVID 19 infection and transmission.

The Archeology or discourses as totalities of FDA refers to the knowledge or the discourse formations that shows dynamism particularly in determining the public's ideological position in constituting the NPIs as objects. While Genealogy or the discourses as manifestations of the will to power that is linked to practices and institutions grants the attempts to deconstruct the discursive formations (power/knowledge) and the socio-historical context that provoke practice of NPIs. The use of both metaphors of archaeology and genealogy are based on Foucault's suggestion that one ideological position cannot be substituted for another (Pearce, 2014. p. 35). In his *Archaeology of Knowledge* Foucault delivered a theoretical work,

within which discourse is presented as a system of statements (enunciations). It is this character of an "ordered system" which is constitutive of statements, rather than the intentionality of individuals in situations (although individuals still must enact discourses and statements). These statements are produced (diachronically) in an ongoing discursive stream, whereby the preceding statements build the (virtual) context of previously enacted statements.

By means of FDA, discourse on practicing NPIs can be understood as a "linguistic activity in action" that is investigated through structure and action (Pinho et al., 2009, p. 130). Instituted on Foucault's notion of discourse, materiality, knowledge, history, language and power, the study critically investigates the human knowledge as expressed in language through a specific period in history that is transformed into practice.

Considering the ideologies and truth of discourse through the lens of FDA, this research endeavor adopts FDA which according to Arribas-Ayllon & Walkerdine (2017, p. 114) suggests the that disciplining change requires specifying an institutional partitioning of knowledge which in this study is health communication and following techniques and practices to form objects, concepts and strategies. The study identifies itself well situated in the theoretical-methodological perspective of Foucault and supposes, too, that by deconstructing and processing through critical analysis the narratives shared in social media during the pandemic on non-pharmaceutical interventions will lead to in the words of Foucault (1972; 216) the "awesome materiality."

Operational Framework

Accordingly, there are no standard rules or procedures for conducting FDA. Powers (2013) points those variations of the Foucauldian discourse analysis which include the following: (a) a review of the history of the discourse in what Foucault first called archaeology (and the modified later version, genealogy), (b) an analysis of how the discourse functions presently, and (c) an analysis of the effects of the discourse on power relations. Hence, this study analyzed and described the socio-historical and social practices or the episteme, the subjectivities, the social circumstances (policies and everyday communication) that created and produced the discourses in social media, and the practices and materiality of the COVID-19 pandemic reality.

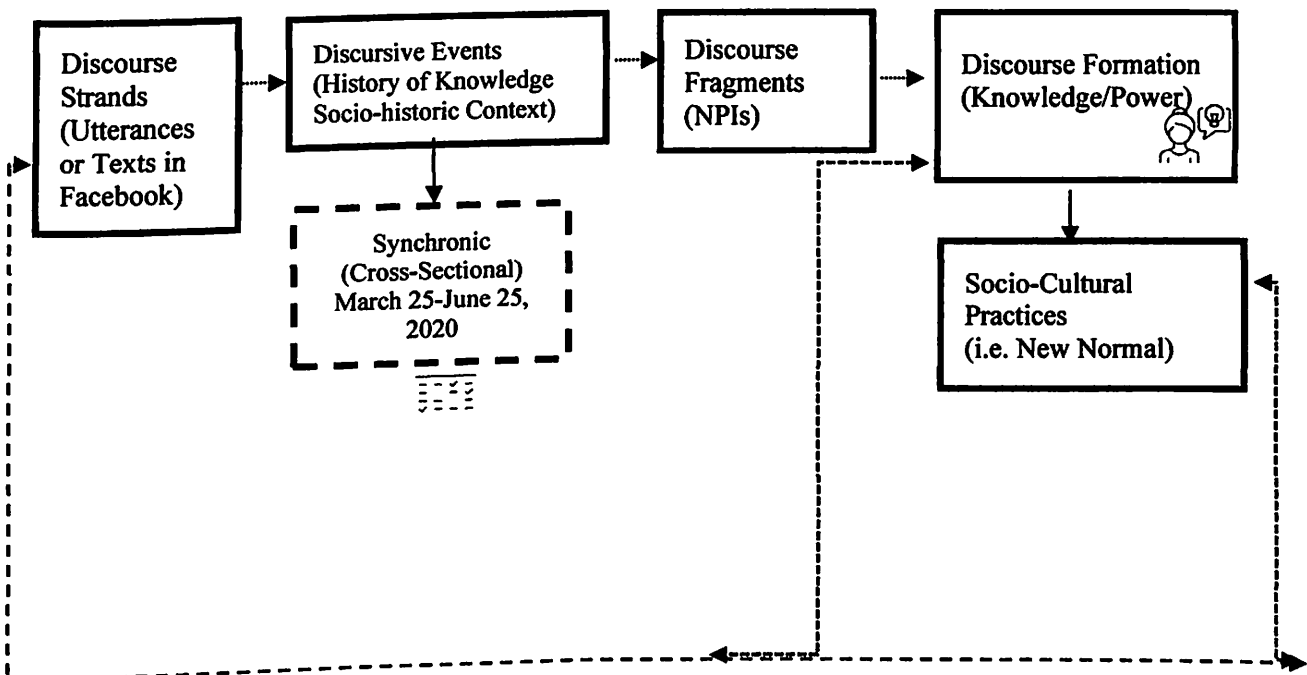


Figure 2
Operational Framework based on the Foucauldian Discourse Analysis Methodological Toolbox by Jager and Maier (2016)

Focused on shared pandemic narratives specifically the ideologies and biases shared in the online community, the study will employ the qualitative approach.

According to Berg (2009, p.3), qualitative research deal with the meanings, concepts, definitions, characteristics, metaphors, symbols, and descriptions of things.

The overall direction of the study as shown in Figure 2 is guided by the intentions of analyzing the fragments of the social media discourses. Knowledge in this study was conditioned in terms of the evolving public's knowledge on NPIs, the historical events that helped form similar and repetitive statement, the functionalities it has for constituting subjects and the consequences it has for the shaping of new sociocultural practices to mitigate the risks and prevention of COVID-19 infection.

The study operated based on Foucault's major theoretical assumptions and methods. First is on Archeology of knowledge, the focus of which is on the analysis of the discursive positions and discourse strands fragments wherein knowledge is formed or how discourses systematically form the objects of which they speak (Foucault, 2002, p.54). Here, the analysis of the discourse includes linguistic concepts (e.g. vocabulary, pronominal structure, argumentation) which can be used to examine the more subtle workings of texts (Jäger & Maier, 2016, p.8). Language or linguistically performed practices could mean both the text and the rules, divisions, and systems. Hence to be linked up with the discourse strands is the collective symbols or repertoire of images that construct a picture of reality (Jäger & Maier, 2016, p.8), describing discourse positions on non-pharmaceutical interventions.

Second, the present study is drawn into Foucault's notion that accepting what was said requires an understanding of how it came about and understanding the

justification for its existence (Pearse, 2014, p. 40). With Foucault's Genealogy, a form of history accounts for the constitution of knowledge, discourses, and domains of objects in its historical perspective. Through a synchronic analysis, the discourse strands on NPIs were examined to construct what is said and sayable during the early months of the pandemic in the Philippines. Here is when the socio-historical context of the subject subsumes the rationality, knowledge, expressions, and practice to the NPIs as the number of COVID-19 cases increases or in other words how the discourse functions in specific periods of the pandemic.

Lastly, the study leads to the analysis of the effects of the discourse on power relations particularly the materiality of NPIs in preventing the transmission of COVID-19 infection including the concordances or contradictions. The type of knowledge/power analyzed in the study was based on Foucault's view that power is not the negative, repressing and controlling kind but the productive power relations kind (Gaventa, 2003, p.2). The analysis in the study focused a neutral analysis of power relationships where the subjects are discursively constituted through power and their actions that contributed to the operation of power. The focus on the analysis was therefore on the "meticulous rituals" where materiality is seen in the power relations that go to the depth of society (Hall, 1997 cited in Wetherell, et. al, 2001, p. 7) where power produces reality, domains of objects and rituals of truth (Gaventa, 2003, p. 2).

Definition of Terms

Archeology or discourses as totalities - Foucault refers to the knowledge or the discourse formations showing dynamism particularly in determining the public's ideological position. Archaeology tries to define not the thoughts, representations, images, themes, preoccupations that are concealed or revealed in discourses; but those discourses themselves, those discourses as practices obeying certain rules (Felluga, 2015, p. 138)

Bayanihan to Heal as One Act (Bayanihan Act) or RA 11469 was a law passed valid from March 25- June 25 which provides the President of the Philippines the power to implement temporary emergency measures to respond to the crisis brought about by COVID-19 ("100 days of COVID-19 in the Philippines: How WHO supported the Philippine response," 2020; Officialgazette, 2020; Sawadjaan, 2020).

Bayanihan to Recover as One Act (Bayanihan 2) or Republic Act No. 1149 was signed into law on September 11, 2020 providing PhP165.5 billion fund to aid the government in its ongoing response to the COVID-19 pandemic and recovery programs (Ranada, 2020; Official Gazette of the Republic of the Philippines, 2020).

Critical discourse analysis is where analysis seeks to understand how discourse is implicated in relations of power. It stems from a critical theory of language which sees the use of language as a form of social practice. All social practices are tied to specific historical contexts and are how existing social relations are reproduced or contested and different interests are served (Janks, 1997, p. 329).

Coronaviruses are a large family of viruses which may cause illness in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered coronavirus causes coronavirus disease COVID-19 (Cascella, et.al, 2020; Guo, et al., 2020, WHO, 2020).

COVID-19 is an infectious disease which is now considered a pandemic affecting many countries globally (World Health Organization, 2020).

The Department of Health (DOH) is the principal health agency in the Philippines that is responsible for ensuring access to basic public health services to all Filipinos through the provision of quality health care and regulation of providers of health goods and services (<https://www.doh.gov>).

Diachronic analysis cuts through a discourse strand at various points in time and place, for example at discursive events (Wodak & Meyer, 2015, p.121).

Discourses are groups of statements which provide a language for talking about - a way of representing the knowledge about- a particular topic at a particular historical moment. It is the production of knowledge through language (Hall, 1997, p. 72). It is a systematic body of text, speech, and action regarding a specific subject area in the realm of human experience that mobilizes power in the form of productive knowledge in the social world (Powers, 2013, p. 6).

Discourse Fragments refer to a text or part of a text that deals with a particular topic (Jäger & Maier, 2016, p. 12).

Discursive formation refers to the same object, share the same style, and support a strategy, a common institutional, administrative, or political drift and pattern of a discursive event (Cousins and Hussain, 1984, p. 84-85).

Discursive practice refers to the practices (or operations) of discourses, meaning knowledge formations, not to linguistic practices or language use. It describes those practices of knowledge formation by focusing on how specific knowledge ("discourses") operate and the work they do (Bacchi & Bonham, 2014, p. 173-174).

Discourse Strands refers to discourse fragments on the same topic (Jäger & Maier, 2016, p. 11).

Foucauldian Discourse Analysis (FDA) is a concept of discourse by French postmodernist Michel Foucault. It indispensably requires the role of historical contextualization or a 'history of systems of thought' (Foucault, 1977).

Genealogy is a term used to describe Foucault's method, which means that analysis begins from a question posed in the present" (Kritzman, 1988, p. 262 cited in Garland, 2014, p. 367).

History or History of the present is the interrogation of the present to examine its values, discourses and understandings with recourse to the past as a resource of destabilizing critical knowledge (Dreyfus & Rabinow, 1982).

Inter-Agency Task Force (IATF) is a task force created based on Resolution No. 10 series of 2014 based on Executive Order No. 168 series of 2014, precisely to manage any disaster and emergency in the country and give appropriate and timely advice to the President. IATF is comprised of the Department of Health (DOH), Department of Foreign Affairs (DFA), Department of Interior and Local Government (DILG), Department of Justice (DOJ), Department of Labor and Employment (DOLE), Department of Tourism (DOT), Department of Transportation (DOTr), Department of Communication and Technology (DICT) (WHO Philippines CORONAVIRUS DISEASE (COVID-19) Situation Report 1, issued on March 9, 2020; De Silva, 2020).

Knowledge are all elements of thinking and feeling in human minds, or in other words, all contents that make up human consciousness. It is also referred to as discourse formation (Jager & Maier, 2016, p. 1).

Language structured and constituted by the formation rules of objects, divisions, enunciative modalities, concepts, and strategies (Arribas-Ayllon & Walkerdine, 2017) to denote a historically contingent social system that produces knowledge and meaning (Adams, 2017).

Materialization refers to how meanings are materially enacted in practice (Introna 2011, p. 113-141 cited in Orlikowski & Scott, 2014, p. 5).

New Normal is a new way of thinking about, deciding on, and doing our usual affairs, with an invigorated sense to remain healthy by: reducing vulnerability by keeping a

healthy lifestyle; reducing virus transmission by observing infection control measure; reducing contact with a potential disease carrier; reducing the duration of the infection by establishing effective disease management mechanisms; and ensuring governance and accountability by putting in strong healthy regulations and policies (Department of Health, 2020; World Health Organization, 2020; Agence France-Presse, 2020).

Non-pharmaceutical interventions (NPIs) are essential components of the public health response to COVID-19 outbreak delaying the timing and reducing the size of the peak of the pandemic. These include personal protective measures (e.g. hand hygiene, respiratory etiquette and face masks); environmental measures (e.g. surface and object cleaning, and other environmental measures); social distancing measures (e.g. contact tracing, isolation of sick individuals, quarantine of exposed individuals, school measures and closures, workplace measures and closures, and avoiding crowding); and travel-related measures (e.g. travel advice, entry and exit screening, internal travel restrictions and border closure) (Lai et. al., 2020).

Pandemic refers to large-scale outbreaks of infectious disease occurring over a wide geographic area affecting a large number that result in economic, social and political disruption” (Porta, 2014; Madhav, et. al, 2017)

Power/knowledge- power is based on knowledge and makes use of knowledge; power reproduces knowledge by shaping it in accordance with its anonymous intentions (Foucault, 1980).

Power refers to a whole series of mechanisms, definable and defined, that seem capable of inducing behaviors or discourses (Foucault 1996: 394)

Risk Communication is the two-way communication or the interactive exchange of information about the existence, nature, form, severity, or acceptability of risks among risk assessors, managers, news media, interested groups, and the public (Muralikrishna & Manickam, 2017; Intrieri, et al., 2020).

Risk mitigation is an interdisciplinary decision-making process based on information from risk and exposure assessment (deBruin et al., 2007).

Social Media are interactive technologies that allow the creation or sharing/exchange of information, ideas, career interests, and other forms of expression (Kietzmann et al., 2011).

Subjects (actors) are social constructions of individuals or collectives (e.g. organizations, nations) that feel, think and act in certain ways (Jäger & Maier, 2016, p. 3).

World Health Organization (WHO) is the specialized agency of the United Nations (UN) established in 1948 to further international cooperation for improved public health conditions working in main areas such as health systems; health through the life-course; non communicable and communicable diseases; preparedness, surveillance and response; and corporate services ("5 reasons the world needs WHO, to fight the COVID-19 pandemic," 2020).

Chapter IV

METHODS AND PROCEDURES

Research Design

This study employed a critical qualitative research design that is drawn on a critical discourse analysis (CDA) approach based on the philosophical ideas and theoretical groundwork of Michel Foucault referred to as Foucauldian Discourse Analysis (FDA). Embedded in the constructivism–structuralism traditions, the Foucauldian discourse analysis determined the connections of discourse, social circumstances (history), and discourse practices. Denzin & Lincoln (2013, p.7) associates constructivism or interpretivism paradigms with studies that follow a qualitative approach, which emphasizes research about social issues involving people in their natural setting in order to make sense of how phenomena in terms of the meanings people bring to them. In this case, Foucault's discourse analysis distinctively sets how particular discourses construct versions of the social world by examining the texts and how individuals think and speak (Hodges et al., 2008, p. 337) and, thus, provided the study with theoretical and methodological support.

Being a critical discourse analysis, the study captured the critical stance of the Filipinos during the early months of the COVID-19 pandemic by examining the discourses or the story at play, specifically the narratives on non-pharmaceutical practices (NPIs) and by understanding further how individuals relate to them. It

demonstrated how things come to be as they are, that they could be different, and thereby that they can be changed (Hammersley, 2003, p. 758).

Locale of the study

The study was conducted on a nation-wide scale, covering the comments available in the Department of Health's (DOH) official Facebook Page from March 25, 2020 to June 25, 2020. It was presumed that the discourse fragments or texts are from individuals located in different parts of the country.

Units of Analysis

The discourse fragments on the practice of Non-pharmaceutical interventions such as staying at home, wearing of face masks, social distancing and practicing proper hand hygiene that were accessible in the DOH Facebook page from March 25 to June 25, 2020, were sorted and included as units of analysis. The DOH Facebook page has been one of the active health risk communication platforms of the government that provides regular updates and disseminates relevant information on COVID-19 daily. The study specifically focused on the social media platform 'Facebook' as the main discourse plane due to the Filipino public's active engagement in the said platform. According to the Digital 2020 Global Statshot report, there are approximately 70 million Filipinos who are using Facebook. It was also revealed that during the pandemic around 64 percent of the Filipinos that were surveyed said their 'social time' increased (Nortajuddin, 2020). It is evident that social media particularly Facebook is relevant and important for Filipinos amid the

pandemic. Malindog-Uy (2020) explained that Filipinos saw social media or the virtual public sphere as their primary means to be involved and participate in discussions and debates on issues that affect their lives.

Sampling Procedure

Drawn from the methodological goal of conducting text analysis, a total of 465 samples of the study were generated based on the availability of “rich” discourse fragments found in Department of Health’s (DOH) Facebook page. The comments that include the NPIs (see Appendix A) were collected and screened one by one until the final samples were to untangle the discursive formations, socio-historical and socio-cultural practices that emerged relating to NPIs. The sample texts (see Appendix A) were extracted from the daily Case Bulletins and Virtual Press Briefings posted by the DOH from March 25 to June 25, 2021 when the ‘Bayanihan to Heal as One’ (R.A. 11469) was in full force and effect.

