

## Becoming a hoax buster in WhatsApp groups as an effort to limit the dissemination of misleading health information

Jenny Ratna Suminar<sup>\*)</sup>, Purwanti Hadisiwi

*Universitas Padjadjaran*

Raya Bandung Sumedang KM 21, Jatinangor, Sumedang, Indonesia

Email: jenny.suminar@unpad.ac.id, Phone +6222-8428888

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**Abstract** The dissemination of hoax information, especially about health, is spread quickly and massively through WhatsApp Group. The use of WhatsApp Group makes it easy to share and distribute information. This study raised Hoax Buster's phenomenon, which is someone who checks the facts at WhatsApp Group. This study explored the answers to the following questions: how WhatsApp Group members act as Hoax Buster, reasons for being a Hoax Buster, and how Hoax Buster develops communication patterns. This research used a qualitative method with case studies where data was obtained through observation and in-depth interviews with several sources. The results of the study were: 1) The existence of Hoax Buster is due to the circulation of Hoax in WhatsApp Group, 2) The role of Hoax Buster arises because of concerns about health Hoaxes in WhatsApp Group and encourages WhatsApp Group members not easily to believe unclear information, 3) Hoax busters communicate through several stages

**Keywords:** hoax buster; health information; whatsapp group

<sup>\*)</sup> Corresponding Author

## INTRODUCTION

The health hoax phenomenon is currently a concern in Indonesia. Evidence of the fatal effect caused by the hoax was a death at the end of September 2019. Head of the Makassar-Syafri Regional Forest Stabilisation Centre (VIII), reportedly died of a heart attack while attending a monitor and evaluation meeting. This news was followed by various talks about dealing with a heart attack: first aid by clapping the patient's hands and chest. This information is believed to have come from health information that was circulated in the WhatsApp group media (Aida, 2019).

Hoax spreads freely through social networking sites and instant messages. Health problems are quite distinct problems because they are sought after by the community. As a result, some irresponsible parties often use it for negative things. Research by the Indonesian Journalists Association (PWI –*Persatuan Wartawan Indonesia*) (Hasan, 2017) confirmed that the most widely circulated hoax is about health. People often spread hoaxes accidentally. They consider this information should be conveyed immediately because it may be useful for others. This condition is one of the reasons for the rapid spread of hoax through social media.

Health hoax makes people nervous, and many are misguided to believe it. Health hoaxes are believed to be more dangerous than other hoaxes because they may be fatal and life-threatening. Spreading health hoax is somewhat hazardous and needs to be resisted. Given the increasingly widespread use of digital media in various fields of life and layers of society, the ease of use of digital technology must be accompanied by the public's readiness and awareness in using information technology.

A cardiologist, Dr Renan Sukmawan (Aida, 2019) clarified that patting a heart attack patient is done to ensure the patient's consciousness, but it does not save lives. Therefore, patting the chest and arms of the head of BPKH (*Badan Pengelola Keuangan Haji* -Hajj Financial Management Agency) in Makassar some time ago was wrong and had led to fatal consequences. One of the leading causes of that tragedy is hoaxes about first-aid procedures for heart attacks which are spreading rapidly in the community.

Research about hoax dissemination is popular research in nowadays. Tsftati et al. (2020) found that mainstream news media play a significant role in disseminating fake news. Fake news and click baits interfere with the user's ability to discern useful information from the Internet, especially when news becomes critical for decision making (Aldwairi & Alwahedi, 2018).

In particular cases, for example, political information, the ability to correct political misinformation with fact-checking is substantially attenuated by participants' pre-existing beliefs, ideology, and knowledge. (Walter et al., 2020). Kim et al. (Kim et al., 2019) stated that confirmation bias is prominent; users were more likely to believe

— and spread — articles aligned with their beliefs. Relative population reach of fake news is now less than in the pre-digital news media era and that digital media fragmentation and immediacy allow the identification and correction of fake news faster than in any other period in history (van Laar *et al.*, 2017).

Hoaxes have also infiltrated media literacy and information literacy. Syam stated that media literacy programs should emphasise the identification of fake news and the consequences of its distribution (Syam & Nurrahmi, 2020). In others, information literacy—but not other literacies—significantly increase the likelihood of identifying fake news stories (Jones-Jang *et al.*, 2019).