In determining the sample size, Coyne (1997) argues that there is no optimal sampling procedure, and that qualitative research sampling is inevitably intentional wherein sampling depends on the requirements of the study.

Patton (1990, 2002 cited by Suri, 2011, p. 65) has provided a comprehensive discussion of purposeful sampling:

The logic and power of purposeful sampling lie in selecting information-rich cases for study in depth. Information-rich cases are those from which one can learn a great deal about issues of central importance to the purpose of the inquiry, thus the term purposeful sampling. Studying information-rich cases yields insights and in-depth understanding rather than empirical generalizations (Patton, 2002, p. 230, emphasis in original)

In reference to Patton's discussion, this study employed opportunistic or emergent sampling design (as cited in Suri, 2011 which investigated samples as it unfolds. Accordingly, it is described by Patton (2002, p. 240) as the option of adding a sample to take advantage of unforeseen opportunities when the fieldwork began. The emergent method is inductive, indeterminate, and open-ended that offers understanding of events as they unfold and as knowledge accrues (Charmaz, 2008, p.155).

In this study, this strategy was useful in exploring the ongoing, uncharted, contingent, and evolving narratives on the COVID-19 health crisis. Since COVID-19 pandemic was at its exploratory stage, the opportunistic or emergent sampling allowed flexibility in adding useful insights including unforeseen opportunities that may be initiated by changes in the events and health policies. Due to the large number of comments posted in the daily press briefings and bulletins of the Department of Health (DOH), samples were initially picked once it mentions an NPI (Face mask, handwashing, social distancing, stay at home). To limit the number of sample size, collection decisions were based on data saturation and data sufficiency. In the initial stage, comments were chosen in terms of the insights they carry about a non-pharmaceutical intervention. The selection of comments stops when there are no new substantive information or idea seen. From here, the researcher has decided to set a maximum of five comments per day. Using the two sampling strategies, the study yielded 465 comments from the 93 days of the enforcement of the Bayanihan to Heal as One Act (R.A. No. 11469) in the Philippines.

Data Gathering Procedure and Analysis

The data consisted of Non-pharmaceutical interventions discourses in the context of COVID-19 pandemic in social media which were navigated through the three phases of discourse analysis guided by the Foucauldian-based methodological toolbox developed by Jäger & Maier (2016). The data collection began with a structural analysis (see Appendix B) of the discourse strands, followed by a detailed analysis of discourse fragments, and ended with a synoptic analysis.

Specifically, the three phases carried out for the Foucauldian Discourse analysis in the study are:

PHASE 1: Structural Analysis of the Discourse Strands

Phase 1 worked on the structural analysis of discourse or all relevant Facebook comments relating to NPIs from March 25, 2020 to June 25, 2020, that appeared in the virtual daily press conference of DOH and in the daily case bulletins. Then, all the relevant aspects of the text(s) in question (illustrations, key words) were picked and labeled in terms of the type of NPIs, the frequency of appearance, and the prevailing event it was associated with to help track the socio-historical context of the discourse. The sub-themes of a discursive strand were also identified and categorized. The frequency of appearance of sub-themes and those which were emphasized more than others were established. The study was analyzed under the diachronic dimension to see how the subtopics (discourse planes and sectors) are distributed over the course of three months (93 days) which is also the same duration of the implementation of Bayanihan to Heal as One Act with the intention of

looking at how the comments posted by the public reflects a particular genesis, a historical a priori, or the diachronic dimension. At the end of this phase, the discursive knots or the entanglements were analyzed to see how one discursive strand of NPIs are mixed with another. The variety of the NPIs mentioned by the Filipino public in their comments are expected to be intertwined with other NPIs.

The Entanglement of Discursive Strands according to Jäger & Maier (2009, p. 47) is a significant shift in the discursive plane and provides new directions to the discursive formations and socio-cultural practices which adds to the significant findings of the study.

In Phase 1, the following terms served as guide to the structural analysis of the discourses identified for the study:

1. Discourse refers to an 'institutionalized way of talking [non-linguistically performed acting] that regulates and reinforces action and thereby exerts 'power.'
2. Discursive Event refers specifically to events that appear on the discourse planes of politics and the mass media intensively, extensively and for a prolonged period.
3. Text refers to the discourse fragments or the personal observation and description of spatial/architectural surroundings, and the kinds of social practices they engender which may include spatial arrangement, social practice, political discourse, expert discourse, social interaction, autobiographical accounts.
5. Discourse fragments refer to a text or part of a text that deals with a particular topic.

6. Discourse strands are the flows of discourse that center on a common topic, usually composed of several sub-topics and are concrete utterances (enunciations) or performances located on the surface of texts.
7. Discursive knot/entanglements are statements where several discourses are entangled such as a text addressing various topics to equal degrees, or of one text addressing mainly one topic and referring to other topics only in passing.
8. Collective symbols are the cultural stereotypes handed down and used collectively known to all members of the society.
9. Discourse position describes the ideological position from which subjects, including individuals, groups, and institutions, participate in and evaluate discourse.

PHASE 2: Detailed Analysis of Typical Discourse Fragments

In Phase 2, all the discourse fragments or texts on NPIs shared in the DOH's Facebook page posts were closely categorized analyzed in terms of its typicality such as typical collective symbols, typical illustrations, typical argumentations, and typical vocabulary (see Appendix B).

PHASE 3: Synoptic Analysis

In the synoptic analysis, a final assessment of the public's discourse position in the virtual public sphere of Facebook is made. For this purpose, the findings from the structural analysis and detailed analysis were interpreted and synthesized in relation and in comparison, with each other. Specifically, in this phase, the findings from the two previous analyses were further examined to determine the sentiments, notions and general opinion that emerged on NPIs, the socio-historical events that

allowed for the discourses and the socio-cultural practices that materialized in the virtual public sphere.

To process the Filipino's discourse into data, the fragments or texts were manually categorized and coded one by one using the functions and features of MS Excel. A template analysis which is a pragmatic approach to identify different levels of themes was employed throughout the three phases of analysis in the study. Instead of developing a full coding schema or codebook, the codes were identified based on the common themes that emerged. The coding was integrated as part of the process of analysis wherein the templates created were continuously revised and modified as new themes emerged mostly going through as many thematic levels as necessary to analyze the data (Brooks, et. al., 2015, p. 203). The sub-themes within the broader themes eventually materialized as the analysis of data proceeds. This aligns to the requirements set in Phase 1 or the analysis of the discourse strands (Jäger, 2001, p. 47) which includes an overarching discourse and can also be viewed as embedded sub-themes which is crucial as discourse strands rely on themes to establish the context or inferred meaning.

Table 1 shows the tabulated analytical process of the study illustrating the layout of the structural and textual analysis of the comments extracted from the Facebook page of the Department of Health (DOH).

Table 1

Analytical Matrix of the Study

Date:	1	2	3	4
Facebook Post/comments				
PHASE 1: DISCOURSE STRANDS				
1.1 Type of Non-pharmaceutical Intervention/s				
1.2 Socio-historical Context (Events/Issues)				
1.3 Theme				
1.3.1 Sub-theme				
1.4 Discursive Knot				
1.5 Ideological Position				
1.6 Discourse Sectors				
PHASE 2: DISCOURSE FRAGMENTS				
2.1 Collective Symbol				
2.2 Illustrations				
2.3 Arguments				
PHASE 3: SYNOPTIC ANALYSIS				
3.1 Discursive Formations				
3.2 Socio-historical events				
3.3 Socio-cultural practices				

Note: The table demonstrates the three phases of analysis following the Foucauldian-based Methodological Toolbox by Jager and Maier (2016).

Budget for the Study

Table 2 below details the budget for the study.

Table 2

Budget and expenses

Item Description	Quantity	Unit Cost	Total
Black Ink	4	600	2,400.00
Colored Ink	2	600	1,200.00
Long Bond Paper	2 reams	500	1,000.00
Short Bond Paper	3 reams	500	1,500.00
Photocopy		0.65	650.00
Internet Connection			7,000.00
Electricity			4,000.00
Hardbound			600.00
Editor's Fee			5,000.00
Contingency			5,000.00
TOTAL COST			Php 28, 350.00

Chapter V

RESULTS AND DISCUSSION

This study is drawn from the lens of Critical Discourse Analysis (CDA) specifically through the underpinnings of Foucauldian discourse analysis (FDA). The data analyzed are based on the context of the discursive practice of the public on non-pharmaceutical interventions and how public perception intersect with the socio-historical events caused by the COVID-19 pandemic and the public's ideological positions on protective behavior during the early months of the Covid-19 pandemic or from March 25, 2020 to June 25, 2020 or when Republic Act 11469 (Bayanihan to Heal as One Act) was enacted and implemented in the Philippines.

Situated in the virtual public sphere or social media specifically in the Department of Health's (DOH) Facebook page, the study draws on the prevailing social problem which is the COVID-19 pandemic and how the public through their comments discursively present their understanding of non-pharmaceutical interventions, their socio-historical and socio-cultural perspectives and the intertextual relations between their utterances that of the health institution which is the DOH. Following Foucault (1972) and Fairclough (2003), the study covers the social media texts (comments) on NPIs observed within a larger social context or relevant historical milieu.

In this chapter, the key findings obtained from the structural and textual analysis of the Filipino public's comments posted in the DOH Facebook cascades the discursive formations and positions on non-pharmaceutical interventions (NPIS)

through insights on the: (a) types of preferred NPIs; (b) socio-historical issues; (c) purpose of NPIs; (d) prevention considerations (e) emerging insights, (f) variations NPI practices; and (g) perspectives towards NPIs. Detailed analysis of the Covid-19 pandemic narratives also revealed the typical collective symbols used in the discourses, circumstances illustrating the NPIs, and sentiments. Finally, the emerging concepts are integrated through a synoptic analysis revealing the discursive formations, socio-historical events, and practices towards non-pharmaceutical interventions during the early months of the COVID-19 pandemic.

Discourse Strands on Non-pharmaceutical interventions (NPIs)

Table 3
Type of Preferred Non-pharmaceutical Interventions

Non-pharmaceutical Interventions Category	Frequency (n=465)	Percentage
Stay-at-home	284	61
Face Mask	75	16
Social Distancing	72	15
Handwashing	18	4
Mass Testing	13	3
Others (<i>Face Shield, Contact Tracing</i>)	3	1
Total	465	100%

Table 3 reveals the public’s preferred NPI wherein more than half of the comments posted in social media or 60% (277 highlighted the need to ‘stay-at-home’. It was followed by wearing of face mask (16%), social distancing (15%), handwashing (4%), mass testing (3%) and others (face shields, contact tracing) respectively.

Based on the discourse strands analyzed which were extracted from the Department of Health's daily press briefings and bulletins, notable public conviction on 'stay-at-home' intervention was prevalent in the first few months. This can be attributed to the issuance of a series of stay-at-home orders under Proclamation No. 929 which placed the whole Philippines under a state of public health emergency by President Rodrigo Duterte. As a result, the entire island of Luzon was immediately placed under Enhanced Community Quarantine (ECQ) from March 15, 2020. Later, the stay-at-home restrictions gradually lengthened and were extended to other regions in the country with varying degrees of strictness and restrictions based on the reported community-based transmissions ("Extension of enhanced community quarantine in the Philippines," 2020).

To mitigate the transmission of the COVID-19 virus, the stay-at-home orders were placed to encourage social distancing behavior (Lou, et. al, 2020, p.1). Previous studies on epidemic and pandemics acknowledge that the stay-at-home orders or household lockdowns have consequently helped reduce the rate of pandemic transmission (Anderson et al., 2020; Chen et al., 2020; Painter and Qiu, 2020; Prem et al., 2020, Lou et al., 2020, p.1, Wang, 2020, p. 18). In the Philippines, the stay-at-home or the lockdown measure was imposed in March 2020 when the number of cases started to increase.

Globally, a record of 162 countries issued "stay-at-home" orders ((UN Women et al., 2020, p. 19). According to Oxford COVID-19 Government Response Tracker, the governments around the world have distinctive policies and requirements of stay-at-home or household lockdown. Oxford classifications of Stay-at -home measure

are (1) no measures; (2) recommended not to leave the house; (3) required to not leave the house with exceptions for daily exercise, grocery shopping, and 'essential' trips; or (4) required to not leave the house with minimal exceptions (e.g. allowed to leave only once every few days, or only one person can leave at a time, etc.) ("Policy responses to the coronavirus pandemic - Statistics and research," 2021). Despite the sacrifices it entails, studies abroad revealed that there is a high prevalence of public adherence to stay-at-home orders as part of the social distancing policies (Czeisler, et. al, 2021, Tu, et. al, 2021).

In the Philippines during the same time, 84% of Filipinos were also convinced that strict stay-at-home measures during the pandemic is worth it especially if it will keep people protected and if it will prevent the transmission of the virus. In her report, Gita-Carlos (2020) shared that the findings from a Social Weather Station (SWS) special COVID mobile phone survey on May 4-10, 2020 reveal that majority of the Filipinos expressed compliance while 15% found the stay at home measure as burdensome and the remaining 1% as both worth it and burdensome.

The studies mentioned ascertain the observed view based on the utterances shared in the DOH Facebook page. The Filipinos varying reactions towards stay-at-home measures reveal the different realities and underlying beliefs regarding COVID-19 (Allcott et al., 2020), from political ideologies (Allcott et al., 2020; Painter and Qiu, 2020) or from sheer need. Although noticeable discourse fragments were aligned responsive to the Department of Health's (DOH) daily live virtual pressers in their Facebook page, some narratives of the Filipinos are reflective degrees of

opposition. There is evidently an understanding on the need for such measures wherein individuals expressed compliance are driven by their concern for their own safety, the healthcare workers, and the vulnerable members of the family. Those who are alarmed by the severity of the number of positive cases and deaths consistently increasing as reported by the DOH, found stay-at-home as worth it and relatively effective. In addition, the strong sense of responsibility and empathy to care for others or those who value health and safety are the most convinced towards stay-at-home measures. Likewise, individuals who have existing health conditions or are living with the vulnerable sector such as minor and senior citizens or those who have a sick member in the family are more willing to comply. Examples of the comments that exemplified views that echo stay-at-home intervention are:

- *The number of infected is very alarming. Please stay at home...keep safe everyone*
- *Staying at Home is the solution. Aside of saving lives it reduces or stop infected persons for testing, those positives for hospitalization also reducing patients to be taken cared by hospital doctors and nurses and thus relieving them of covid-19 and they can rest as they are already exhausted. Let us give them time to break and go home to their families (some of them are staying 24/7 in the hospitals). Please please let's diligently obey.*
- *PLEASE STAY AT HOME PEOPLE..DONT BE HARD HEADED!!
SAVE YOUR LIFE..PLEASE THINK ALL THE FRONTLINERS,
THEY'RE GIVING THEIR LIVES TO SAVE US..STAY AT HOME AND
PRAY ..PLEASE FOLLOW THE ECQ MANDATORY RULES.!*

Moreover, certain discourse fragments have revealed resistance voiced by socially and economically vulnerable individuals. Being a low-middle income country (LMIC) and with a population of 111 million and more (Philippines Population, 2021), the prevailing social and economic inequality and preconditions influence tendencies to argue that stay-at-home orders are restrictive, oppressive, burdensome and problematic affecting their work and non-work-related activities. The impact to stay-at-home intervention to poor individuals and families are generally precarious (Lou, et al., p.9. Martin, 2020). Compliance among the poor with no regular income was difficult and challenging because aside from the discomfort of being restricted to move, it disrupts and prevents them from being able to earn and provide for their families. For them, the idea of losing their livelihood cannot equate to the risk of being infected with the COVID-19 virus. The sample discourse fragments that emphasize why individuals are critical of the stay-at-home interventions:

- *Stay home and starve, no work no pay is not a good plan...*
- *How can we stay if we don't have food to eat there no choice for us but to work outside. ...good for those who can provide their daily needs even they are staying at home....*

Constructing non-pharmaceutical intervention from stay-at-home as object draws different degrees of attention which suggests that the public's discursive formations and socio-cultural practices are compelled by the policy on the Enhanced Community Quarantine and the intensive information shared by the health authorities particularly the Department of Health (DOH) which includes daily reports on number of COVID-19 positive cases. Based on this, there is a hegemonic perspective that

exists showing power granted to the Department of Health as the health authority dominates the information sharing on COVID 19. It is through discourse that individual psychology is granted to individuals to employ their unique styles and themes (Foucault, 1978b:17). The discourse is then able to capture the tendencies of individuals in the virtual public sphere to feel empowered and have the sense of becoming agents of health protective behavior because they can post comments and share health messages.

Following Foucault's *Archaeology of Knowledge*, this character of an "ordered system" which is constitutive of statements in the DOH Facebook page, are produced (diachronically) in an ongoing discursive stream, whereby the preceding statements build the stay-at-home practices (Pearce, 2014. p. 35). It was the ongoing situation and the government's practice of power, that is to influence and lead the public to believe and agree on the claim that stay-at-home as non-pharmaceutical intervention is credible and true. The discursive formation that emphasized staying at home as the main preferred non-pharmaceutical intervention is conceived and situated in a particular historical event where there is an extensive community lockdown in the country and elsewhere which forced a large number of the population to not only stay at home but to also work and study from home.

This suggests that social media platforms such as Facebook, Instagram, Twitter, YouTube, provides ways to conceptualize NPIs in tune to the times for contemporary audience. The public has turned to these valuable platforms for health and risk-based information and communication since they can delineate communication and coordination mechanisms specifically on health policies and

strategies that call for immediate voluntary compliance. Discursive formations that intend to shape individual protective behavior to mitigate risk such as stay-at-home requiring constant and repetitive exposure is more possible through social media.