The diffusion of misinformation through social media is a potential threat to democracy and broader society. While its possible effects have been much discussed, there is little evidence on how the problem's scale has evolved in recent years (Allcott *et al.*, 2019). Chiou and Tucker suggest potential ways of curbing the influence of fake news on social networking sites. Advertising regulations may effectively curtail articles' popularity with fake news (Chiou & Tucker, 2018).

Hoaxes in health information are also an important topic to be discussed. Fake news can lead to severe consequences. Therefore, All scientists, physicians, healthcare collaborators must work together to fight fake medical misinformation (Mesquita *et al.*, 2020). Sommariva *et al.*, findings underscored the need for Health Educators to analyse misinformation and develop and implement information campaigns in the early stages of social media strategy development (Sommariva *et al.*, 2018). Other studies found that age is an essential factor that determines health literacy. Being younger and having more education is associated with greater e-Health literacy among baby boomers and older adults (Tennant *et al.*, 2015).

Previous studies about hoaxes and the dissemination in general, and health hoaxes in particular, we see that the study about how personal roles in a group, especially in the messenger application is essential for tackling hoaxes and increasing awareness of hoaxes personally for the group members. These studies prove that research on hoax buster in the WhatsApp group to limit misleading health information dissemination is interesting to be studied in depth. In contrast to previous studies, this study will assess the personal role in messenger media, especially WhatsApp.

Intensive dissemination of fake news entered into various sources of information. The emergence of different social media platforms has made information dissemination more widespread. Social media has become one of the most widely absorbed sources of information today. Not only about the accurate information, but also allows the opportunity to spread hoax to the public. The most commonly used platforms lately are Facebook, Instagram, LINE, WhatsApp, Telegram

and Twitter. This, of course, is a big challenge to prevent and limit hoax.

Research from the Indonesian Intelligence Agency (BIN –*Badan Intelijen Negara*) showed that 60% of the dissemination of information on social media in Indonesia contains hoax. In other words, more than half the information obtained from social media is considered as false information (Movanita, 2018). Secretary of the Honorary Board of the Indonesian Journalists Association (PWI –*Persatuan Wartawan Indonesia*), Wina Armada Sukardi, as quoted by *antaranews.com*, once mentioned that the most widespread hoax was about health information. Ironically, hoax about health tends to be spread because of the lack of public information. The Indonesian Press Council also found that hoaxes on health-related issues on social media had reached 95 per cent. This means that only 5 per cent of health information circulating on social media comes from accurate sources (Tumanggor, 2017).

A health practitioner, Dr Cindhe Puspito, as quoted by *viva.co.id* (Rochimawati & Berlian, 2018), said that the spread of hoax in the health sector is higher through social media, 92 per cent higher through social media channels such as Facebook and Twitter. It is followed by chat applications such as WhatsApp and Blackberry Messenger by 62 per cent and followed by websites and television programs in third and fourth positions.

According to data compiled by *health.detik.com* (Anwar, 2019), ten health hoaxes are most often circulated on WhatsApp and Facebook. WhatsApp and Facebook are the most widely used applications for exchanging information, and most often contain health hoaxes. These health hoaxes are 1) using a cell phone in a dark place can cause eye tumours; 2) deadly mango caterpillars; 3) MSG is harmful to the brain; 4) instant noodles can cause cancer; 5) mixing coffee with dangerous durian; 6) the danger of artificial sweeteners of aspartame; 7) needles to deal with strokes; 8) cold shower can trigger a stroke; 9) HPV vaccine triggers premature menopause; 10) heart disease comes from not urinating at night.

Hoax is immediately accepted in people's minds because it often uses hyperbolic words, bombastic, interesting images, and only a few texts. Hoax is meant to make people nervous and pass it on to others. Health is considered a powerful issue to be made into hoax because of the lack of awareness about health itself.

The spreading of hoax in Indonesia has made people uneasy. Many people feel disadvantaged, especially health workers, such as doctors, nurses, and pharmacists. Even psychologically, a person affected by a hoax often experiences psychological disorders. Rena Masri, an adult clinical psychologist, stated that it would directly or indirectly cause psychological trauma if someone only believes in hoaxes. Besides, based on the Mastel survey, 84 per cent of the hoax

is very common, and 75.90 per cent might interfere with peace in the community.

Many people have tried to resist health hoax, from policymakers to the community. Since 2017, the Ministry of Health of the Republic of Indonesia has committed to limit the circulation of false advertisements and misleading health publications. The government and Sapu Langit Community also declared the Anti Hoax Health Network (Jahkes) in 2017 to eradicate hoax and hoax about health. As quoted by hallo.id, for this community, health hoax is far more dangerous for the people in Indonesia because it can have fatal consequences for one's life.

However, based on how the hoax spreads through society through social media, its existence needs to be fought. Hoax resistance efforts include preventing and overcoming hoax. One role that has recently emerged and played an active role in dealing with the hoax spread is the Hoax Buster. Hoax Buster is a person who acts as a deterrent and repellent of hoaxes. They play a role in ensuring that news disseminated on social media can be confirmed, thereby preventing the hoax from going viral and causing more significant adverse effects.

The existence of Hoax Buster is considered as an effort to anticipate and limit the spread of hoaxes. Hoax busting is an act of checking facts that aim to counter-narratives and form engagement, including public conversation. The formation of involvement is also a strategy to break the chains of public distribution and trust in the hoax. Fahmi believes that reading culture plays an essential role in anticipating hoax. As quoted from the Library Journal blog, libraries and librarians play an important role as the main source of fact-checking in the Post-truth era. Besides, information literacy needs to be improved to prevent lies to increase citizens' awareness of information (Gumgum *et al.*, 2017).

Speaking of health information in Indonesia, the community's mental condition towards trust in health information is still quite alarming. Traditional health services still have a place in society (Panuju, 2017), while medical services distribution is still uncertain. Social media is an effective and efficient tool for disseminating information. Social media plays a role in very high social dynamics and allows users to communicate openly with other users with different backgrounds and interests (Ferdiawan *et al.*, 2019). In the Internet age, social media contributes to creating online public spaces that empower people to exchange ideas and form alliances for political change. In other words, the Internet seems to fulfil all the conditions needed to be active citizens and involved in democratic societies (Arif, 2016).

The use of WhatsApp in sharing information between families is one way of indirect communication. In addition, according to research in Argentina, other than acting as a central medium for family-friendly communication, WhatsApp is also perceived as a highly versatile, all-

encompassing space of encounter, meaning-making, and coordination where entry barriers are low, and exit costs are high (Matassi et al., 2019).

Personal involvement in tackling hoaxes can be explained through pinions likelihood about interpersonal communication. The Elaboration Likelihood Model (ELM) provides a general framework for organising, categorising, and understanding the fundamental processes underlying persuasive communications' effectiveness (Petty & Cacioppo, 1986). The ELM began with attempts to account for the differential persistence of communication-induced attitude change. Reviewing the literature on attitude persistence revealed that the many different empirical findings and theories in the ELM field might profitably be viewed as emphasising one of just two relatively distinct routes to persuasion (Petty & Cacioppo, 1986).

Based on the principal concept about hoaxes spreading on WhatsApp and how interpersonal communication functions in its response, researchers see a unique phenomenon in tackling hoaxes carried out by a hoax buster. Hoax buster in WhatsApp media works personally and builds an intimated communication in eradicating the existence of hoax information on social media. This research will reveal three research questions, including 1) how WhatsApp Group members position themselves as Hoax Buster; 2) what the reasons of WhatsApp group members want to play the role of health Hoax Buster, and 3) how the communication patterns developed by Hoax Buster in the WhatsApp group.

The spread of health hoax within the WhatsApp group and the Hoax Buster phenomenon, which plays a role in limiting hoax is considered quite important to be studied in-depth and scientifically by researchers. This study aims to 1) reveal how WhatsApp Group members position themselves as Hoax Buster; 2) the reasons why WhatsApp group members want to play the role of health Hoax Buster, and 3) explore communication patterns developed by Hoax Buster in the WhatsApp group.