Succeeding, stay-at-home intervention to mitigate the risk of COVID-19 is the high regard on the wearing of **face masks**. From the onset of the first confirmed COVID-19 case report in the Philippines reported by the Department of Health at the end of January 2020, fear of contacting the virus led to a public frenzy to purchase facemasks. Early health authority's advisory has set face masks or face covering as the best preventive measure to help reduce the human-to-human transmission of respiratory droplets when speaking and going outside. This and the uncertainties on COVID-19 in January prompted a massive demand for facemasks in the country and in other countries as well, thus, resulting to both shortage and overpricing. Public fear and anxiety of the pandemic created a global shortage of personal protective equipment, medical supplies, alcohol and face masks. These socio-historical events related to the COVID-19 pandemic along with revisions and modifications made on the policies and guidelines regarding risk-based public health standards for COVID-19 mitigation that details use of face masks have immensely shaped public knowledge and practice.

In this study, the episteme on the use of face masks can be mostly linked to the easing out of the community restrictions or the transition from a strict community quarantine to a more relaxed general community quarantine. The public's way of thinking and seeing risk mitigation is shifted from lockdown or stay-at-home

measures to wearing of face masks. In other words, people who need to go out may have such freedom under the condition that they are to wear face masks.

- *Guys please, always wear your face mask...*
- *OH if anyhow ECQ will be lifted soon, and people will be starting to go out for work, going to malls and restaurants, etc, can you please do a strict policy of face Mask wearing not voluntary but should be in a law that everybody, once will go out to their houses even buying stuff to the neighborhood, or visiting friends, everyone must wear facemask all the time. Because as you told this virus spread through a droplet, so if maybe all the people will have a strict compliance and force to wear mask outside their home, maybe we can lessen the contagion, no droplets falls on surfaces. No more much Worries that virus may flew on the air, (except for hospitals), less contagion and so on. #justmy opinion.*
- *Getting higher day by day... good luck to all of us starting tomorrow that we have a little bit of freedom to go out from GCQ to GCQ areas, i hope God protect all of us not to get infected, our FAITH must be bigger than our FEAR in order to go on in our daily routine. Do not forget to wear face mask every time you go out. #keepSafe #stayHealthy*

Related studies acknowledge that there is a moderate level of willingness to wear masks attributed to the individual's perceived vulnerability and understanding of the risks of being infected (Barr et al., 2008; Seale et al., 2020; & Lyu & Wehby, 2020).

Discourse fragments that illustrated observed violations of wearing of face masks shown below projects views on its importance in mitigating the transmission of the COVID-19 virus:

- *Mga kabayan magingat po tau ngayong GCQ napapasin ko po marami ang di nagamit ng face musk at nawawala na rin yong social distancing kapag nagpatuloy po ito ay ayos na ang buto buto (Fellow Filipinos, please stay now that we are observing the General Community Quarantine. I noticed many are not wearing face masks and observing social distancing. If this continues, you can expect worse).*
- *I drove by a group of 5 guys yesterday. There was no "social distancing" as they were all within 2 or 3 feet of one another. Also, only 2 of the 5 were wearing a mask. As I drove past this group so did the Barangay Patrol going in the opposite direction. They did absolutely nothing. What's the point of having social distancing and mask wearing requirements if there is no enforcement?? Sadly, these 5 guys may be going home to aging parents or grandparents who then become innocent victims of the virus. 🙄*

While face masks have been the initial safety preventive measure, the government's changing advisory and issues on shortage of mask supplies along with

other medical supplies in the market may have affected public compliance. Non-compliant individuals present a less alarmed perspective on the risks of COVID-19 and its transmission to other members in the community. Other issues that relate to face masks compliance or non-compliance include which type to use, availability of supplies, breathability or comfort and efficacy. Discourse fragment depicts the idea that despite the public's awareness and understanding of the purpose of wearing face masks in the context of the COVID-19 pandemic, the choice to comply remains a challenge.

The use of face masks according to the WHO (2020c) must be seen as ad-hoc for situations where social distancing could not be maintained or observed. Face mask is by itself an insufficient protection, thus, must be observed with other NPIs such as hand hygiene and physical distancing. Succeeding policies have eventually required the use of face shield to enhance the use of face masks as a minimum requirement for travel and access to establishments.

- *Pati mga mask walang mabili na paano po kami mag iingat kung wala mga yun (We don't know where to buy face masks. How can we protect ourselves without the masks).*
- *Sana maging mandatory na ang masks pwede lang naman magtahi e. Mas walang droplets kung may mask (I hope they make the use of face masks mandatory. It's easy to sew one. Masks can prevent droplets).*

Communicating with the public on the importance of wearing of face mask as a non-pharmaceutical intervention requires both clarity and consistency of policies and strict enforcement. Consistent with the recommendations set by the World

Health Organization, the public's discourse on face masks sees the need for decision and policy makers to apply risk-based approaches to encourage stronger compliance which highlights messages on the purpose of mask use, risk of exposure to COVID-19 virus, vulnerability of the individual and others in the community, availability and alternatives of masks, and types of masks (surgical versus non-surgical).

Table 3 reveals that Filipinos are generally not keen to **social distancing or physical distancing**. Apparently, the weak appeal of social distancing as a long-established public health tool that reduce opportunities for an infectious agent to spread among individuals and the overall speed of transmission (Caley, Philp, & Mccracken, 2007; Zhang, Jiang, Yuan, & Tao, 2020) may be attributed to the fact that millions of Filipinos are living in cramped spaces, or overly populated communities. Early reports issued by the Philippine National Police (PNP) showed thousands of individuals across the country violating the guidelines of the enhanced community quarantine implementation from March 17 to March 30 (Bajo, 2020). Authorities and volunteers continue to deal with individuals who disregard the guidelines on social distancing. Another reason could be associated with the notion of social differentiation or the predisposition to interaction with other social group or social classes (David, 2020).

In his newspaper column, David (2020) argued that the term "social" is primarily equated with face-to-face interaction. Due to the pandemic however, the term "social distancing" was assigned by scientists and public health specialists to indicate the need to avoid physical closeness and social gatherings during an

infectious disease outbreak. Eventually, on March 20, in a press briefing, WHO epidemiologist Dr. Maria Kerkhove issued a statement recommending the use of "physical distance" instead of social distancing, to reiterate the importance of mental health and of staying connected (Bueza, 2020).

Although hand hygiene or handwashing is considered as an effective, convenient, and cost-efficient means to prevent the transmission of COVID-19 virus (WHO and UNICEF, 2020), social media discourse demonstrates weak engagement to it. However, it can be noted that the practice of handwashing is strongly associated or complemented with one or more of the other non-pharmaceutical interventions.

Based on the discourse fragments analyzed, emphasis on the handwashing together with the other NPIs suggest an existing support and awareness to the importance of cleanliness and disinfection to prevent virus transmission as seen in the sample comments:

- *Very Great news!!! We need to keep this up. Next step, infection rate must decrease and must be lower than the recovery rate. That way, we can start to flatten the curve. It can only be achieved when we stay home, maintain physical distancing, and do proper hand hygiene.*



- *New cases added everyday under 3 digits. Seems situation still at high risk level. Lifting ECQ mid this month need proper and thorough*

review. Everyone should have a better understanding now about awareness. Let us all follow the standard protocol set by our government. Stay at home, Observed Social Distancing, Maintain Proper Handwashing, Apply Disinfectant or Alcohol and Always Wear Face Mask for Protection.

- Keep social distancing and hand washing... we can do this
 let's focus in lowering the cases by being a responsible citizen.... we will flatten the curve...

People's belief and confidence of the observance of hand hygiene, handwashing or disinfection are to be continuously reinforced by strong implementation of health guidelines that require establishments to provide alcohols and disinfectants. Risk communication is vital in ensuring continuous promotion of such health protective behaviors to emphasize, establish and strengthen obedience and discipline on hygiene practices, behaviors and measures.

Preferences of non-pharmaceutical intervention is seen in the context of both health safety behaviors and risk mitigation measures. The overall discourse reveals a strong and clear association to being responsible for one's health and that of others through a variety of non-pharmaceutical interventions. Individuals were likely to express a relative degree of freedom to choose their preferences while at the same time encourages others to adhere as well. The public's different interpretations, practices and weighing of the NPIs as well as the power to say no are according to Foucault deployed as systems of thought that were conceptualized as rules, practices and procedures. Knowledge in this case is formed as a matter of

the social, historical and political conditions under which statement come to count as true or false (McHoul & Grace, 1993, p. 29). Through the establishment of societal perception that stay-at-home, use of face mask, social distancing, and handwashing are normal, ethical and moral practices to mitigate the risks of COVID-19 transmission, Foucault's notion of power that is positive and productive can be observed. Although there is an existing traditional power that is forceful, repressive, and controlling present in the Department of Health's risk-based public health standard for COVID-19 mitigation restrictions and policies, the public's discourse suggests a diffused but enlightened expression of discourse positions through their comments, reasons and their personal autonomy to adopt preferred NPIs. The positive and productive nature of power is, thus, enacted through the ways in which individuals examine, express and regulate their own thoughts and behavior on safety in accordance with the non-pharmaceutical interventions. By 'positivity,' Foucault explains that discourses are 'practices linked to certain conditions, obedient to certain rules, and susceptible to certain transformations' (1978b:25).

The study uncovered that the public's discursive formations or epistemes on NPIs were propelled as truths from different points of history during the early months of the COVID-19 pandemic. The Foucauldian analysis help provide insights on how institutions, in this case, the Department of Health manages to draw public support, obedience and discipline in the observance of stay-at-home, use of face masks, social distancing and handwashing.

Risk communication strategies must therefore be continuously updated and repeatedly delivered to the public to establish a sense of normality and to address

the gap of compliance among those people who are more at risk of infection in the communities. Wood et. al, (2011) suggests that involvement of community members is equally helpful in communicating preparedness messages because they tend to share what they have done to guard others against risks. Authorities may consider information dissemination and engagements with the public by tapping social networking sites other than Facebook such as Twitter, Instagram, Youtube and messaging apps such as Viber, WeChat, Facebook messenger and the like. Communicating that sense of normality would require authorities, specifically the Department of Health (DOH), to repeatedly point out that the most cost efficient, effective, normal ethical and moral measure for individuals and communities to prevent the transmission of the COVID-19 virus and to increase physical and mental resilience, reduce contact and reduce duration of infection is strict observance of the non-pharmaceutical interventions.

Socio-historical Issues Associated to the Non-pharmaceutical Interventions

Table 4
Socio-historical Issues associated with the NPIs

Category	Frequency	
	(n=465)	Percentage
Increasing New Cases	256	55
Isolation	65	14
NPIs/health safety standards	46	10
Recoveries	28	6
Death	13	3
Testing	12	3
Violations	12	3
Policy Implementation	9	2
Safety of Frontliners	7	2
Availability of Supplies	6	1
Report accuracy	5	1
Employment Concerns	3	1
Vaccine/Cure	2	0
Subsidy distribution (SAP)	1	0
Total	465	100

Table 4 presents that from the 465 discourse fragments or texts analyzed, 256 (55%) of the comments were based on the increase of confirmed new Covid-19 cases in the country. This reveal that the Filipino public has become even more concerned and is closely monitoring the trends or the daily situational reports of the Department of Health (DOH). This study saw both the increase in cases and testing capacity of determining the community transmission of the virus in the country. When the study began on March 25, 2020, DOH COVID-19 Case Bulletin #011 has only reported 84 new cases which totaled to only 636 total cases. By June 25, 2020, DOH Case Bulletin #103 reported that the total number of COVID-19 cases was already at 33,069 from 49 licensed RT-PCR testing laboratories.

The increase in the testing capacity revealed more and more new cases daily. Although reports of recoveries are also shared, the public is alarmed by the rise of positive cases and deaths in the country. Here are some of the comments shared on the spread of the Covid-19 virus in the Philippines:

- *Marami na kasi sila natetest ngayon kaya dumarami rin ung confirmed cases. Let's stay at home as much as possible para mabawasan din un community transmission... 🙏🙏🙏
[The increase in their testing capacity leads to increase in the number of confirmed cases. Let's stay at home as much as possible to help reduce community transmission]*
- *Grabe yung 3000 Na yan pdeng MAG double or triple or more...[The situation is severe already with 3,000 cases which can double or triple or more]*
- *The case goes higher and higher. Sana Stay at Home lang talaga. [hopefully, people will just stay at home]. Hope everyone would follow what our president tells us to avoid contamination of the said covid-19 virus. Help us God 🙏*

The uncertainties caused by the pandemic has built the interest on being informed through monitoring of the number of new cases, recoveries, deaths, and active cases. Individual thoughts on the non-pharmaceutical interventions are responses to more specific issues that represent the impact of COVID-19 pandemic.

Looking from a Foucauldian analysis, discourses on the NPIs navigated specifically around relatively well-bounded areas of social knowledge of health safety and prevention strategies against COVID-19 infection. The history of NPIs can be

traced back more than a century ago against an equally fatal and unprecedented influenza pandemic in 1918 with 50–100 million deaths worldwide. Recurrence of pandemic is highly unavoidable and is to be expected as outbreaks are nearly constant, though not every outbreak reaches pandemic level as COVID-19 has (LePan, 2020). Researchers agree that sustained and layered non-pharmaceutical interventions remain to be the most feasible method to decrease disease transmission until vaccine and medications for prophylaxis and treatment become available (Markel et al., 2006, Zamir et al., 2020).

In reference to the data, people in social media recognized NPIs in certain specific ways based on the given historical period or socio-historical events. Perspectives on NPIs in the Covid-19 pandemic are bounded within specific realities and occurrences that is limited or bounded by historical limits of the times, Thus, discourse on NPIs in the COVID-19 pandemic is not a continuation of the NPIs of the previous pandemics. Foucault explains that such historically specific discourses (for example, medicine in the nineteenth century) are quite distinct from one another as well as from earlier and later forms of 'themselves' which may or may not have the same label or name are discontinuous. Moreover, this research confirms the overlapping and intersecting discourses on varied issues and realities which are traced to both complex comings-together and departures from the NPIs.

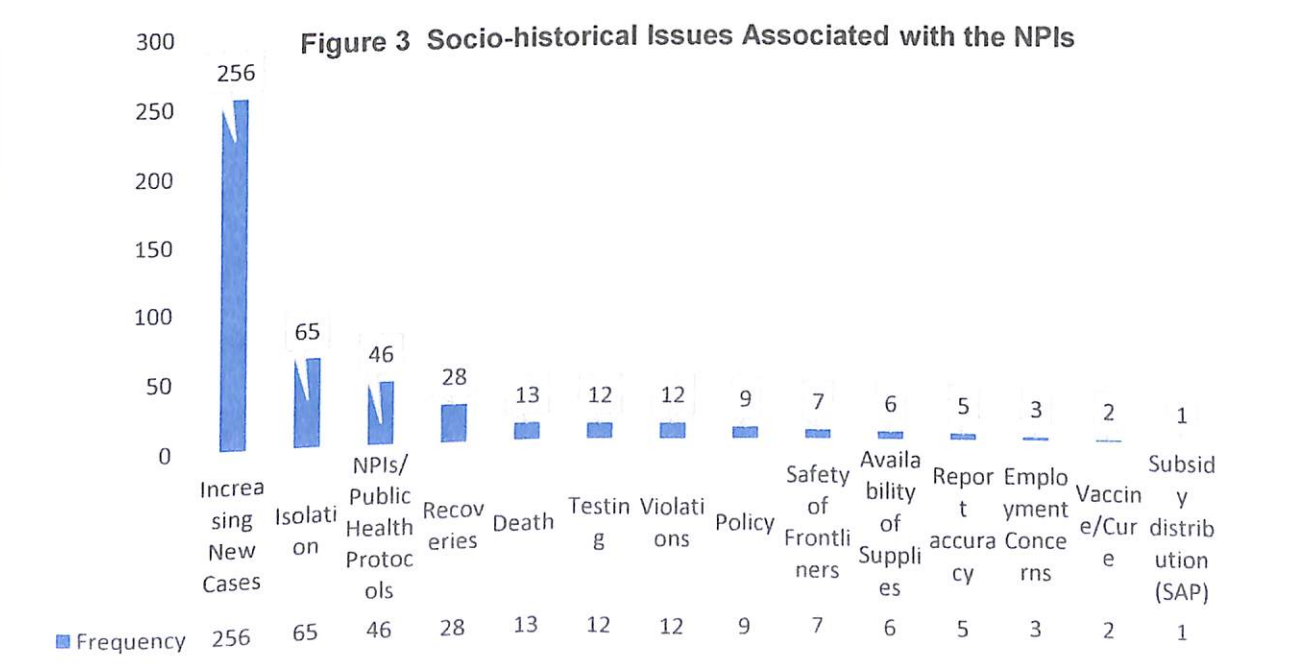
In other words, epistemes, or the discursive formations on NPIs are established on the reflections and refractions of real historical formations such as politics, economy and cultural realities that grab the person's attention.

Staying updated by monitoring the daily situational reports of the DOH accords individual's awareness of the state of the country as it faces the COVID-19 health crisis. To ensure that stakeholders are well-guided, health communicators take on the task of providing transparency, accuracy, and regularity of reporting as an integral part of any crisis communication. The public needs to know and understand whether cases are the same, accelerating or decreasing ("Philippines: Coronavirus pandemic country profile," 2021) so they can avoid and prevent the spread of COVID-19. In a press release, the Department of Health (2020), emphasized that the daily case bulletins aim to communicate data to the public to maintain transparency, keep them more informed and empowered and reduce the fear, panic, and anxiety during the health crisis.

During the COVID-19 pandemic, the power to communicate safety, health goods and services is seen from the perspective of the Department of Health (DOH) through its many platforms. Being the main health institution that manages information dissemination and health guidelines, DOH can directly influence and direct the Filipino beliefs, actions and behaviors to mitigate the risks and transmission of COVID-19 virus. Through its official Facebook page that was created in September 2010, DOH projects an institutionalized power and control via social media as the principal health agency in the Philippines. Moreover, DOH is mandated by the law to protect and promote the right to health of the Filipinos making it even more capable of influencing and enforcing public compliance. The kind of traditional power that is centralized is evident in this case as DOH takes on the responsibility of ensuring access to basic public health services to all Filipinos as the country's health institution.