## **METHODOLOGY**

Regarding the research objectives which aimed to 1) reveal and explore how WhatsApp Group members play their role as Hoax Buster; 2) why there are WhatsApp Group members who play the role of health Hoax Buster; 3) explore the communication patterns developed by Hoax Buster in the WhatsApp group, this study used a qualitative approach. The characteristics of qualitative research, as explained by Bogdan and Biklen, are:

“Qualitative research is carried out in natural conditions, directly to the data source, and researchers are key instruments. Qualitative research is more descriptive in nature; the data collected is in the form of words or images, so that it does not emphasise numbers. Qualitative research emphasises more on

processes than on products or results; qualitative research conducts data analysis inductively and puts more emphasis on the meaning” (Sugiyono, 2014).

This study used the constructivist paradigm with flexible and open nature and inductive analysis. According to Denzin & Lincoln (1994), constructivist paradigm research has the following characteristics: relative reality produces findings based on field knowledge, findings in the field include results that occur during the interaction between researchers and key informants. Meanwhile, the methodology used was dialectics and hermeneutics, whose primary purpose was to obtain consensus construction.

This research was conducted from May 2019 to October 2019 by interviewing several sources, including three people who often shared health hoax to the WhatsApp group, ten hoax busters in the WhatsApp group, the West Java Province government, i.e. the Jabarsaberhoax team and West Java Health Services. West Java is the most suitable province to be researched regarding the spread of hoax data included in the three provinces in Indonesia with the highest hoax spread (DAL, 2019).

**Table 1.** Informants’ background

No	Role	Amount of Informant
1.	Hoax buster	ten
2.	people who often share health hoax the WhatsApp group	three
3.	Jabarsaberhoax team	one
4.	West Java Health Services.	One

Source: Data Processed by Author (2020)

The selection of various sources was aimed to obtain in-depth data from multiple sources. Researchers interviewed people who often shared health hoaxes in the WhatsApp group to get data on how health hoaxes were spread through the WhatsApp group. Meanwhile, the hoax busters were interviewed to get data on the experience of resisting health hoax in the WhatsApp group. Finally, a government interview was conducted to obtain in-depth data on government support and policy to eradicate health hoax and conditions on the field.

## RESULTS AND DISCUSSION

This research will reveal three research questions, including 1) how WhatsApp Group members position themselves as Hoax Buster; 2) what the reasons of WhatsApp group members want to play the role of health Hoax Buster, and 3) how the communication patterns developed by Hoax Buster in the WhatsApp group. This section reveals how WhatsApp group members perform their roles as Hoax Buster; the reason why members of the WhatsApp group act as health Hoax Buster and explore the communication patterns that the Hoax Buster builds in the WhatsApp group.

The first type of persuasion was that which likely resulted from a person's careful and thoughtful consideration of the actual merits of the information presented in support of an advocacy (central route). Meanwhile, the second type of persuasion was that which more likely occurred due to some simple cue in the persuasion context (e.g., an attractive source) that induced change without scrutinising the true merits of the information presented (peripheral route). In various literature works, the first kind of persuasion appeared to be more enduring than the latter (Petty & Cacioppo, 1986). When elaboration likelihood is low, processing occurs via the peripheral route. The peripheral route to persuasion requires little cognitive effort, instead of relying upon peripheral cues such as source credibility and heuristics. As such, attitudes formed via the peripheral route are relatively unaffected by argument quality, are temporary in nature, and are not as predictive of subsequent behaviour as those formed using the central route (Kitchen et al., 2014).

This study uses ELM because Hoax Buster uses a persuasive method to ask and correct information about hoax information distributed by WhatsApp group members. They do not easily trust any information before it is confirmed. Indeed, the responses from members of the group varied, some received corrections, but some remained unphased with wrong statements.

The study results proved that the spread of health hoax in the WhatsApp group in the province of West Java is carried out by members from various levels of education, from the middle to upper levels. This result is based on Hoax Buster's experience, who often finds hoax propaganda in the WhatsApp group spread by members from various educational levels. In fact, people with higher education can be the main spreaders of hoax in the WhatsApp group. The study also found that health hoax perpetrators were older and particularly interested in instant health information.