In addition to the power that emanates from DOH, another form of power that is formed from the ongoing public discourse is built. Power that perpetuates from the individual discourse on NPIs highlights the normative nature of power where there is neither good nor bad, right or wrong. Formed from the people's diverse perspectives of the NPIs to mitigate the risks of COVID-19 virus shared in the DOH Facebook page, power acts and is enacted upon the individual comments. The people's exercise of power is constantly producing a new set of knowledge that normalizes NPIs in response to the ongoing historical events because of the pandemic.

Having an effective health risk communication requires information about risk and exposure assessment (de Bruin et al., 2007). Moreover, Rouse (2018) includes risk acceptance and risk transfer as risk mitigation strategies that tap into individual protective behaviors during the pandemic which would mean encouraging people to accept the idea of observing non-pharmaceutical interventions for a given period. By making the public aware of their capacity to help protect themselves and others, individuals have embraced compliance to the NPIs (Ning, et. al, 2020; Seale, et. al, 2020).



Following the data illustrated in Figure 3, it can be noted that aside from the reported new cases, the public followed other ongoing social, political, and economic issues. Fourteen percent (65) of the discourses dealt with isolation, 10% (46) on adherence to the non-pharmaceutical interventions or public health standards, 6% (28) on recoveries, 3% (13) on death, recoveries, and violations. 2% (8) on policy and safety of frontliners, and the remaining 1% indicated issues on availability of supplies, accuracy in reporting of cases, employment concerns, availability of a vaccine or cure lastly is the financial aid or the social amelioration program (SAP) of the government.

The data revealed existing consistencies and diversity in the discourse of the NPIs in the beginning of the pandemic. Half of the discourses carried similar notions on adherence while the remaining discourses dealt with other issues linked to the imposed total lockdown in Luzon or the Enhanced Community Quarantine (ECQ) that was purposely implemented to minimize impact of the pandemic. Van Dijk (1998) explains that the expression in discourse is the obvious fact that a person belongs to different groups and hence may share different ideas on specific historical events. Differences in the discourse of individuals and subgroups of the population in social media are enmeshed in their realities and experiences during the pandemic. Based on Lessa's (2006) summary of Foucault's definition of discourse, it is expected that discourse may construct idea, attitudes, course of actions, beliefs and practices based on the world of which they speak (p. 3). Likewise, Foucault (2002) argued that a given discourse will likely express a truth or valid knowledge that is based on the discourse of a particular moment in history. Discourse shapes and enables social reality, which means that it is not a mere ideology but how reality is

brought into being by human beings, individuals, collectives or the “subjects/actors” (Jäger & Maier, 2016, p. 2).

The discursive formations (knowledge and power) of the public during the implementation of the Enhanced Community Quarantine (ECQ) in March 2020 were different for each one but are similar in their objective which echo the desire to prevent the transmission and risks of COVID-19. Primarily, knowledge is constructed from how the public sees, interprets and experiences ongoing uncertainties caused by the Covid-19 pandemic. Discourse formation or knowledge formed on NPIs intersects with the notion of prevention and how the existing health crisis may be resolved. The findings further affirm the reciprocal relation of power and knowledge (Foucault, 1980; p. 98), that is likened to an ideology which is evident in the discourse analysis made on NPIs in this study. The formed ideology of the Filipinos on NPIs as prevention strategy also translates to the power that shapes realities on public health behavior and by doing so is constructing the practice of NPIs new normal.

Looking at NPIs from Foucault’s perspective, ideas such the non-pharmaceutical interventions must not only be seen as logical and reasonable but also historically contingent. Foucault suggests that discerning on NPI epistemes requires a close examination and understanding of the events “that have led us to constitute ourselves and to recognize ourselves as subjects of what we are doing, thinking, saying” (Foucault, 1984c, p.45). Each period in history or the present may have corresponding structure of thought or world view, an episteme.

An episteme being something like a worldview, a slice of history common to all branches of knowledge, which imposes on each one the same norms and

postulates, a general stage of reason, a certain structure of thought that the men [sic] of a particular period cannot escape (Foucault, 1972, p. 191).

The episteme which is referred to in this study as the discursive formations on NPIs illustrates how the public can discover and see staying at home, face masks, social distancing and handwashing as risk mitigation strategies to prevent transmission of COVID-19 virus. It further grants the historical contingencies which allowed individuals see NPI as logical and unreasonable or to shift preferences and favor one over the other. Foucault argues that epistemes that reflect what society is thinking are not to be seen as static but instead as evolving over time. As observed from the discourse fragments sampled in this study, discursive formations on NPIs are evolving and dynamic which allows individual flexibility and develop self-discipline. There are clear implications of a diffused type of power and existing power relations that shape knowledge and guides institutions and individuals in navigating through the COVID-19 pandemic. It marks how one gets to decide which NPI to conform to be able to fit in. Foucault's 'Genealogy' is explicitly interested in how changes in the society's way of thinking might relate to its change in power relations. The same perspective acknowledges the possibility of a reverse discourse where individuals are given the opportunity to view NPIs from different points which shows the degree of empowerment. This means that there is a much broader view that can emerge and that echoes NPIs.

Risk communication strategies must consider the historical context of the risks, the structure of the messages and information and the tendencies of individuals to become active purveyors of knowledge and power or ideologies in

social media. Risk communication is a two-way, multidirectional communication and engagement in the COVID-19 pandemic.

Purpose of Non-pharmaceutical Interventions

Table 5
Perceived purpose of NPIs

Category	Frequency	%
Prevention	443	95
Detection	20	4
Treatment	2	1
Total	465	100

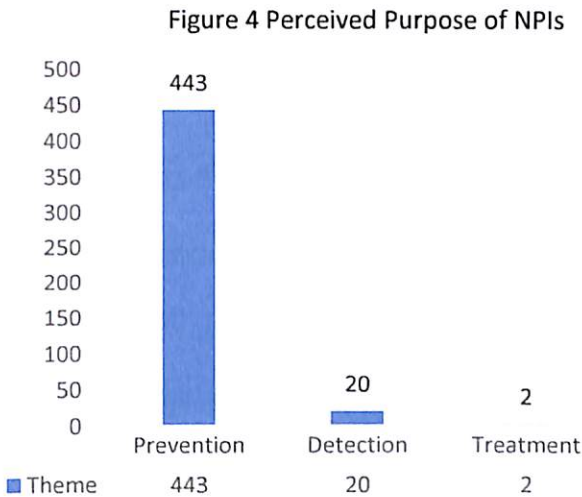


Table 5 and Figure 4 details that almost all or 95% (456) of the discourse fragments centered on prevention. While there are a few comments about detection (4%) and (1%) on treatment, the public saw the severity of the pandemic, the seriousness of flattening the curve and the urgency of mitigating the transmission of Covid-19 virus. The intention to support is highly evident in the discourse on the observance of non-pharmaceutical interventions as minimum public health standards (Administrative Order 2020-0015) issued by DOH on April 27, 2020. The NPIs were set as the initial viable cure to prevent the transmission of Covid 19 virus and the basis for both the decision making and sectoral policy in response to the pandemic (DOH, 2020).

Prevention Considerations

Preventive strategies remain the best way of handling the pandemic (Lotfi et al., 2020, Alyami et al., 2020). Miranda (2020) explains that the unavailability of effective vaccines and fully tested antiviral drugs in 2020, have created then an urgent need to develop alternative strategies for COVID-19. In the same way, the World Health Organization (2020) continue to emphasize to all countries the need to implement all necessary measures to prevent further spread of COVID-19, especially among the vulnerable members of the population. In one of its reports, the WHO (2020a) highlights the use of a mask and other measures to be adopted. The WHO (2020a) advises that each country should apply their own risk-based approach when recommending different increasing tiers of NPIs including restrictive lockdowns, which also inflicts significant economic hardship on societies (Rowan & Galanakis, 2020, Rowan & Moral 2021).

Detection and Isolation which are specific strategies to reduce the duration of infection have also caught the attention of some. Experts who were raising against time relied on the detection to gather evidence about the nature and transmissibility of the virus. Doctors and scientists have combined findings to provide not only quick diagnosis but also determine those who are more at risk. Detection can guide the work in discovering novel treatments for the virus.

During public health emergencies, people need to know what health risks they face and what actions they can take to protect their lives and health (WHO, 2017). Thus, governments must act swiftly to communicate crisis information effectively and efficiently to members of the public; failure to do so will inevitably lead citizens to

become fearful, uncertain, and anxious in the prevailing conditions (Chen et al., 2020). Risk communication is now challenged to not only respond to the crisis but to restore a sense of normality in the aftermath as well (Lachlan, 2010).

Emerging Purposes and Insights of Non-pharmaceutical Interventions

The following presentation and discussion cover the emerging subthemes that were formed from the three major themes of the discourse strands being studied. Foucault [1972] explains that subgroups of statements within “themes” are used to manipulate their objects and concepts imposing that regardless of the level of coherency of the discourse, it is the core of that discourse, its discursive formation that generates themes or theories. Consequently, further analysis of the discourse strands conveyed three main discursive formations and several cognitions on the non-pharmaceutical interventions.

Table 6
Purposes and Insights of Non-pharmaceutical Interventions (NPIs)

Purpose	Insight	Frequency (n=443)	%
Prevention	Compliance to NPIs	224	51
	Non-compliance to NPIs	66	15
	Flatten the curve to save lives	39	11
	Being safe	38	9
	Policy implementation	33	7
	Pray	13	3
	Isolate	12	3
	Struggles (money, food, work, mental health, transportation)	10	2
		(n=20)	%
Detection	Testing	13	65
	Contact Tracing	3	15
	Transparency and accuracy of report	3	15
	Accurate Testing kits	1	5
		(n=2)	%
Treatment	Cure	1	50
	No available medicine	1	50
Total		465	

Shown in Table 6 are the public's dispositions bent towards prevention which are: compliance (51%), non-compliance or violations (15%), flattening the curve to help frontliners and healthcare workers (11%), being safe (9%), policy implementation (7%), need for prayers (3%), isolate (3%), and struggles on money, work, food, mental health, and transportation (2%). These imply that the Filipinos are aware of the health risks of Covid-19 virus but are still looking at non-pharmaceutical intervention from different points of view and circumstances.

Although individuals are constrained to comply with the NPIs, fragments on observed **violations** are in some ways attributed to struggles on employment, poverty, mental health issues and limited public transportation which have emerged as consequences of enforcing the NPIs. Expressed dissonance emanates from observed non-compliance and violations of other individuals which in some ways represent ongoing resistance to the implementation of NPIs. Discourse shows that NPIs as preventive behavior is synonymous to voluntary compliance. Violators of NPIs who have been negatively marked as irresponsible, undisciplined, or uncaring, on the other hand are justifying their actions to be the result of economic related issues.

Drawing upon Foucault's knowledge as archaeology, Bacchi (2009) suggests that the disparity in the discourse on NPIs as preventive practices exposes the thoughts that lie behind the specific issues created by the COVID-19 pandemic (p. 5). The focus is not on what the comments mean but on how they came to be. For instance, comments on prevention were anchored on issues such as adherence and non-adherence to NPIs, policies, support for healthcare worker, saving lives and

difficulties experienced from the restrictions. For instance, the sample fragment below is activated from the different angles of the COVID-19 health crisis at that time.

This presents how discursive formation (knowledge) on NPIs is formed as knowledge truths and as discursive practices:

- *Although the growing number of confirmed cases has not decreased consistently, there are more recoveries than deaths, which is a significant improvement for a developing country. However, it's still sad to see reported fatalities/deaths. One of the few things left to do now to strengthen the preventive measures is to reduce those growing number of cases. We can accomplish this by sanitizing frequently (take a bath, wash your hands) and staying at home unless there is an urgent need to replenish our supplies or go outside for important appointments. Salute to all frontliners, backliners, volunteers, etc. Hope they're still doing healthy and safe. Now let's do our part by not becoming a burden to them.*

According to Young (2001), discourses are likely to be fragmented, dispersed, incomplete and contradictory that speaks of different objects, opinions that lead to contradicting choices (pp. 403-404). Instead of a blueprint, discourse practices are mutable and interactive presentation of discourses.

Below are additional sample fragments that show dispersed and interactive dispositions on the call for prevention which speaks about NPIs from varying standpoints:

- *Please naman po makinig po tayo sa program ng gobyerno stay at home [Please, let us listen and comply to the advice and program of the government to stay at home]*
- *The only medicine found now is Stay Home*
- *The number of infected is very alarming..please stay at home...keep safe everyone*
- *Everyone wants to be saved from this pandemic... but there are people who wants to be saved, but not doing anything to avoid being contacted...still not listening and not staying at home...not helping the government to practice precautionary measures...and yet, so noisy about ranting against the government....my fellowmen, when are we going to have discipline????*
- *Self-discipline, stay at home is badly needed. Stay safe and continue to pray that God Almighty will touch our land for the healing.*

Public discourse on NPIs articulated an assortment of discursive formations situated from issues and situations that emerged from the COVID-19 pandemic. The uncertainties due to the limited knowledge about the transmissibility, the absence of cure, vaccine or direct treatment for COVID-19 has directed governments and health authorities to rely on NPIs as health protective behaviors that people can do to prevent the spread of infection. Based on the DOH health guidelines, NPIs are public health measures that do not involve vaccines, medications or other pharmaceutical interventions, that individuals and communities can carry out in order to reduce transmission rates, contact rates, and the duration of infectiousness of

individuals in the population (DOH, 2020). Set as the minimum public health standards, the public are advised to adhere to physical distancing, hand hygiene, cough etiquette, and wearing of masks among others across all settings, regardless of severity of risk.

Public discourse sampled in this study identified three major standpoints that materialized in response to the NPI strategies to prevent further transmission of COVID-19 virus which are prevention, detection, and treatment.

It can be noted from the discourse fragments analyzed that the extent of public acceptance and claims of truth on the NPIs manifest different points of the ongoing history of the COVID-19 pandemic. What is therefore acceptable and true depends mainly on what the public counts as true as seen in the discourse fragments in social media. Adoption of desired public safety behavior that adheres to the NPI measures depicts varying degrees of concordances, disagreement, cooperation and synergy.

Taking on the notion that power is discipline and punishment, translates to tendencies that results to obedience which in the case of NPIs are instilled through restrictions and routine. Diffused rather than centralized, power that is also knowledge are structures of thought influenced by the routines which in some ways encourages an individual to work on themselves internally, by themselves and to oneself. The DOH health communication efforts, strategies and campaigns have forced the public to behave and discipline themselves. Foucault suggests that people tend to internalize the ways of thinking that is gained from routine which turns them

to confirming individuals. Furthermore, the presence of a diffused type of power that is frequently observed from the discourse of the public in the DOH Facebook page allowed a relative degree of empowerment, instilled to the public whereby regulating compliance to the NPIs turns to a personalized decision.

Constructs such as 'flatten the curve', 'being safe', 'lockdowns', 'quarantines,' 'praying,' and 'enforcement of policies' appeared as other sub-themes relating to strict compliance to the NPIs. Following the DOH daily press briefings and daily bulletins, the public is granted access to COVID-19 related reports that include updates on cases, deaths, recoveries, isolation and ICU hospital bed capacities, availability of mechanical facilities, testing laboratory status and donations of medical supplies made. Later, information on recruitments of healthcare workers and interviews with experts have been added. The live daily virtual press briefings that are delivered by DOH Undersecretary Dr. Maria Rosario Vergeire also provide answers to questions posted by the public. Although the interaction is limited, the virtual press briefings are communication efforts to address concerns and combat disinformation.

To illustrate clearly, here are some of the information communicated in the DOH live Facebook daily press briefings:

- *DOH has distributed test kits that can perform 14,700 tests kits. As of March 30, there have been 15,337 test conducted, where 2,388 have tested positive while 11,129 came out negative the rest are 1,230 are equivocal results.*

- *As of 4PM today, June 10, 2020, the Department of Health reports the total number of COVID-19 cases at 23,732.*
- *In addition to the 452 fresh cases, 288 late cases were also reported today. Today's fresh cases are based on the daily accomplishment reports submitted by only 47 out of 54 current operational labs.*
- *DOH likewise announces 159 recoveries. This brings the total number of recoveries to 4,895.*
- *There are 42 RT-PCR licensed laboratories and 120 pending laboratory applications.*
- *There are 13, 578 total bed capacity and 1, 957 mechanical ventilators available.*

Individual discursive positions on NPIs are enmeshed with the DOH daily reports and updates on the overall health situation in the country. The public's growing concern towards prevention is subsumed under the ideas of flattening the curve', 'being safe', 'lockdowns', 'quarantines,' 'praying,' and 'enforcement of policies' as mentioned earlier in this paper. Ongoing expression of uncertainty, concern and empathy are observed.

Described primarily as the means of spreading out the number of new coronavirus cases over a long period of time to prevent hospitals and healthcare workers (HCWs) from being overwhelmed, '**flattening the curve**' also emphasizes the fact that people can have better access to the health care system if transmission of the virus is mitigated (CNN Philippines, 2020). NPIs being positioned suggests increasing concern to 'flatten the curve' and an understanding that non-

pharmaceutical interventions such as staying-at-home, hand hygiene, social distancing and wearing of masks are the only viable means to help the Philippines in its fight against COVID-19. The public's awareness on the plight of the healthcare workers and the limitations of the healthcare system in the country are encouraging many individuals to observe the prescribed NPI measure.