Hoax Busters check the facts to counter the hoax's narrative and form engagement in the form of public conversation (Gumgum et al., 2017). The hoax information referred to in this study is about health, not only about hoaxes but also misleading health information.

The spreaders of the hoax are generally influenced by the level of understanding and use of digital media. The similarity of existing digital media makes them assume all the digital information they get is accurate. In fact, those who have a relatively good professional background, such as retired state employees, university professors, teachers, are very likely to become hoax spreaders. Therefore, digital literacy is one of the capabilities that digital media users must possess to deal with rapid information dissemination today. Furthermore, (Ray, 2017) defined as the ability to understand and use various forms of information from various sources accessed through computer devices. With digital literacy, the possibility of trusting information from WhatsApp Group will be slightly reduced. Because as we know, digital

literacy helps handle the distribution of information that is not yet clear.

The results of the examination from the viewpoint of intention to spread hoax indicate that WhatsApp group members are not people who deliberately spread health hoax. It is just that they feel that the information they got is quite important and might be useful for other group members. Despite their good intentions, hoax spreaders have intentionally spread fake health news that can harm others. Their desire to do good is not accompanied by health literacy. Ratzan & Parker (2000) defined health literacy as "the level of individual capacity to receive, process and understand basic health information and services needed to make appropriate health care decisions."

Seeing this phenomenon, Hoax Busters felt that its function as a counter for misleading health information became very critical in their group. Awareness about the dangers of sharing misleading information makes the Hoax Buster take on the function as a source that synchronises the news being shared. In addition, Hoax Buster has several other reasons to carry out their role, namely: 1) concerns that come from themselves, including fear and discomfort of the emergence of misleading information before them. For them, the information, regardless of influence, must be stopped and not suitable for distribution; (2) driven by personal experience. Hoax busters have experienced hoax news being spread and trusting the wrong information; (3) driven by other people's experiences. The Hoax Busters hear stories of health hoax experiences from others, especially from their immediate environment and (4) knowledge driven. Hoax buster who have mastered digital media will be very careful when receiving new information.

If categorised, Hoax Buster's cast does not have a background in communication studies that study literacy or medical studies that study health in depth. In general, they have a reasonably high awareness after learning digital media literacy through training or just from sharing with peers.

"The first time I understood about spreading health hoax was from the peer environment. Starting from there, I became aware and continued to look for information about the hoax and be more careful in receiving messages and spreading them, especially in WhatsApp" (Yetti, personal communication, 2019)

Health Hoax Buster in WhatsApp group is divided into two categories: Hoax Buster, which only focuses on eradicating health hoaxes and Hoax Buster against all kinds of misleading information. There is no significant difference between these two categories in eradicating misleading health information. However, Hoax Buster, which focuses on health hoax, understands health information more comprehensively, including information that often becomes a hoax and circulates in the community.

Hoax Busters played a significant role in the WhatsApp group to eradicate health hoax during the group talks. They act naturally by correcting information that is thought to trigger adverse effects so that the information stops in one group. The Hoax Busters do not set themselves up to continue to be hoax busters, but instead, they feel they have to be sensitive to dubious information and confirm the truth. This sensitivity arises because concerns that the health information circulating will be fatal if not corrected or confirmed.

Hoax Buster tends to be more responsive to health information that has been experienced directly in person or the closest people. This habit is related to direct experience and understanding confirmed by trusted sources. Hoax busters are very sensitive to the information discussed related to personal experiences or those closest to them. For example, when the topic of discussion in a group concerns how to deal with one of the illnesses experienced by themselves or by their family, Hoax Busters who understand the issues discussed will progress and quickly correct the hoax. An informant confirmed this:

“My husband is suffering from GERD, so I know very well about the disease and often consult with doctors. Hoaxes about deadly GERD and others certainly makes people unfamiliar with this disease fearful. In fact, GERD has its characteristics, and there are ways to handle it” (Dewi, personal communication, 2019).