Examples which illustrate the discursive positions associated with flattening the curve in relation to prevention are:

- *Sad. We're not flattening the curve the best medication that we have right now is our behavior. The more we stay home, the more we gonna help each and everyone to get back in shape.*
- *Let us STAY AT HOME TO AVOID SPREADING THE VIRUS AND FLATTENED THE CURVE.*

Another central aspect of the discourse positions is the predominance of **staying safe**. Filipinos generally puts value on safety and well-being of each other. It was observed that the phrase "stay safe" has become a cautionary response for many in the comments they posted in the DOH Facebook page. NPIs have been a rationalized intent to wish others to be free from COVID-19 or be healthy and well during the pandemic.

- *Based on my observation and analysis that majority of the Covid patient was died because of their preexisting comorbidities. Not just the virus. But we still need to stay at home and impost the social distancing into action in order to free ourselves from this lethally spreading disease. Stay safe and stay hopeful!*
- *Stay home stay safe.*

- *Do what the DOH instruction to all people, we must obey, to lesser the spread of corona, stay home, stay safe, God bless to all of us!!!*

With regard to **lockdowns and quarantine**, discourse position reveals divergent views between resumption of economic activity or continuing the lockdown in some form. The public is more interested to know when the lockdown is going to end. According to Hapal (2021), the Philippine's response to COVID-19 has been described as one of the longest and strictest lockdowns in the world. President Rodrigo Duterte's enhanced community quarantine orders (ECQ) have confined millions of Filipinos inside their homes. As an intrusive form of the social distancing and movement-restriction measures or NPI, lockdown, quarantine and stay-at-home measures were proven to be highly effective but at the same time is substantially damaging to society, the economy and human rights (Huag, et al., 2020; Vardoulakis, et al., 2020).

Disparities in assessing the effectiveness of the region-wide lockdown in the country have also revealed and magnified the gap between the rich and the poor. Extending the lockdown further is extremely hard on the poor and vulnerable sector. According to Huag (2020), effectiveness of NPIs remains dependent on the local context (combination of socio-economic features and NPIs already adopted) to varying degrees. What is clear in the discourse is that the lockdowns are too restricting and anti-poor. The perspectives that situate frustrations toward the lockdowns or the stay-at-home orders are redirected on appeals for compliance and discipline for the lockdown restrictions to end.

- *More lockdown its will be worse if everybody will free to go outside ..this result is very bad coz for more than a month now all is under ECQ but everyday its increases people infected ..pls be cooperate stay home ..stay home*
- *The outcome of lockdown is worse than having the virus, these causes mental health, frustration and low moral to an individual, if the person having a slight cough or sneezing 🚫 please be tested and stay home and mostly personal hygiene and social distancing*
- *...you cannot stop the virus let it run its course healthy people will not die old and those with medical stay home the lockdown will kill more people than the virus*

The health authority's reliance on NPI measures and individual behavior change, have situated the locus of control within the individual, failing to account for the contexts in which people are expected to enact the behaviors recommended in health promotion interventions (McMahon, 2021, p. 92). Attempts to empower the public towards health protective behavior to curb transmission of COVID-19 virus have highlighted the health and economic inequalities. The compliance to NPIs that is supposed to situate the locus of control within the individual has failed to account for the contexts in which people are expected to enact the behaviors recommended in health promotion interventions. Drake and Gahagan (2015) claim that the role of power imbalances in undermining health promotion interventions are premised on weak theorization of empowerment. To illustrate this point, individuals who watched the DOH virtual presser and became aware of the COVID-19 situation may feel empowered and compliant for being equipped with the knowledge and information acquired from the DOH Facebook page. But they may eventually feel less empowered after stepping out of the virtual public sphere and will have to start interacting with others who are noncompliant to the observance of the NPIs.

Known for their strong religious faith, the Filipinos' strong spiritual convictions have complemented the insights on NPIs as prevention strategies. Discourse strands that expressed NPIs with the **need to pray** and trust in God have been encountered frequently in this study. Several discourses have emphasized the importance and need to 'pray' while staying-at-home, observing social distancing, wearing face masks, and practicing handwashing.

- *The solution is to follow the government guidelines, Wear mask, observed social distance , Practice proper hygiene, Most of all **pray** to the Almighty God for protection and guidance*
- *LORD 🙏🙏 thank you 301 recoveries hope lower the confirmed cases or zero also casualties GOD BLESS ALL 🙏🙏🙏 please stay at home wash hand facemask 1m distance and **pray** 🙏🙏*
- *Everybody must ALL STAY HOME and **pray** that there will be NO NEW CASES...additional covid-19 cases mean more deaths because we can't expect 100% recoveries until there is already a cure or vaccine...*
- *It's a good sign that the number of recoveries are slowly picking up.. Let's pray for more recoveries in the coming days.. Let's help by staying home..*

With the Philippines being frequented by typhoons, floods and other forms of risks and calamities, Filipinos have constantly relied on the belief that there is God who will allow them to recover (Balano, 2019, Ang & Diaz, n.d). In general, the strong faith of the Filipinos has actively helped them manage calamities and disasters because it grants them resilience, optimism and coping strategies (Ignacio, 2010, pg.60). A nationwide Veritas Truth Survey from June and July 2020

results revealed that majority of Filipinos recognize that faith is very important in fighting the COVID-19 health crisis (Business Mirror, 19 July 2020). The insights suggest praying as an added strategy, a coping strategy, that is based on the belief that God is bigger than the pandemic. From this idea, it can be noted that the public's view on NPIs from the scientific perspective is in some way influenced by discourse and practices of religion and spirituality.

Another discourse formation that can be associated in the discourse of NPIs and prayers are the Filipino Catholics adherence to cultural values that influence the ways in which they perceive and interact with society. Lagman, et al. (2014) describes the tendency of the Filipinos to rely on God can be observed from their frequent cultural expression of saying "*bahala na*" (never mind what happens) to normalize and cope with life challenges. According to Dancel (2002), the said expression is deeply connected to the notion of "it's in God's hands" or "leave it to God" which reflects the Filipinos history of Spanish colonialization (Agbayani-Siewert & Revilla, 1995, Enriquez, 1992, & Sustento-Seneriches, 1997). Gripaldo (2005) believes that the word '*bahala*' could be rooted from the Tagalog word for God which is '*bathala*.' This phrase can be seen both as a positive way of letting go, and also as a fatalistic way of approaching the world (Tuason, 2002). Both concepts of praying and leaving it to God manifests how religiosity and spirituality deeply rooted in history influence their decision toward healing, health and NPIs as risk mitigation strategies.

The discourse samples that connote 'bahala na' (let's leave it God) are:

- *God is good malalagpasan natin ito!(God is good, we will overcome this!)*
- *Anyways, all we can do is keep on praying, as only GOD can stop this*
- *We can fight covid 19, yes....we can. Above all prayers.....Almighty God is more powerful than the virus.*

Evidently, discourse fragments on faith and strong reliance on God accounts for the discourse-as -knowledge. They are expressed via a specific rule that stems from religious belief which McHoul and Grace (1992) described as historical variable bodies of knowledge. Turning to God for protection, healing and strength in the midst of the COVID-19 pandemic accentuates Filipino tendencies that are deeply rooted in the historical and cultural discourses and practices.

For Foucault (2000c), "'knowledge' is a matter of the social, historical, and political conditions under which statements come to count as true or false" (p. 29) and that discourse is an "ordered set of polemical and strategic facts", which can be reversed to become "the set of linguistic facts which express these polemics and strategies (p. 2). Luke (1995) argues that specific texts might contain "linguistic and discursive artifacts" as techniques of distortion and misrepresentation, and thus they are capable to make attempts "to position, locate, define, and, in some instances, enable and regulate readers and addressees" (pp. 19- 20).

Seeing that the number of cases continue to soar to thousands and with very limited information about the nature of COVID-19, preventing its transmission required isolation and quarantine. Individuals who were suspected to have contacted

the virus were required to isolate for a certain number of days to prevent further transmission. At the time, preventive measures included close surveillance of Patients Under Investigation (PUI) and Persons Under Monitoring (PUM) (DOH 2020, WHO, 2020). By March 2020, new categories or "case definitions for notification" were used based on guidelines issued by the WHO on March 20 which are suspected case, probable case and confirmed case. In line with this, this study was able to observe the strong belief and support towards isolation as reflected in the discourse strands below:

- *It is an expected number that new cases will rise up because of testing made available and more people are getting tested, what we need to do is continue in staying home until we get everyone tested, isolate the infected ones and pray for their recoveries....*
- *DOH should Focus on Isolation of all Covid positive patients as soon as results are released from The many testing sites that the IATF are so proud of. Problem is even hospitals in Cebu and QC just let positive patients Go home without putting them on quarantine facilities. So transmission in the community continues. Self-home quarantine is not effective for Filipinos who Live with extended families*

In Foucauldian analysis, discourse positions on prevention accentuate and reproduce knowledge specifically self-knowledge that develops a person's way of knowing and grants one the opportunity to position himself within that scope of knowing. Labels found in the discourses have presented the interactions including the acts of labelling and being labelled, thus the process of subjectification" (McHoul

& Grace, 1993, p. 62). According to Foucault (1983), it is through the process of subjectification, that individual actions such as those observed in the study are relating their self-knowledge on the NPIs which are legitimately constituted that it becomes more or less considered and calculated, in response to the possible action of other people (p. 221).

In this study, the discourse, language, and texts associated with the non-pharmaceutical interventions have contributed to both the framing and positioning to discover how NPIs are gradually, progressively, really, and materially constituted through a multiplicity of organism, forces, energies, athoughts, etc. Focused on subjection of NPIs as risk mitigation strategies in the early months of the COVID-19 pandemic enables the Filipino public to be seen from history (COVID-19 pandemic), disciplinary processes (minimum public health standards) and concepts as individual subjects (McHoul & Grace, 1993, p. 3). In McHoul and Grace's view, "changes of public ideas precede changes in private individuals, not vice versa" (p. 4).

Given the tendencies of individuals to have contradictory opinions and choices, health communication must be founded on knowledge that is considered as true and acceptable. An accurate assessment of communication activities requires information on the targeted public, means of communication and content of the message. Soliciting voluntary compliance decisions would require multi-directional approach. The constant communication efforts to spread awareness on how to prevent Covid-19 infection and transmission by the World Health Organization, the national government, the Department of Health, and other institutions are helping instill protective behavior and compliance towards non-pharmaceutical interventions.

NPIs must be institutionalized within the social and individual systems and practices to have a “repeatable materiality.”

While the discourses were largely on prevention, a few perspectives have surfaced on **detection** which specifically regard the need for *mass testing, contact tracing, transparency on reporting cases and accuracy of the testing kits*. During the early months of the Covid-19 pandemic in the country, the demand for mass testing is understandably high because there were initially less than ten licensed testing laboratories in the country. Also, the public believes that early detection and intervention can help flatten the curve faster as shown in the following samples:

- *Mag mass testing na po para maagapan na po agad at hindi na lumala pa... [They should do mass testing immediately to prevent the situation from getting worse]*
- *Mass testing for ALL frontline healthcare workers*
- *We need mass testing.. para as mabibilis maihiwalay ang infected [to quickly isolate those who are infected], puis, pums... plsss we need mass testing*
- *Mass testing would be one of the most cost-effective public health interventions that governments should implement.*

Seale, et. al, 2020 explains that NPIs are grouped as either preventive or avoidance behaviors which are recognized and adopted by communities in varying levels depending on the transmission, characteristics of the community and their populations, and the local capacity to implement strategies. Doogan, et. al (2020) observed that differences in public adherence to NPIs are due to the differences in timeliness of implementation, NPI campaign strategies, inconsistent information, and enforcement strategies.

Dicourse on detection identified in Table 6 mentions the public's appeal for the government's attention and action on mass testing and contact tracing. Some individuals find the government's strategy on detection as lacking. In a latter response, the Department of Health (DOH) issued the Omnibus Interim Guidelines in October 2020. Eventually, the government had improved its testing and tracing capacity wherein the Department of Health articulated that the testing is for all individuals who are at-risk of contracting COVID-19 infection specifically to diagnose, screen and conduct surveillance (DOH, 2020).

- ang sinasabi ko pa ay, minsan ang testing kits ay hindi 100 percent. Ibigsabihin po, ndi porket nag positive ka, buhay po ung virus sa katawan nyo, pwdeng gumaling kana tpos po ang nakuha dead na virus, at nagpopositive ka pa din. Sana makakuha tyo ng mas accurate na testing kits. Pero malaking tulong po ang ginagawa ng gobyerno natn. Tlgang dapat mag ingat tyo, tuloy ang pagmamask and social distancing po. [What I am trying to say is that there are times when testing kits are not 100 percent accurate. It means that, being tested positive and being alive means that the virus is still in your body. You can get healed but still be tested positive because the virus is in your body. But government efforts are helpful. We need to be continue, let us continue to wear facemask, and observe social distancing.]

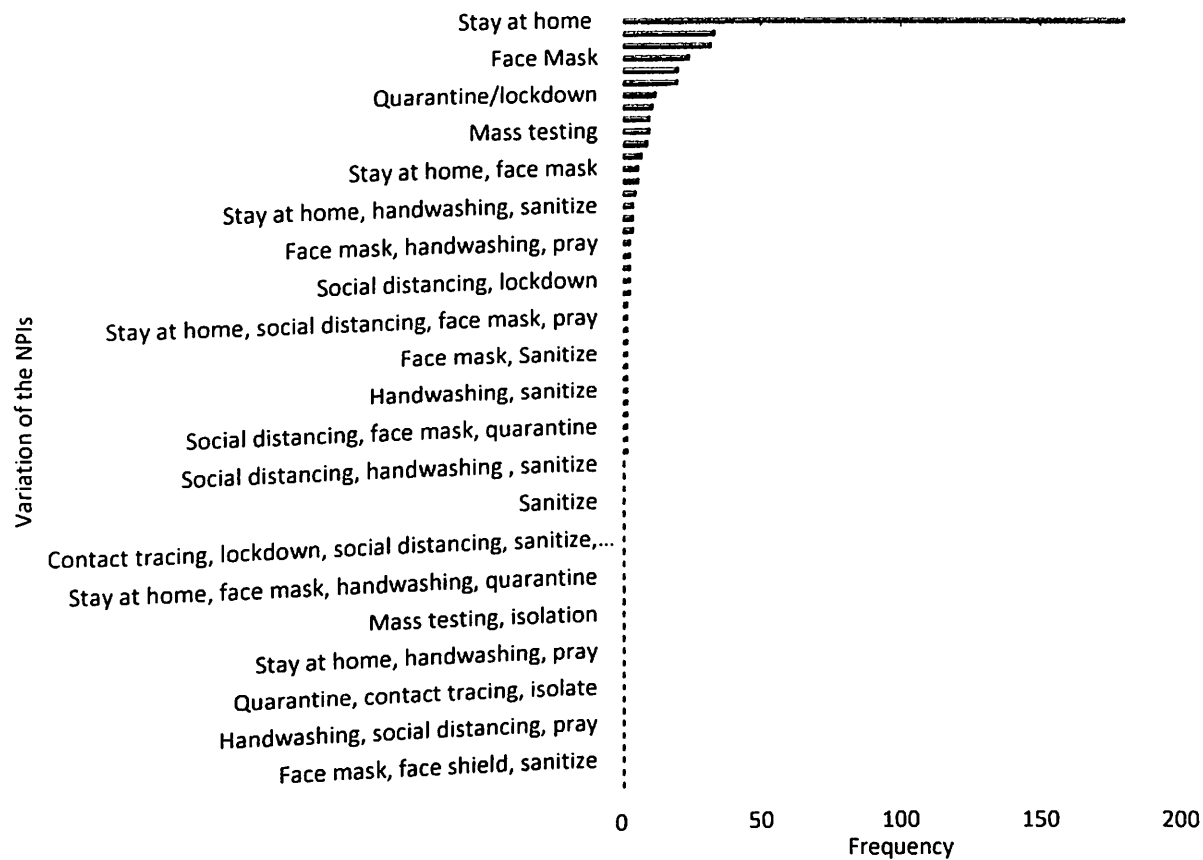
To detect cases and control further infection, DOH has intensified its surveillance systems through investigation and contact tracing to actively look for clusters of cases of COVID-19 at municipal, city, provincial and regional level while

continuously conducting Event-based (or rumour-based) investigations, searching for clusters of diseases of unknown origin and/or pneumonia-like illness. Such actions affected the demand for more reliable test kits. Insufficient supplies are reflective of the prevalent problems on medical supplies and doubts on the accuracy of DOH daily case reports. Against the backdrop of the early months of the pandemic with only a few accredited testing laboratories, a shortage of test kit supplies and inconsistencies in the results, a growing demand to expand testing capacity and to guarantee accurate and reliable results were manifested. The unprecedented surge in cases and the uncertainties of the situation have consequently resulted to panic, fear, anxiety, and paranoia. Communicating health information in such situation must consider not only what to communicate but also when and how to communicate them. Van der Bles et al., (2020) emphasizes the importance of declaring facts openly and honestly. Health communicators must keep messages consistent, specific and emphatic, acknowledging the public's emotions and sentiments to persuade them towards the desired behavioral change (Finset, et al., 2020).

The overall insights towards the adherence to the NPIs as observed speak of different, objects, issues and opinions and are influenced by many factors and predictors. Instead of a one size fits all solution to encourage voluntary practice of NPIs, communication efforts of the authorities must be directed to institutionalizing knowledge, policies and guidelines. Health communication does not have to make everybody agree on everything. By assessing both opinions and need, the government can better direct efficacy of the NPIs, information dissemination, and implementation strategies on policies and guidelines to achieve public compliance and support.

Variations of Practicing Non-pharmaceutical Interventions

Figure 5 Variations of the Non-pharmaceutical intervention Practices



According to Young (2001), discourses are likely to be fragmented, dispersed, incomplete and contradictory that speaks of different objects, opinions that lead to contradicting choices (pp. 403-404). Instead of a blueprint, discourse practices are mutable and interactive presentation of discourses.