The study also found that although hoax is quite troubling for the public, efforts to manage health hoax in Indonesia are still minimal. The results of observations and interviews conducted by researchers revealed facts about the phenomena of managing fraud that occurred in the Indonesian government. These facts include health hoax has not yet become the main focus of the government; the government is just beginning to eradicate hoax in society that spreads through social media only in the general hoax category; The government has formed an institution that focuses on deceptive management, namely Jabarsaberhoax. However, this institution’s performance is still very limited because its coverage is only around social media and websites. This institution also still manually confirms the reported news. The role of someone who has an attitude like the Hoax Busters is needed in this institution; in addition, awareness about the health hazards that may be fatal, or even death, has not yet reached the government. The main focus of the government to eradicate hoax in society today is related to politics and religion.

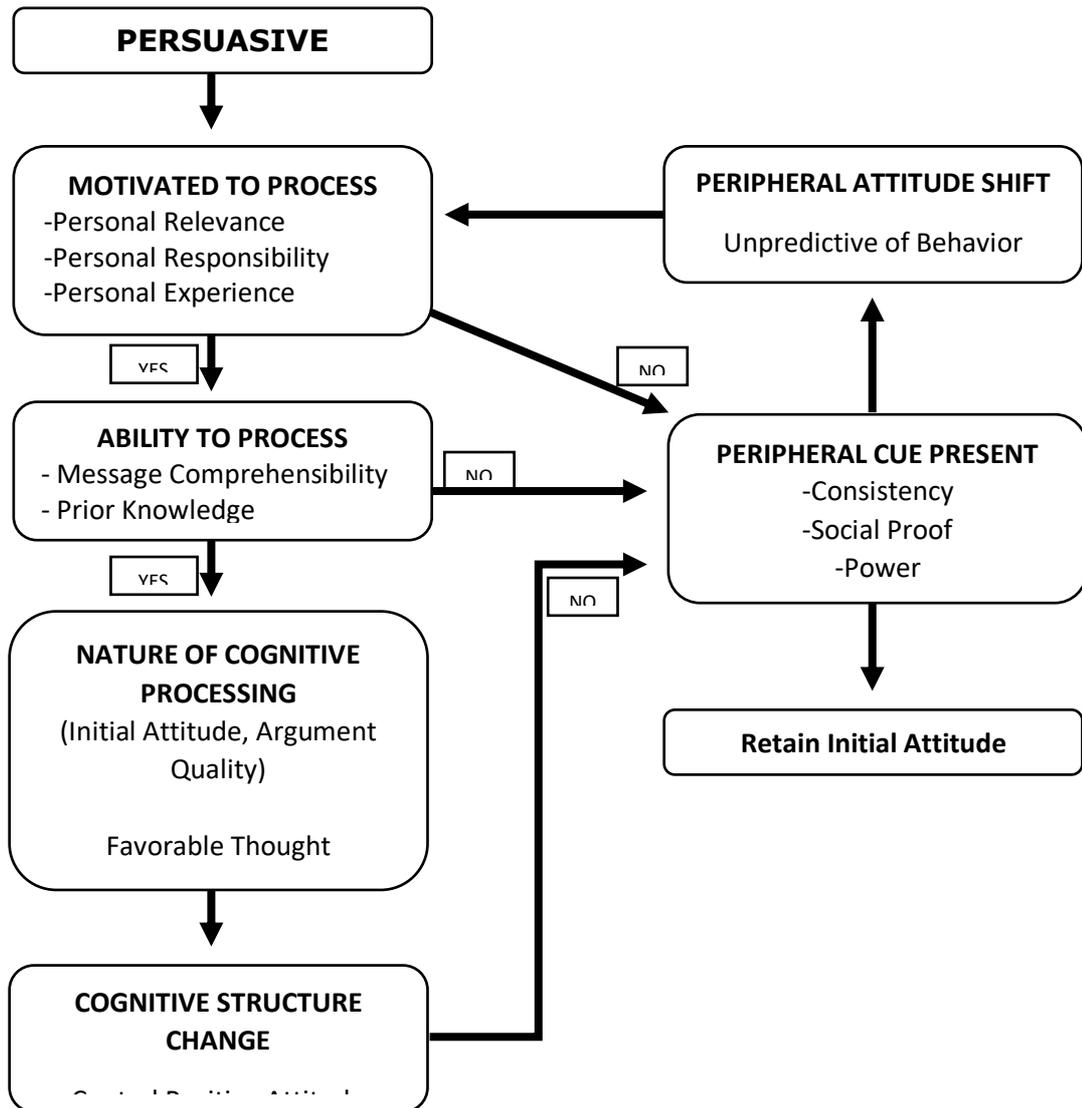
Based on the phenomena of management of hoax from government agencies, researchers believe that the Hoax Busters’ role is very significant as a primary tool for confirming misleading health information that is close to the community. In addition, the government should conduct socialisation related to health literacy to the community to prevent health hoax. This statement is supported by research conducted by Prasanti (2018).