The results in Figure 5 show combinations and modifications of non-pharmaceutical interventions that the Filipinos find fitting. From the graph, it is evident that the public expressed differences in terms of standardizing non-pharmaceutical interventions in order reduce the spread of Covid-19 but there is a clear understanding that highlights the intention to decrease its transmission. The

lack of consistency may be attributed to the individual biases and preferences (Czeisler et al, 2021). Acceptable ways of preventing and controlling the transmission of the Covid-19 virus differ from one person to another (Stutt et al., 2020). The study of Stutt, et. al. (2020) argued that face mask use alone is not as effective unless done in combination with other preventive measures like physical distancing or periods of lock-down particularly in the re-opening of the economy.

Table 7
Variations of Stay-at-home as Non-pharmaceutical Intervention

Category	Frequency (n=291)
Stay at home	180
Stay at home, pray	20
Stay at home, social distancing	20
Stay at home, social distancing, face mask, handwashing	11
Stay at home, social distancing, face mask	10
Stay at home, quarantine	7
Stay at home, face mask	6
Stay at home, social distancing, handwashing	6
Stay at home, handwashing, sanitize	4
Stay at home, social distancing, face mask, handwashing, pray	4
Stay at home, social distancing, face mask, handwashing, sanitize	3
Stay at home, handwashing	2
Stay at home, mass testing	2
Stay at home, social distancing, face mask, pray	2
Stay at home, social distancing, handwashing, sanitize	2
Stay at home, social distancing, sanitize	2
Stay at home, face mask, handwashing	1
Stay at home, face mask, handwashing, quarantine	1
Stay at home, face mask, quarantine	1
Stay at home, handwashing, pray	1
Stay at home, martial law	1
Stay at home, quarantine, pray	1
Stay at home, social distancing, face mask, hygiene	1
Stay at home, social distancing, face mask, quarantine	1
Stay at home, social distancing, mass testing	1
Stay at home, social distancing, pray	1
Total	291

More specifically, tables 7, 8 and 9 provides the entanglements of the discourse practices that emerged regarding non-pharmaceutical interventions such as stay-at-home, social distancing and wearing of face masks.

As shown in Table 7, majority or 291 (63%) of the samples included in the study support and acknowledge the stay-at-home restriction as a primary non-pharmaceutical intervention. The stay-at-home warrants different variations and combinations with other NPIs such as social distancing, wearing of face mask, observing social distancing and mask, sanitizing and proper hygiene, and combinations such as prayers, social distancing, handwashing, use of face mask, hygiene, mass testing, quarantine, sanitizing and even martial law. Praying and staying at home were mentioned in 20 discourse fragments. Another 20 believed that staying at home and social distancing will help prevent transmission of COVID-19. Eleven (11) prefers to combine stay-at-home with social distancing, use of face mask and handwashing.

It may be surmised that discourse trend on stay-at-home restrictions became evident and stronger due to the imposed Enhanced Community Quarantine (ECQ) or total lockdown in Luzon in March 2020 which extended months after with varying degree of restriction. Being in a country that is identified to have one of the world's longest and strictest lockdowns (Hapal, 2021), millions of Filipinos were forced to limit their movements to curb the human-to-human transmission of the virus. It is not therefore surprising to see emerging support, agreement, and compliance on stay-at-home measures. In fact, several studies revealed that majority of the Filipinos have

been following quarantine rules, have stayed at home, worn their masks and washed their hands (Crisostomo & Romero, 2020; Punongbayan, 2020; Hapal, 2021).

OctaResearch Philippines, a polling, research and consulting firm, reported in April 2020, three weeks after the stay-at-home orders or the Enhanced Community Quarantine was imposed that transmission rate of COVID-19 infection was fairly kept at low levels. The same group of experts recommended at the time extension of ECQ to prevent a worse-case scenario into the coming months of the pandemic. Isolation and Testing strategies were believed to be helpful in regulating the number of infected cases in the country.

- *Please naman po makinig po tayo sa program ng gobyerno stay at home [Please let us follow the government's stay-at-home program]*
- *stay at home kaya natin to basta magtulungan lng tayo 🙏 [Stay-at-home is possible if we help each other]*
- *self discipline stay at home is badly needed. Stay safe and Continue to Pray that God Almighty will touch our land for the healing.*

Other possible factors that may have contributed to the adoption of stay-at-home measure are the health campaign strategies of the Department of Health (DOH) which repeatedly appealed for the public's cooperation to help mitigate the transmission of COVID-19 by staying-at-home and observing the minimum public health standard (DOH, March 2020).

Following the findings of previous studies, the possibility and motivation to comply with the stay-at-home restrictions are influenced by the persons extent of knowledge about the situation, understanding of the government strategies, degree of fear on the number of infected people, perceived risk of the virus, and practical concerns such as running out of supplies or the financial consequences (Lau, et al., 2010; Prasetyo, et al., 2020; Searle, et al., 2020; Siqueira et al., 2020; and Webster et al., 2020).

The discursive positions and practices of stay-at-home measure and the entanglement with other non-pharmaceutical interventions is highly reflective of the socio-historical event and social realities brought about by the community quarantine restrictions. People’s changing discursive positions and the socio-cultural practices on adherence to staying-at-home are mainly associated and integrated in the everyday discourse becoming part of the ‘genealogy’ which Foucault (2007) in his time describes as the contingency of the present.

Table 8
Variations of Wearing Face Mask as Non-Pharmaceutical Intervention

Category	Frequency (n=74)
Face mask, social distancing	32
Face Mask	24
Face mask, social distancing, handwashing, pray	5
Face mask, handwashing, pray	3
Face mask, handwashing	2
Face mask, Sanitize	2
Face mask, social distancing, handwashing, sanitize	2
Face mask, face shield	1
Face mask, face shield, sanitize	1
Face mask, handwashing, face shield	1
Face mask, handwashing, sanitize	1
Total	74

Data presented in Table 8 reveal that 74 (15%) of the overall samples analyzed acknowledge the use of face masks as a health safety behavior. Specifically, 32 of the discourse fragments see the need to use face mask while observing social distancing. Twenty-four (24) rely solely on using face masks. Five (5) believe in combining the use of face masks with social distancing, handwashing, and prayer. The remaining comments indicated other possible combinations in the use of masks that include sanitizing and wearing of face shield.

With this, it can be presupposed that many understand the importance of wearing a mask in combination with social distancing and other health safety measures. The data suggests public support in using face masks because of the protection it provides from being infected and infecting others. Findings of a study by Imperial College London & YouGov (2020) has identified the Philippines as the top country in terms of using face masks stating that 91 per cent of Filipinos “always” wear a mask when going outside their homes (Hapal, 2021). According to Li, et al., (2020), people’s willingness to wear masks is attributed to factors such as culture, awareness, availability, and government advice.

Table 9
Variations of Social Distancing as Non-Pharmaceutical Intervention

Category	Frequency (n=64)
Social distancing, face mask, handwashing	9
Social distancing, quarantine	7
Social distancing, face mask, handwashing, sanitize	3
Social distancing, pray	2
Social distancing, face mask, quarantine	2
Social distancing, handwashing	2
Social distancing, handwashing, sanitize	1
Social distancing, handwashing, face mask, cough etiquette	1
Social distancing, handwashing, quarantine	1
Social distancing, face mask, pray	1
Social distancing, proper coughing/ sneezing etiquette, hygiene	1
Social distancing, sanitize	1
Total	64

Based on the data presented in Table 9, 64 or 14% of the samples analyzed were discursive formations on social distancing. Specifically, nine (9) were utterances enmeshed with the wearing of face mask; 7 with quarantine or lockdown; 3 with face mask, handwashing and sanitizing; 2 with prayers 2 face mask and quarantine, 2 with handwashing; and the remaining utterances included coughing etiquettes and sanitizing measures.

It can be observed that keeping a distance alone from others to prevent COVID-19 transmission is not an initial response. The practice of social distancing is not as appealing as staying-at-home and wearing face masks. These observations could mean a low possibility of compliance to social distancing as a non-pharmaceutical intervention.

This observation is consistent with the findings of earlier studies on COVID-19 in the Philippines. Studies conducted by Gonzales (2020), Gastardo-Conaco (2020),

and Lau, et. al (2020), established that among the non-pharmaceutical interventions, observance of social distancing is the least practiced health measure. Homes (2008) argues that engagement and compliance necessary during an outbreak is an individual choice and responsibility. The choice to adopt and perform health-protective behaviors such as social distancing, according to Williams, et. al (2015) is likely to be affected by perceived vulnerability, severity, and response efficacy. Also, differences in risk perception can cause different interpretation and weighing of non-pharmaceutical interventions.

This noticeable discursive formation to practice social distancing manifest a gap in existing health communication strategies. Convincing the public to support and adhere with social distancing as a risk mitigation behavior could entail repetitive and perhaps more creative health risk communication campaign strategies. A better understanding of the relations between individuals and their contexts of the non-pharmaceutical interventions can help determine ways on how to shape health protective behaviors.

Tables 7, 8 and 9 present an overview of the threads which affirm that the Filipinos see several possibilities of practicing NPIs as health safety standard to address the Covid-19 pandemic. This multiplicity on the practice of non-pharmaceutical interventions (see Appendix C) is likely to emerge from discourse and can be attributed to Foucault's idea on the radical dispersing of the subject's speaking positions and power relations (Foucault, 1972 cite by Arribas-Ayllon & Walkerdine, 2017).

From the data, it can be inferred that there is a no "one-size-fits-all" health-protective practice. The public knows that no single control measure is sufficient to mitigate or control COVID-19. Zhang, et. al (2020) strongly suggest a combination of self-imposed strategies, rather than single isolated non-pharmaceutical intervention. Countries in Europe and elsewhere have been applying multiple NPIs with a view to controlling the spread of COVID-19 (European Centre for Disease Prevention and Control,2020).

Imai, et. al (2020) explain that it is natural for countries to mitigate the impact of the pandemic by implementing variations and layers of control measures based on their existing realities and cultures. Attempts to stage new norms or to normalize NPIs as health protective and preventive behaviors or discipline change in behavior and beliefs are challenged by individual notions of acceptable procedures and techniques.

The changing and evolving perspective on managing the pandemic are a clear validation of Foucault's "history of the present" wherein he illustrates those discursive practices involves a deep understanding of the ongoing reality (Bacchi & Bonham, 2014). For Foucault, meaning and meaningful practice is constructed within discourse (Hall, 1997, p.75). Thus, the knowledge or the discursive formations behind the practice of NPIs based on Foucault's standards is produced from practices that emerged in response to global COVID-19 health crisis across the world.

What is recognizable is the discourse formations and position (knowledge and power) on NPI measures from both their unique and specific as well general properties. Understanding the preferences found in the Facebook page of DOH means seeing the social histories of the thoughts, knowledge and power that materialized from all the discourses. It can be noted that such preferences are not random expressions but are associated and are at the 'the very root of the statement-event' (Foucault, 1972:129) that reveals a condition of 'stating', that can be linked to the historical flux or as general system of the formation and transformation of statements' (1972:130). The individual preferences are therefore fragmented and changing to where flows of power move. The differences in the discourse are outcomes of differences in reasons, history, and the individual himself.

Perspectives towards the Non-pharmaceutical Interventions

The absence of any pharmaceutical intervention, widespread testing, or protective vaccine to fight Coronavirus Disease 2019 (COVID-19) has forced governments worldwide to adopt varying jurisdictions of non-pharmaceutical interventions (NPIs) over the course of the pandemic (Czeisler, et. al., 2021). Designed with the intention of reducing transmission chains to help the health care system in flattening the curve, the non-pharmaceutical interventions led to school closures; workplace closures; cancellation of public events; restrictions on public gatherings; closures of public transport; stay-at-home requirements; public information campaigns; restrictions on internal movements; and international travel controls (Hale, et. al., 2021).

Table 10
Response to Non-pharmaceutical interventions as Preventive Strategy

Category	Frequency (n=465)	%
Compliance	240	52
Support and Cooperate	154	33
Questions	33	7
Recommendation	29	6
Disappointment	4	1
Disapproval	3	1
Appreciation and Approval	2	0
Total	465	100

As presented in Table 10, majority of the comments reflected positive response specifically compliance, support, and cooperation. Fifty-two percent (52%) agrees with the goal of minimizing the health and economic impact of COVID-19. The appeals for adherence towards NPIs may be attributed to the concern for the safety and protection of healthcare workers, medical frontliners, oneself and the family. The public clearly understands the seriousness of the problem, the government policy and the public health standards. On the neutral perspective, the shared responses were either inquiries on economic and health policies or suggestions on how to intensify enforcement, testing and finding the cure for Covid-19. While very few expressed disappointment or disapproval of the government action and annoyance against those violating the NPIs.

With the alarming increase in daily new cases, deaths, and lack of safe and effective treatment against the COVID-19 disease, the public realizes the severity of COVID-19 and feel their vulnerability from being infected. Prasetyo et al. (2020) confirms that the understanding and perception of the public directly affects their assessment of the danger of the disease. According to Rogers' Protection Motivation Theory (PMT), perceived public health threat such that of COVID-19 will motivate individuals to react in a self-protective way (Westcott, et. al., 2017). This means that

the public's willingness to follow and comply with the non-pharmaceutical interventions depends on their understanding and knowledge.

Hence, the authorities specifically the Department of Health, government leaders and policymakers must continuously and effectively communicate risk and risk mitigation measures to the public. Doing such can enhance the public's understanding about the risks of COVID-19 and the importance of adhering to the public health standards. If people have enough knowledge about COVID-19 and are surrounded by people who are also knowledgeable and cooperative, the more likely that they will stay at home and comply with the lockdown implementation (Prasetyo, et. al., 2020 & Seale et al., 2020). Sixsmith, et. al (2013) argue that risk communication must provide both information and explanations of the complexities and uncertainties associated with the nature, magnitude, significance, and control.

Detailed Analysis of Typical Discourse Fragments

The second phase of the study consists of the detailed analysis of prevailing discourse fragments identified from the collective symbols used, the circumstances that illustrated the discourse and the emotional claims of the arguments on the discourse relating to non-pharmaceutical interventions.

Table 11
Collective Symbols Used in the Discourse

Collective Symbol	Frequency (n=465)	%
None	193	42
Ellipsis (...)	87	19
Emojis :-)	60	13
Stay at home	29	6
Exclamation mark	19	4
ECQ, GCQ, MEGCQ	18	4
All caps	14	3
Ellipsis and emojis	11	2
Ellipsis and punctuation marks	9	2
Please	6	1
NPISs	5	1
Question marks	5	1
#just saying	3	1
Prayer	2	0
Testing	2	0
Others (Comma, number of cases)	2	0
Total	465	100

Table 11 illustrates the symbols and commonly used vocabularies by the public on social media. Evaluation of the 465 discourse fragments revealed that 42% or 193 were plain direct comments, 19% used ellipsis, 13% added emojis (face and hand emojis), 6% had 'stay-at-home' phrase, 4% added exclamation mark, another 4% mentioned quarantine or its classifications (ECQ, GCQ, MECQ) and the remaining smaller percentages indicated use of question marks, hashtag, exclamation marks and emphasis on vocabularies such as 'please', 'prayer,' NPIs, and 'testing.'

The collective symbols helped capture the sentiments and views of the public's narratives or the speaking and thinking that emerged from the comments. Majority of the comments were posted to directly put the message across that is plain and simple to understand. Thereby, emphasizing that the focus is on the ideas itself. It is evident that people in the DOH Facebook page have no intention to

overwhelm so they tend to opt to express simple, direct, and immediate comments. Thus, giving priority to the message itself.

The use of the ellipsis by 19% (87) of the discourse fragments sets the notion that one may be limiting his or her message in accordance with the specifications of the social media platform. According to Jackson (2020), Facebook comments can contain only up to 8,000 characters and the social media platform monitors the quality and limits the frequency of posts or comments.

Face and hand emojis that were evident in 13% of the comments reviewed may be implicated as non-verbal cues that individuals use to convey or emphasize feelings and meanings. In communication, emojis are used to convey semantic meanings (Na'aman et al., 2017) giving cues to help understand the overall meaning of messages in computer mediated communication (Walther & D'Addario, 2001; Jibril and Abdullah, 2013) such as the case of Facebook comments. In practice, users tend to use emoji as a supplement to text (Ai et al., 2017; Donato & Paggio, 2017). The following comments reveal this view:

- *Facemask, handwashing, facemask, handwashing! Repeat in your minds don't forget 🙏*
- *If people will not do their part, it will be hard to stop the spread everyone be responsible wear your mask and keep social distancing. I wonder how much the government can help if the people don't do their part. 😞😞😞*
- *Pls stay at home... and save your families...the frontliners...they are humans ... they too are*

vulnerable...pls let us all stay safe...God bless and protect

Us

According to Walter (2015), the motivation to form impressions leads online communicators to use any cue system that is available. Kaye, et. al (2018) argue further that emoticon or emojis are used in digital communication to aid personal expression, reduce ambiguity of discourse and build context. Most comments posted in the DOH Facebook page favor and take advantage of the use of emojis and other nonverbal cues such as ellipsis and punctuation marks. The interaction in The DOH Facebook page permits immediate, interactive, and dynamic exchange of comments. The posts are done in real time determined by the user's name and the time it was posted. Logical and emotional claims are spontaneous and vivid but at the same time limited to a large extent, thus the tendencies to rely on text-only messages and nonverbal cues.

The frequently used ellipsis may be linked to the fact that typing is slower than talking and text-based messages take longer to compose. To make up for the unsaid messages, an online user will just have to insert or end their posts with an ellipsis. Another factor according to Walther (2015) that can explain the use of nonverbal cues in the text-based communication observed in this study is the sense of immediacy where co-presence is achieved thereby warranting more direct to the point and emotional charged messages and arguments.

The integration and use of the collective symbols in the comments posted in Facebook set illustrations of the discursive practices towards non-pharmaceutical interventions. Discursive practice and linguistic according to Michael Shapiro, a

Foucauldian theorist, are one and the same thing (Bacchi & Bonham, 2014). Although this study is not set on linguistics, the perspective on the common symbols help capture the emerging discourse practices or knowledge which is what people say or the things said in social media about non-pharmaceutical interventions. Foucault argues that discourse practices involve 'the material and the symbolic' that is reflected in how people write or speak (Bacchi & Bonham, 2014, p. 174). As shown in the findings, majority of the discourses were supplemented with the use of different modalities such as emojis, punctuation marks, and keywords to emphasize ideas and feelings towards the observance of non-pharmaceutical interventions.

As a ubiquitous communication tool, social media platforms, such as Facebook, Instagram, YouTube, Twitter LinkedIn and the like can be continuously enhanced and tapped for future risk and health communication strategies. It is evident that there is a strong public engagement in it which can kickstart and eventually sustain and amplify information sharing thus improving interaction between government agencies such as the DOH and the public stakeholders.

Typical Illustrations of the Discursive Practices

An analysis of the discourse fragments reveals the various circumstances that direct the public's view on non-pharmaceutical interventions. It provides information on the understanding and attitudinal trends that suggests acceptability and adherence to the NPIs.

Table 12
 Circumstances illustrating Discursive Practices

Category	Frequency	
	(n=465)	%
Compliance and Cooperation to NPIs	182	39
Increasing Cases	92	20
Possible Solution	51	11
Non-compliance	47	10
Problems	30	6
Safety and Protection of HCWs and Frontliners	14	3
Cause of Transmission	13	3
Outcome of the Health Crisis	16	3
Optimism	10	2
Need to Detect	10	2
Total	465	100

In the interest of determining the details of the discourse formations on NPIs, Table 12 outlines the social circumstances or the socio-historical concerns illustrated in the Facebook comments. Thirty-nine percent (39%) were appeal to practice and observe NPIs such as staying at home, social distancing, wearing face mask, and handwashing to stay safe, help others and save lives. Other comments relating to adherence centered on following the policies on public health standards. Twenty percent (20%) described reports of new positive cases, number of deaths and additional recoveries. Eleven percent (11%) offered possible solutions addressed to individuals, to the Department of Health (DOH), to the Inter-Agency Task Force (IATF) and to policymakers on appropriate actions including management and enforcement of the NPIs. Ten percent (10%) mentioned non-compliance or non-adherence to the NPIs, calling out violators for their lack of discipline and unsafe irresponsible behaviors. Six percent (7%) indicated problems such as lack of health facilities, medical supplies, and financial assistance. The rest pertained to

appreciation and support for healthcare workers (HCWs) and frontliners (3%), causes of the virus transmission (3%), ideas on the possible outcomes of the health crisis (3%), need to pray, trust and hope (2%), and lastly on issues regarding testing capacity (2%).

From the data in Table 12, it can be surmised that Filipinos were largely concerned about safety against COVID-19 infection and are motivated to adhere to keep themselves and their families protected from contacting the virus. Prasetyo, et. al. (2020) asserts that those who are worried about the increasing number of cases will likely comply with the government policies. Nicomedes and Avida (2020) discovered that during the COVID-19 pandemic, Filipinos moderately demonstrated avoidance reassurance seeking behavior. Likewise, the study was able to find out that the public discourse on NPIs were centered primarily on compliance, increasing cases and possible solutions. It should be noted that the discursive practices clearly implies that the public understand and is aware of the importance of staying at home, social distancing, face mask, and proper hygiene as COVID-19 preventive measures.

The discourse formations of the NPIs are situated as strategies or ways of representing , with each one affected or influenced by a different issue or concern. This thought supports Foucault's idea that each person is a product of history, disciplined, molded, normalized and subjectified by long historical processes. Fairclough (2001) further argues that a person can break away from his subjectification and form his own strategies to enact different realities such in this case the COVID-19 pandemic realities (p.10). The discourses which illustrated an

array of concerns reveals how an individual manages to express his own truth or self-knowledge in relation to the NPIs based on what is included and highlighted the comments he posted as well as which among the aspects were excluded.

Attempts to initiate normalization of observance of NPIs has produced tendencies of individuality in social media. Foucault (1977) noted that power highlights differences, peculiarities, deviance and eccentricities (p.193).

The observations made from this study, the avoidance and reassurance seeking behavior tendencies (Nicomedes & Avila, 2020) and the general attitude towards compliance (Prasetyo, et. al, 2020) highly encourages policymakers and health authorities to effectively communicate both risks and consequences of COVID-19. Operative and stringent policies must be formulated and enforced to shape and compel the public to new sociocultural practices to mitigate the risks and prevention of COVID-19 infection. Likewise, communicating discipline entails the need to accentuate, stabilize and broaden compliance through campaigns that is focused on developing and encouraging individual thinking. Planned and controlled activities implemented by the responsible authority on a daily or definite timetable will help the public transition to a new normal behavior.

Emotional Claims on Non-pharmaceutical Interventions

In the interest of extending the analysis of what were said and thought about the NPIs, the sentiment of the claims of the social media comments were identified. The findings are built on Foucault's (1972 cited by Pitsoe & Letseka, 2013) notion

that discourses presents what are said and thought. Details of the discourse samples provided this study additional perspectives on the general sentiments of the Filipino public that helped form the discursive practices.

Table 13
Sentiments on the Non-pharmaceutical Interventions (NPIs)

Category	Frequency (n=465)	%
Supportive	259	56
Frustrated	76	16
Optimistic	67	14
Worried	21	5
Hopeless	13	3
Disappointed	13	3
Sarcastic	12	3
Angry	4	1
Total	465	100

Table 13 shows that the sentiments formed on the NPIs are generally positive. Filipinos based on their social media comments were supportive and optimistic towards the non-pharmaceutical interventions. 56% reflected on support and empathy through their appeals and forceful reminders for others to cooperate and adhere to the non-pharmaceutical interventions. Majority of the Filipinos are aware that adhering to the NPIs will help mitigate the mitigation of the COVID-19 transmission and infection. 14% are hopeful that the number of cases and deaths will decrease and instead there will be more recoveries. On the contrary, 16% were frustrated when it comes to the guidelines and implementation of the NPIs (i.e non-observance of social distancing), 5% were worried and fearful because of the increasing number of infected individuals, 3% were feeling hopeless due to lack of Personal protective equipment (PPE) and the situation being far from over, 3% have expressed sarcasm and 1% were angry.

The variety of emotions signals the tendency of the public to either adhere or violate the non-pharmaceutical interventions or the public health standards imposed by the government to prevent transmission. Data from local and International surveys revealed how obedient and supportive the Filipinos were in observing NPIs. Based on the data generated by United Kingdom think tank YouGov, Filipinos ranked second in obedience among 29 countries. In an earlier global survey conducted from January to February 2020 , Filipinos felt strong familiarity with coronavirus making them equally alarmed of being infected (Kim, 2020). According to the July 2020 SWS (Social Weather Stations) survey, a big majority of Filipinos continued to wear masks when they go out, wash their hands several times a day and keeps a one-meter distance from other people outside their homes even after the lockdowns were lifted (Ranada, 2020).

The notable sentiments that reflect compliance and optimism can be perhaps attributed to the Filipinos high level of empathy (CNN, 2020). The discourse mirrored compassion, discipline, sense of responsibility and care for self, family, and others especially for healthcare workers and frontliners. Example of comments that encourages support and appeal for compliance are:

- *It seems cases are increasing every day! It's not a good indication! Better to stay at home & follow the rest of the preventive measures! God bless Philippines! 🙏🙏🙏*
- *Respecting social distancing protocol is each and every individual to follow.... dapat alam na natin [we should know this already] what we should do and practice in this pandemic crisis we are having...GV lang po [Good Vibes*

only or let us think positive]...we should all be responsible for our own safety.

- *Just stay at home during quarantine period...and obey the protocol of the government specially the IATF...*
- *Case fatality rate (CFR) remains high at 6.67%. The people must cooperate with the government. Stay home, wash hands regularly, maintain social distancing.*
- *Pls stay at home...and save your families... the frontliners...they are humans ..they too are vulnerable...pls let us all stay safe...God bless and protect Us*

This study confirms that the uncertainties caused by the COVID-19 pandemic, the increasing number of cases of infection, the lack of information, strict enforcement and the economic impact of non-pharmaceutical interventions have indeed created anxiety, worry, fear, hopelessness, frustration, anger (Nicomedes and Avila, 2020, Gastardo-Conaco, 2020, CNN, 2020), and sadness (Lee, et. al., 2020) among Filipinos. As mentioned earlier in this study, the variety of sentiments were observed to be directly associated with the ongoing socio-historical events. Some of the narratives that revealed negative emotions are:

- *14621 active cases, 13747 bed capacity but only 4727 beds occupied... That means 9894 sick Filipino in home quarantine or worst case, pagala gala lang [roaming around].. Stay at home! Protect yourself at all times. Don't expect government's help.*

- *Sana namn po kahit GCQ na eh sumusunod namn kasi sa distancing mga tao, para hindi na mag lockdown ulit... Nakakapagod wlang trabaho..[I wish that even if it is already GCQ, people will continue to observe social distancing so we don't have to go through another lockdown...It is tiring to be jobless...]*
- *How can we stop the virus that should be the focus ...and how we stop spreading it more people only way is stay home but to many careless people keep on going outside how it will stop?? They should be stricter to implement. Our duties now is just stay home while those infected not yet all fully recovered.*

Since individual behavior is important in controlling the spread of COVID-19 (Anderson, et. al, 2020) and in the successful implementation of the NPIs, it is highly important to note that persons with high level of empathy are likely to adhere to the non-pharmaceutical interventions or the health guidelines during the pandemic (Pfafftheicher et al., 2020; Carvalho & Machado, 2020). The emotional claims of the discourse ascertain the public's willingness to follow the NPIs. In line with this, health messaging and health risk communication can be designed and recalibrated to reinforce empathy and solicit more support and engagement towards NPIs.

Synoptic Analysis

The discursive strands common to most of the narratives emphasized stay-at-home, use of face mask and social distancing as health protective behaviors. Multiple variations and layering practices of NPIs is observed to prevent the

transmission of COVID-19. The public's understanding of the severity of the health crisis, perceived vulnerability, empathy towards healthcare workers, frontliners and their family, and efficacy of non-pharmaceutical interventions constitutes strong appeal for compliance and cooperation towards NPIs as preventive measures. The recurring themes included prevention, detection, and treatment. Yet, both the discourse strands and fragments argue largely on prevention. Situation reports and updates in social media details pressing matters such as alarming increase in daily new cases, deaths, and lack of safe and effective treatment against the COVID-19 disease, compelled the public to be concerned about the severity of COVID-19 and feel their vulnerability from being infected. Adding to this are the restriction policies that have been imposed by the government. The expressed willingness to conform and decision to observe NPIs are the result of the pressure imposed by the government and the alarming health crisis caused by COVID-19.

The absence of a safe and effective direct medicine and vaccine during the early months of the COVID-19 pandemic and the limited information established the discursive formation that prevention are the only viable cure that is possible through observance of the non-pharmaceutical interventions (staying at home, social distancing, use of face mask and hand hygiene). Moreover, the range of discourse on prevention includes compliance, non-compliance, flattening the curve, safety, policy implementation, prayers, need to isolate and different struggles that resulted from the restrictions associated with the NPIs. Also depicted are the apparent opposing views made evident from the entanglements of the sentiments and practice of the NPIs. One end is clustered towards compliance and optimism while the rest

reveals disappointments, tensions, and contradictions that either questions or disapproves the non-pharmaceutical interventions.

Discursive formation on prevention by practicing non-pharmaceutical interventions were constituted from s individualized subjective dispositions emphasizing both logical and emotional claims expressed in the virtual public sphere of social media as a response to the COVID-19 health crisis.

Generally, people are responding to the realities as they unfold on social media. As observed, the utterances made are either direct to the point or illustrated by emojis or punctuation mark for emphasis. The discursive formations explicitly speak and argue the intention of persuading others to comply, cooperate and observe discipline. Despite the negative sentiments, there are evident expressions that rationalizes and communicates non-pharmaceutical intervention to prevent and manage the transmission and infection of COVID-19.

The discursive formations and practices produced diverse combinations of health protective behavior. The non-pharmaceutical interventions were expressed in different variations and layers of stay-at-home, social distancing, handwashing and use of face masks. Some individuals would prefer some of the NPIs with the eventuality of leaving one out and replace it with prayers, lockdown, mass testing or martial law. In line with Foucault's concept that knowledge created discursively from sets of possible statements wherein a particular topic, object, process is to be talked about (Kress, 1985, p. 7). It is evident from the synoptic analysis of both discourse fragments and stands that the public's positions are continuously shaping new

sociocultural practices to mitigate the risks and dangers of COVID-19 infection. Although the idea of the "new normal" did not explicitly emerge, the knowledge and discursive practice of non-pharmaceutical interventions is predominantly articulated.

Conforming to Foucault's view on knowledge and power, the discourse analysis made for this study reveal that knowledge on the NPIs is transformed into socio-cultural practices based on how they constitute the conditions of the ongoing socio-historical issues of the pandemic which depict the public's emerging knowledge, attitude and practices. Thereby knowledge, in human consciousness and transformed into physical action, creates and becomes reality (Jager & Maier, 2009). Certain constraints, rules and conditions of possibility have made things happen.

The analysis gained perspective on the discourse fragments shared in the DOH Facebook page where the idea of power produces reality, domains of objects and rituals of truth (Gaventa, 2003, p. 2). The discursive practices towards NPIs are seen as productive not oppressive. They produce the words in us then relate words to objects (entanglements) and to strategies of acting towards and thinking about compliance or non-compliance, approval or disapproval, support or question the NPIs. In this way, ontologizing categorizations and evaluations are integrated, and they appear as "natural" as opposed to "constructed" or as the contingent result of discursive practices. Foucault (1972) reveals that all discursive themes are linked to others, which in turn are part of a complicity that is understood by all those implicated, but that is never brought into the open so that their truth-creating capacity can be evaluated. For Foucault (1972), what has been expressed hides what has not been said, and the unexpressed subverts the said. Therefore, one must bring the

unsaid into the light of examination and consciously decide what is legitimate and what is not. One should not accept the said without understanding how it came about, and without understanding the justification for its existence. Foucault, rather, desired to reveal all that is hidden within a discursive plane including all strategic moves that continually take place within a plane's confines, giving voice to previously unheard discursive positions. The discourse on power relations particularly the practices of NPIs in preventing the transmission of COVID-19 lead to both the concordances or contradictions.

Moreover, the changing and evolving perspective on managing the pandemic are clear validations of Foucault's "history of the present". Therefore, illustrating how those discursive practices involve a deep understanding of the ongoing reality (Bacchi & Bonham, 20140) that is already there.

Chapter VI

SUMMARY, CONCLUSION, IMPLICATIONS OF THE STUDY, AND RECOMMENDATIONS

Summary

Utilizing the philosophical ideas and theoretical groundwork of the Foucauldian Discourse Analysis (FDA), this study explored on the discourse fragments and strands communicated by the Filipinos in the virtual public sphere of Facebook from March 25, 2020 to June 25, 2020, or the first three months of the COVID-19 pandemic towards non-pharmaceutical interventions such as staying-at-home, social distancing , handwashing, and use of face masks and to illustrate what discursive formations, socio-historical events and socio-cultural practices have materialized during the first few months of the COVID-19 pandemic in the Philippines.

The discourse based on its recurring contents, themes, symbols and strategies reveal what Jäger and Maier (2009) define as knowledge. In other words, knowledge that is also the discursive formation are found in the discourses of the public towards non-pharmaceutical interventions. Moreover, it is the socio-historical context that paved way to the consensus and disagreements of the discourses and the socio-cultural practices that emerged. Taken altogether, the following claims were observed:

1. Non-pharmaceutical interventions such as staying -at-home, use of face masks, physical or social distancing, handwashing, mass testing, and isolation are the articulated health protective strategies to mitigate the transmission of COVID 19 and help flatten the curve.
2. Discursive formations on disciplining change in health protective behaviors were found within the discourse on the observance of the NPIs that is constituted in the daily narratives of the public in the DOH Facebook page that reflects the changing discourse positions such that one discourse takes over the position of another. Thus, discourses of consensus and disagreements on NPIs materialized following emerging issues such as stay-at-home orders and travel restrictions (Enhanced Community Quarantine); increasing new infection cases; need of isolation facilities for infected individuals; policies, guidelines and enforcement of non-pharmaceutical interventions or public health standards; number of recoveries and deaths; availability of test kits and centers; accuracy and reliability of test results; non-compliant behaviors in the communities; safety of frontliners and healthcare workers; limited medical supplies (mask, alcohols, protective equipment); employment problems; availability of medicine or vaccine and distribution of financial assistance from the government.
3. The discourse fragments reveal similar repetitive themes associated with prevention, detection of cases, treatment, and support to healthcare workers (HCWs).
4. Entanglements or diverse threads of Non-pharmaceutical interventions reveal several possibilities, variations and layers of observing health protective behaviors

which means that no single control measure is sufficient to mitigate or control COVID-19.

5. The overall ideological position of the Filipino public towards NPIs includes cognitions on appeal for compliance, adherence, support, and cooperation. In contrast, some discourses reflected on questioning the government, recommending strategies and utterances of both approval and disapproval.
6. Discourse fragments reflect and illustrate the proliferation of thoughts and feelings of the public forming somewhat unified worldview of the NPIs expressed either through simple and direct to the point comments or reinforced with non-verbal cues such as capital letters, exclamation marks, ellipsis, questions marks and emojis.
7. The discourse strands demonstrated emotionally charged disposition towards non-pharmaceutical interventions as health protective behaviors. The strong sense of empathy constituted positive sentiments of support and optimism while negative claims reveal frustrations, disappointment, worries, hopelessness, sarcasm, and anger.
8. The socio-cultural practices that materialized reflects the willingness of the public to support and adhere to disciplinary knowledge shared by the Department of Health (DOH which includes variations and of non-pharmaceutical interventions which are staying-at-home, use of face masks, social or physical distancing, and handwashing to prevent the risks and transmission of COVID-19 infection.
9. Discourse formations and socio-cultural practices drawn from NPIs as health protective behaviors are shaped by the complexity and specific historical

dimensions of the COVID-19 health crisis, differences in bias, self-knowledge, and strategic preferences.