The Elaboration Likelihood Model (ELM) provides a general framework for organising, categorising, and understanding the fundamental processes underlying persuasive communications effectiveness (Petty & Cacioppo, 1986). The ELM began with attempts to account for the differential persistence of communication-induced attitude change.

Before outlining our attitude change model, however, defining our use of the term attitude is essential. Consistent with other attitude theorists' positions, we regard attitudes as general evaluations regarding themselves, other people, objects, and issues. These general evaluations can be based on various behavioural, affective, and cognitive experiences and can influence or guide behavioural, affective, and cognitive processes. Thus, a person may come to like a new political candidate because she just donated \$100 to the campaign (behaviour-initiated change), because the theme music in a recently heard commercial induced general pleasantness (affect-initiated change), or because the person was impressed with the candidate's issue positions (cognitive initiated change). Similarly, if a person already likes a political candidate he may agree to donate money to the campaign (behavioural influence), may feel happiness upon meeting the candidate (affective influence), and may selectively encode the candidate's issue positions (cognitive influence). (Petty & Cacioppo, 1986).

When using the central route, people consider an argument carefully, and if their attitudes change, then the change tends to be fixed and will affect how they behave. Conversely, if a peripheral route is used, the changes are usually temporary and do not significantly affect behaviour. The critical way of thinking is influenced by two main factors, namely motivation and ability. When our motivation is high, people tend towards the central route, and when motivation is low, people tend to follow our peripheral route. At least three factors influence motivation. The first is the involvement, or how far a topic is relevant to someone. The second factor of motivation is the diversity of arguments. The more diverse the arguments from various sources, the more someone will think before making a decision. The third factor in motivation is the tendency of people to enjoy critical thinking. However, no matter how motivated people are, they still cannot use central processing if they cannot do so. In addition, this study found a description of Hoax Buster's communication patterns as misleading information resister in WhatsApp group media. This communication pattern can illustrate how Hoax Busters work as inhibitors of health hoaxes in the WhatsApp group.

Figure 1. Elaboration Likelihood Model of Persuasive By Hoax Buster



Source: Author design based on the Elaboration Likelihood Model (2020)

According to experts that have been summarised by Burgon and Huffner, persuasion communication is a communication process that invites and persuades others to change attitudes, beliefs, and opinions according to the communicator’s wishes without any element of coercion (Putri & Alfatih, 2019). In this study, researchers used the Elaboration Likelihood Model (ELM) to describe how the persuasion communication model carried out by Hoax Buster in conducting hoax busting.

Hoax busting is done in two ways: providing immediate responses in posts shared with groups or through private chats. This limiting hoax activity is carried out by confirming that the health information submitted is incorrect by including evidence of the findings and confirmation process that has been carried out by the Hoax Buster.

Information literacy needs to be encouraged to ward off hoaxes and anticipate citizens' trust in hoaxes. Information literacy allows people to delay their judgment and take the time to verify the information. Information literacy is also synonymous with one's ability to store and find the information again. Information can also be self-made, used ethically and effectively, and the knowledge gained can be communicated.

A Hoax Buster who corrects Hoax information on WhatsApp Group can be categorised as inviting others not easy to believe in information whose information is not necessarily accurate.