10. The dispersed, incomplete, and contradicting discourse formations (Knowledge and power) on NPIs are socially and historically situated in the DOH Facebook page and are being reinforced and mediated by values presumptions such as discipline, obedience, resiliency, empowerment and individuality.

Conclusions

This study was able to trace the pandemic narratives on NPIs as a disciplinary transformation during the COVID -19 pandemic. The overall discursive formation of Filipinos on Facebook highlight and echo the public's dispositions to non-pharmaceutical interventions (NPIs) such as staying -at-home, use of face masks, physical or social distancing, handwashing or hand hygiene, mass testing, and isolation as viable health protective behaviors.

The public associates NPIs as prevention, detection, and treatment strategies against COVID-19 infection. Ideologies, self-knowledge, and preferences of non-pharmaceutical interventions reveal a positive and empowered sense of discourse relations which enacts individuals to examine, express and regulate their thoughts and behavior in accordance with the NPIs. The discourse formations (knowledge and power) flow from different directions of broadening public awareness, understanding, support and compliance to NPIs as socio-cultural practices as well as on expressions of resistance.

NPIs are entangled and framed based on thoughts and feelings of vulnerability from being infected, concern for health safety and individual bias on the NPIs. Sentiments and views are influenced by personalized values on discipline, obedience, resiliency, faith, sense of empowerment, and individuality. While pronounced resistance and opposing views are either drawn out of disappointments, tensions, and contradictions that either questions or disapproves the non-pharmaceutical interventions.

Ultimately, the specific social realities that emerged from the discursive formations associated with the NPIs includes a variety of issues and concerns that generally called for compliance, non-compliance, flattening the curve, safety, policy implementation, prayers, need to isolate and different struggles that resulted from the policies and restrictions. Issues such as stay-at-home orders and travel restrictions (Enhanced Community Quarantine); increasing new infection cases; need of isolation facilities for infected individuals; policies, guidelines and enforcement of non-pharmaceutical interventions or public health standards; number of recoveries and deaths; availability of test kits and centers; accuracy and reliability of test results; non-compliant behaviors in the communities; safety of frontliners and healthcare workers; limited medical supplies (mask, alcohols, protective equipment); employment problems; availability of medicine or vaccine and distribution of financial assistance from the government provoked the discourses on the observance of non-pharmaceutical interventions (NPIs) in social media during the early period of the COVID-19 pandemic.

The observed disparity in the public's speaking position about NPIs resonates the continuous production of knowledge, meaning and practice which may be attributed due to the novelty of the COVID-19 health crisis.

This study also revealed that NPIs are constituted as health protective behaviors and as personal individual response to the ongoing stream of social, historical, and political conditions, realities and uncertainties caused by the COVID-19 pandemic. Acceptability and willingness to adhere to the NPIs appeared to be an individual choice and responsibility to be disciplined than a collective effort as a community or as a nation.

Moreover, the history of the ongoing pandemic not only provoked but also institutionalized and regulated NPIs as basis for decision and policy making. With regard power and knowledge, emergent themes and subthemes produce the words in use, and they relate words to objects (entanglements) and to strategies of acting and thinking about compliance or non-compliance, approval or disapproval, support or question with regard to non-pharmaceutical interventions. The NPIs as health protective behaviors are also constructed and driven by concern, empathy, frustration, worries, hopelessness, disappointment, and anger. These ideological positions and emotional claims create a stream of emerging socio-cultural practices which shaped and provoked individual choices. The socio-cultural practices of NPIs differ from one person to another and are influenced by the level of understanding of the ongoing realities and complexities of the pandemic.

Implications of the Study

Policy Implications

Understanding the public's insights of NPIs suggests the importance of a pragmatic decision making and sector policy that access and collaborates with both the public and private sectors including national government agencies (NGAs), non-government organizations (NGOs), government offices, local government units (LGUs), private offices and workplaces, civic society organizations, academic and research institutions, and religious organization. The findings of this study further suggest that policies and approaches to a pandemic must be tailored based on the existing social realities and must traverse through social stratification and points of resistance. Laws, rules and guidelines requires logical flexibility thus the need for constant revision, updating and recalibrating.

Results imply that the need to caution and restore a sense of normality warrants campaigning for public health awareness, community trust, acceptability, and compliance. The discourse on engagement and compliance to non-pharmaceutical interventions as preventive strategy are broad, dispersed and emotion based. The public needs to know and understand the health risks they are facing with COVID-19 and how their compliance decisions and individual behavior to non-pharmaceutical interventions can protect and save lives. Moreover, adherence and non-adherence to the NPIs suggests a gap in the public's understanding, appreciation, and practice. Differences in risk perception, knowledge and emotions about COVID-19 severity can have dire implications on how the public weighs non-pharmaceutical interventions in which possibilities of resistance is to be expected.

Authorities and risk communication strategists can address the gap through a repetitive, consistent, well-coordinated and creative multisectoral risk communication approach to mobilize people to radical actions.

Collective involvement and support can help reinforce compliance to NPIs as risk mitigation behaviors. Policy and decision makers can look out for possible shifts in alliances and interest. Devising an effective response to COVID -19 the Filipino way requires combinations of preventive measures (NPIs), consistent information, strict implementation, and a strong emotional appeal.

The variations and entanglements of the continuing discourse formation, socio-historical events and socio-cultural practices observed in this study can be weaved into important implications for individual and community level communication and implementation of non-pharmaceutical interventions. Giving daily reports that shows the severity of the pandemic, the seriousness and urgency of flattening the curve can persuade people to comply. The Filipinos high level of empathy that mirrored compassion, discipline, sense of responsibility and care for self, family, and others especially for healthcare workers and frontliners translated to a strong positive response to comply with two or more NPIs to prevent the transmission of COVID-19. The discourses assert that the public is aware that there is no one-size-fits-all solution to mitigate the transmission of COVID-19 disease. Pursuing initiatives that taps individual and community involvement in social media may build that sense of unity or the 'Bayanihan' [a spirit of civic unity and cooperation among Filipinos] spirit.

Theoretical Implications

This study theorizes that while historical-events associated with the COVID-19 pandemic accords value and truth behind the concordances and resistance on non-pharmaceutical interventions, opportunities of recontextualization and rethinking have also been rationalized. Given the situation, NPIs have become infused in the thinking and behavior of individuals in the society as preventive strategies thus establishes new norms, habits and ways of disciplining. Findings of the study largely affirms Foucault's arguments on power. However, it also substantiates other possibilities of power that can emerged from individuality, subjectivity, and personalized knowledge. There is no doubt that power in the discourse can still produce other realities that supports the notion of normalizing and regulating NPIs as the new normal as the society face COVID-19 pandemic. It can be argued that power's productive nature can be seen from a more modern and contemporary perspective, where individuals have the power to articulate and strategized based from his own disposition that is acceptable within the bounds of certain morals and values. In this regard, disciplining individuals or transformational change that calls for radical health protective behavior changes can form out of the sense of empowerment and self-discipline. Individuals these days are likely to have higher sense of power that emanates within his focus of control because there are now existing platforms, tools and technology that allows for such explicit and honest expressions to be heard and seen. Institutions are more engaged, responsive, and flexible to individuality and differences. Unlike in the time of Foucault, knowledge and information acquisition, maintenance, enhancement, and exchange are progressive. Moreover, individuals are capable of a contemplating while explicitly expressing their views and preferences. The empowered individuals have become

decision-makers in the society. They are highly sensitive, active, reactive, and engaged in social issues, problems and world views like that of the COVID-19 health crisis.

Pedagogical Implications

Gathered insights from the study that manifest how individuals on social media can be repositories of knowledge from making sense of the COVID-19 situation up to the understanding of the government strategies can be of use among communication educators handling Knowledge Management. The uncovered expressed and inexpressible individual knowledge towards non-pharmaceutical interventions in this study provides additional appreciation on the application and framing of tacit, explicit and focal knowledge. Likewise, concepts such as sense-making, understanding, problem solving, and discipling change found in this study offer ways to contextualize, teach and advance not only effective knowledge management but also effective messaging strategies and campaigns in crisis communication, development communication and risk communication.

Discipling health communication in the learning environment involved strategies and techniques that is based on the intelligible, and susceptible analysis down to its smallest details. Teaching mobilization techniques must be explored in the context of new media modality and positioned in multiple perspectives.

Recommendations

Based on the findings and insights, this study recommends the following:

1. Reach out for accurate information, clarification or seek help by accessing and participating in social media or messaging apps like Viber, Facebook messenger, Hangouts, Slack, etc. Individuals and communities need to have enough knowledge on the severity and the risk of COVID-19 disease so they can respond and decide accordingly.
2. Responsible authorities need to take a more aggressive and extensive approach to addressing all forms of misinformation and disinformation involving facts and information of the pandemic and the NPIs.
3. Continuous innovation of existing health advocacy to specifically assist, support and educate different stakeholders during the pandemic. Advocacy campaigns that tap individual and community involvement is equally helpful in communicating health safety messages or health risk because it can reinforce empathy and solicit more support and engagement.
4. Use of pragmatic approach in risk communication can ensure that messages and strategies are updated and recalibrated to effectively articulate the prescribed public health standards and policies such as the non-pharmaceutical interventions.
5. Social mobilization initiatives through social networking sites (Facebook, Instagram, LinkedIn, and Twitter) or group messaging app (Facebook messenger, Hangouts, Viber, Slack, etc) can bring together and mobilize people in the community to respond and act on a health issue. Pockets of

communication activities in social media that are consistent, clear, meaningful, and engaging can help provoke and cultivate the message of working together.

6. Constant evaluation of risk communication strategies employed by the government, health authorities and medical institutions to ensure that accurate, honest, clear, transparent, credible, and up-to-date official information are shared with the public to convert uncertainty and confusion into public trust and compliance.
7. Strengthening the country's Crisis Communication Management team and adding a command center so they can help design and implement systematic, coordinated, timely and efficient communication strategies and facilitate risk communication on communicable diseases. This team can address, motivate, and engage diverse audiences. The team can collaborate more closely with other agencies and community-level health providers by employing multiple risk communication strategies which include daily press briefings aired both on traditional media and online media platforms and releasing various communication materials such as infographics and public service announcements, advisories, recommendations, and restrictions.
8. Studies on dispositive analysis to explore discursive formations built into linguistically and non-linguistically performed health protective behaviors and practices.
9. Research on the changing and evolving narratives, practices, and perceptions of people towards NPIs found in other discourse planes through a Foucauldian

Discourse Analysis or other socio-discursive theories like the Theory of Argumentation in Discourse.

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APPENDIX A

Sample of Facebook Comments for Analysis

 Department of Health (Philippines) was live.
March 25 · 🌐

WATCH: DOH Presscon | March 25, 2020
WATCH: DOH Presscon | March 25, 2020

👍❤️👎 3K 487 Comments 174K Views

👍 Like 💬 Comment ➦ Share 🗨️

Comments Hide

Most Relevant ▾

...naging kayo, project base, and bu
yan

Like Reply 35w

→ 4 Replies

 33:41
STAY HOME STAY 6 feet AWAY
from each other. testing not
going to help at this point. stay
apart to slowdown the spread.

Like Reply 35w

 Department of Health (Philippines) was live.
March 25 · 🌐

WATCH: DOH Presscon | March 25, 2020
WATCH: DOH Presscon | March 25, 2020

👍❤️👎 3K 487 Comments 174K Views

👍 Like 💬 Comment ➦ Share 🗨️

Comments Hide

Realtime Comments ▾

 Please advise those patients
being tested for covid-19 to
always wear mask even while
staying at home, do frequent
hand washing, and strictly
Quarantine themselves while
waiting for the result to avoid
incidents of infecting other
people like in the ca... [See
More](#)

Like Reply 35w

 Department of Health (Philippines) was live.
June 25 · 🌐

WATCH: DOH Presscon | June 25, 2020
WATCH: DOH Presscon | June 25, 2020

👍❤️👎 1.4K 288 Comments 105K Views

👍 Like 💬 Comment ➦ Share 🗨️

Comments Hide

Realtime Comments ▾

hanapbuhay para may pang
gastos pag kain at ulam,

Like Reply See Translation 22w

 28:59
Ibalik ang ECQ, baka lahat tayo
dito maging pasetive na...

Like Reply See Translation 22w

 Department of Health (Philippines) was live.
June 25 · 🌐

WATCH: DOH Presscon | June 25, 2020
WATCH: DOH Presscon | June 25, 2020

👍❤️👎 1.4K 288 Comments 105K Views

👍 Like 💬 Comment ➦ Share 🗨️

Comments Hide

Realtime Comments ▾

makakaya nila..

Like Reply See Translation 22w

 28:47
Staysafe mag suot ng facemask
at cleanliness, mag
hanapbuhay para may pang
gastos pag kain at ulam,

Like Reply See Translation 22w

APPENDIX B

Sample Table of Data Analysis

Facebook Comments	Please advise those patients being tested for covid-19 to always wear mask even while staying at home, do frequent hand washing, and strictly Quarantine themselves while waiting for the result to avoid incidents of infecting other people like in the case of Koko Pimentel.	Tanong lang po ah usec no facemask no entry di ba namn po malalamn of sino may sintomas ng covid need nm may facemask paano pag meron na pala ung isang tao syempre mkakahawa edi mas lalong dadami pa. ??? Please be consious po kasi lahat ng tao takot sa epedimic tama nm rules na NO FACE MASK NO ENTRY
PHASE 1: DISCOURSE STRANDS		
	Face Mask, stay home, quarantine	Face Mask
1.1 Type of Non-pharmaceutical Intervention/s	Koko Pimentel who tested positive for COVID 19 exposed himself by going to MMC to accompany wife about to give birth	No Face mask no entry
1.2 Socio-historical Context (Events/Issue)	Prevention	Prevention
1.3 Theme	Violation	Compliance
1.3.1 Sub-theme	Mask, handwashing, stay home, quarantine	Face Mask and going out
1.4 Discursive Knot	Support Health protocols	Support Health protocols
1.5 Ideological Position	Social Media	Social Media
1.6 Discursive Plane/Genre		
PHASE 2: DISCOURSE FRAGMENTS		Health Protocols
2.1 Collective Symbol	Health protocols	Spreading of virus of those going out
2.2 Illustrations	Koko Pimentel Case	Stressing out the rules
2.3 Arguments	Socio-historical (Koko Pimentel) and socio-cultural, appeal	No facemask no entry
2.4 Vocabulary/keywords/hashtags	None	
PHASE 3: SYNOPTIC ANALYSIS		Safety Health Protocols
3.1 Discursive Practices	Safety Health Protocols	Limitation on movement of people
3.2 Socio-historical events	Community Quarantine	Face mark required
3.3 Socio-cultural practices	mask, handwashing, stay at home	

APPENDIX C

Summary Table of Variations of Non-Pharmaceutical Interventions Practices

Summary of Variations of NPIs Practices		
Category	Frequency (n=74)	%
Contact tracing, lockdown, social distancing, sanitize, handwashing	1	0
Face Mask	24	5
Face mask, face shield	1	0
Face mask, face shield, sanitize	1	0
Face mask, handwashing	2	0
Face mask, handwashing, face shield	1	0
Face mask, handwashing, pray	3	1
Face mask, handwashing, sanitize	1	0
Face mask, Sanitize	2	0
Face mask, social distancing	32	7
Face mask, social distancing, handwashing, pray	5	1
Face mask, social distancing, handwashing, sanitize	2	0
Face shield, gloves	1	0
Handwashing	2	0
Handwashing, sanitize	2	0
Handwashing, social distancing, pray	1	0
Mass testing	10	2
Mass testing, isolation	1	0
Pray	3	1
Quarantine, contact tracing, isolate	1	0
Quarantine/lockdown	12	3
Sanitize	1	0
Sanitize, hygiene	33	7
Social distancing	9	2
Social distancing, face mask, handwashing	3	1
Social distancing, face mask, handwashing, sanitize	1	0
Social distancing, face mask, pray	2	0
Social distancing, face mask, quarantine	2	0
Social distancing, handwashing	1	0
Social distancing, handwashing, sanitize	1	0
Social distancing, handwashing, face mask, cough etiquette	1	0
Social distancing, handwashing, quarantine	1	0
Social distancing, lockdown	3	1
Social distancing, pray	2	0
Social distancing, proper coughing/ sneezing etiquette, hygiene	1	0
Social distancing, quarantine	4	1
Social distancing, sanitize	1	0
Stay at home	180	39
Stay at home, face mask	6	1
Stay at home, face mask, handwashing	1	0

Stay at home, face mask, handwashing, quarantine	1	0
Stay at home, face mask, quarantine	1	0
Stay at home, handwashing	2	0
Stay at home, handwashing, pray	1	0
Stay at home, handwashing, sanitize	4	1
Stay at home, martial law	1	0
Stay at home, mass testing	2	0
Stay at home, pray	20	4
Stay at home, quarantine	7	2
Stay at home, quarantine, pray	1	0
Stay at home, quarantine, sanitize	20	4
Stay at home, social distancing	10	2
Stay at home, social distancing, face mask	11	2
Stay at home, social distancing, face mask, handwashing	4	1
Stay at home, social distancing, face mask, handwashing, pray	3	1
Stay at home, social distancing, face mask, handwashing, sanitize	1	0
Stay at home, social distancing, face mask, hygiene	2	0
Stay at home, social distancing, face mask, pray	1	0
Stay at home, social distancing, face mask, quarantine	6	1
Stay at home, social distancing, handwashing	2	0
Stay at home, social distancing, handwashing, sanitize	1	0
Stay at home, social distancing, mass testing	1	0
Stay at home, social distancing, pray	2	0
Stay at home, social distancing, sanitize	465	100
Total		