Figure 1 explained that Hoax Buster conducts hoax busting with full awareness and has a high motivation to encourage other group members not to get caught up in the Hoax. The things that make them motivated to do hoax busting are personal responsibility to correct the wrong information and personal experience because hoaxes have fooled them, and some of the information is very relevant to daily life.

Through these three confirmation methods, Hoax Buster can decide whether the WhatsApp group's information is fact or hoax. The three confirmation methods are not always done sequentially or even just do one. Usually, when there are suspicious information signs of the characteristics of the message received, Hoax Busters will send a reply message in the form of a question as a warning. For example, "Are you sure if this information is accurate?" In addition, if the information circulating is indeed worrisome and members of the WhatsApp group seem to trust the information, then the Hoax Buster will do a thorough check and erase the misleading information.

The hoax busting process is also not easy because some of the people who spread the hoax do not accept being blamed. Therefore, a hoax buster must have the ability to gather complete facts and messages, then extensive knowledge and skills in using media as a tool to convince group members who find it difficult to accept that the information, they are sharing is wrong.

Health information received by Hoax Buster may not be accepted and trusted. Therefore, they confirm in three ways: identifying the message received, whether it contains suspicious information or not; then ask the nearest health professional or doctor, and checking information obtained through Google. Checking information through Google is done with trusted news portals and quality health websites. Hoax Busters also consider the amount of information they find when examining information through digital media. Adequate information literacy can prevent the tendency to quickly believe in the circulating news without first testing its truth.

The response received by the Hoax Buster after dismantling the hoax certainly varies. Some people still confirm the information they

share, reject the confirmation given by Hoax Buster, and ignore the information that has been confirmed. On the other hand, some receive and thank Hoax Buster for the confirmation. Information literacy is also essential for successful lifelong learning and is a critical competency that must be possessed in the current information age.

The fact above is an initial natural attitude taken by humans when dealing with massive information. In terms of quality in argumentation, Hoax Buster is also very much needed and wants to think critically because some people find it hard to accept that they are wrong.

Robert Cialdini (Petty & Cacioppo, 1986) mentioned six cues that trigger a response program 'click whirr.' This gesture allows one to fly to the peripheral route with automatic steering: 1) Exchange (reciprocation); 2) Consistency; 3) Social Proof; 4) Desire; 5) Powers; 6) Scarcity. This study shows that consistency, social proof, and powers make people love to spread hoax information. They feel that the environment around them supports them to do this and also brings up unpredictable behaviours. A Hoax Buster is required to be brave to confirm health information. Not a few of those who did this Hoax Busting were involved in a dispute that eventually severs friendship or families.

In addition, they will also continue to spread hoaxes they get to others because that is part of their happiness. A Hoax Buster is required to be brave to confirm health information. In fact, not a few of those who did this Hoax Busting were involved in a dispute that eventually severs friendship or families.

The process of proving a hoax is undoubtedly not easy. A Hoax Buster is required to be brave to confirm health information. In fact, not a few of those who did Hoax Busting were involved in a dispute that eventually severs friendship or families.

## **CONCLUSION**

The spread of health hoax in the WhatsApp group in West Java Province was carried out by members who had various educational backgrounds, both secondary and higher education. This fact is concluded based on Hoax Busters' experience who usually find hoax propaganda on WhatsApp Group spread by those who come from various levels of education.

Hoax Buster is a very rare role in society. Those who act as Hoax Buster certainly have enough courage and knowledge about digital literacy. The motives for being a Hoax Buster in the WhatsApp group are: 1) personal concerns; 2) driven by personal experience; 3) driven by other people's experience; 4) driven by knowledge. The study also revealed Hoax Buster's communication patterns in the WhatsApp group in limiting misleading health information. The Hoax Buster communication pattern can be applied in other WhatsApp groups.

The role of the Hoax Buster is quite effective in limiting health hoax in the WhatsApp group. Communication can be quickly established because of the closeness's value between the hoax spreader and the hoax buster so that an explanation of the dangers of health hoax can be conveyed directly.

Researchers advise the government to pay attention to opportunities to eradicate hoax through the role carried out by Hoax Buster. Thus, to build an institution that focuses on eradicating health hoax requires sufficiently critical consideration by the government to raise awareness about the dangers of health hoax in the community.

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