Physical Distancing is Better than Social Distancing”: A Breakdown of the Shift in Society’s Psychology and Behaviour

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ABSTRACT
This study focuses on social and physical distancing narratives during the outbreak of Covid-19 in India. Researchers have attempted to explore the trajectory of discursive practices that define social and physical distancing and its impact on human psychology. Further, the study looks at the communication strategies that have been mediated to create a mediatized reality focused on keeping a safe distance from one another to prevent the spread of the virus that caused self-isolation, compelled quarantine, and worry over health issues like psychological distress, Depression, and mental anxiety. Researchers have incorporated mediation, analyzing the narratives around societal and cultural practices that are integral to societal behavioral patterns. Implementing physical distancing in India happened because many communities understood social distancing along caste lines. Major highlights of the study are that despite the efforts made by the Government, media, and other institutions, discriminatory practices existed.

KEYWORDS
Physical Distancing, Human Psychology, Behavioural Pattern, Media Narratives, Mediatization

INTRODUCTION
The disease of COVID-19 smote the whole world. Coronavirus disease 2019 is an infection brought on by the SARS coronavirus 2 (SARS-CoV-2) found in China in early December 2019. Unfortunately, it affected 5.93 million people and killed over 367,000 people worldwide since May 31, 2020 (1). A new terminology, ‘pandemic,’ arose daily and raised an urgent concern. Besides, it was a critical period for the globe as it impacted the existence of individuals with an increasing number of fatalities. This study explores the realities around one of the health mandates, explaining the understanding of a mediatized world through the narratives of ‘Social Distancing’ and ‘Physical Distancing.’ In this context, we assess the role of narratives catering to social and physical distancing found on news websites and government and non-
government online sources because, since the pandemic outbreak, they have played an important role in creating awareness among the masses. It was observed that a large section of society misinterpreted social distancing as community solitude or other discriminatory practices. When the concepts of mediation and mediatization are added to the pandemic information flow, it helps us to understand the media’s involvement and possible changes in the social and cultural environment.

**Change in narratives from social to physical distancing.**

Social distancing is a pre-existing scenario in Indian society, and people often relate it to distancing in ascriptive identities. A connotative understanding of social distancing is to distance oneself from ascriptive identities, race, class, caste, and gender (2). The term ‘social distancing’ is being replaced by ‘physical distancing’ because maintaining physical distance from individuals is essential for easing the diffusion of COVID-19, with minimal social contact with relatives, dear ones, and colleagues. It is learned that human prejudices are the primary drivers; individuals and communities’ distance themselves not according to medical discourses but according to their inhibitions as seen through their subjective perspectives. Social isolation initiated a disease we have not discovered or wish to find a vaccine. Caste, like a virus, can replicate itself (3). In the present context, social distancing means maintaining at least six feet of distance from people to avoid the danger of getting ill and slowing the intensity rate in the COVID-19 scatter. At the same time, the term ‘social distancing,’ which has still been widely utilized, gives the wrong impression, and leads to community solitude. The term ‘social distancing’ is misleading. It is not identical, it is fundamentally imprecise, it is false, and it is cognitively misdirected. The most recent Oxford English Dictionary alert emphasizes social distancing in the context in which it is currently used to physically distance oneself to reduce the risk of infection (4). Social distancing in the healthcare system relates to public diseases that achieve separation by limiting individual mobility and social connections during pandemics (5). The Centers for Disease Control and Prevention’s (6) recommendation for social distancing advises people to keep “at least 6 feet (2 meters) apart from others” and “away from public places...”.

‘Community distance,’ as an observational study concept, was not used in the precise definitions tailored by theorists. Some have argued that because social distancing is now a well-known phrase, shifting towards a more tangible phrase could no longer be relevant (7). Removing the phrase ‘social distancing’ from the global health terminology or substituting it with a word like ‘physical distancing’ or ‘dissociation’ will establish clear health communication and avert additional academic misunderstanding (8). The concept of social-to-physical distancing was discussed from a medical discourse standpoint in the article, viz, The Canadian Agency for Public Health, John Hopkins University, the US Centers for Disease Control and Prevention (CDC), which investigated the impact of physical distancing on the spread of Covid-19 and explained social distancing from a medical and health perspective (9).

**Narratives in media are an effective tool in creating awareness of physical distancing.**

As a result of the disease outbreak, social media has quickly become the preferred source of public comments, perspectives, and behaviors in response to various COVID-19 occurrences or prevention efforts. Social media has become an essential communication medium for governments, organizations, and universities to disseminate important information to the people. Through free and frequent, widespread advertisements, Facebook, Instagram, and TV news promoted the importance of ‘social distancing’ and ‘staying at home.’ Supermarkets used printed media to promote locations while adhering to social distancing protocols. Advertisements such as “‘Stay home, stay safe,'” “‘Face covers required in public,'” and so on are constantly mentioned during road and air transportation. “‘COVID-19: smaller is better, avoid meetings,'” "adequate space with one another and on the road," and “‘wash your hands, remain healthy,
avert COVID-19." These quotes were the only way for the public to remain aware of the pandemic. With the outbreak of COVID-19 in India, different government institutions published social distancing regulations and norms. Several state governments also issued regulations and restrictions on movement and gathering in public spaces. For example, the Delhi state government had banned “religious, cultural, ethnic, and democratic gatherings, along with rallies that include over 50 people” (10).

The Government constantly used various modes of information dissemination such as social networks, television, broadcast, and the internet with various taglines such as “Stay home, stay safe,” “Be clean, Be healthy,” “Jab TakDawaiNahi, Tab TakDhilaiNahi” (No carelessness until the medicine is discovered), “Do Gaj ki Doori, Mask Hai Jaroori,” etc. The primary objective of such online ads is to encourage people to practice healthy sanitation practices such as frequent hand washing, masks, and hand soap, keeping a social distance, preventing eye, nose, and mouth touching, and so on. The findings from a research article show that the practical application of social shutdown and knowledge among people about social distancing (to avoid inter-individual physical contact) significantly affects the incidence of COVID-19 in India. In the contemporary discourse of physical distancing, new media technologies and platforms have played a quintessential role in creating awareness and debunking the myth about social distancing. Further, social media has emerged as the primary and most effective means of connecting with people in India’s cities and remote areas. Smartphones connect 1.18 billion people in India, making it the most network-connected country. A caller jingled in various languages, educated citizens about the disease, and urged people to take precautions like washing their hands, disinfecting, and maintaining physical distancing. For regular COVID-19 updates, government social media pages on Twitter use the hashtag #COVID19India. In India, the website MyGov coronavirus hub was already focused on providing alerts to 846.2 million citizens, a toll-free helpdesk number, and an email ID to seek instant help. Graphs and charts on digital media and online news portals kept people current on the number of daily cases.

Furthermore, we have noticed that social distancing needs to be understood, with some people misinterpreting its meaning and withdrawing from all aspects of social connectivity. Physical distancing has been proposed as a much more concise word. However, it was also observed that along with the social media narratives, messages mediated through different news websites, government sources, and non-profit organizations had helped to shape the ideology and a popular belief in the understanding of distancing oneself from the other.

DISCUSSION & CONCLUSION
In this article, we have delineated the transitions from social to physical distancing. We have observed that deeply ingrained cultural disparities continued despite intensive attempts by the Government, media, and other organizations to encourage public health measures. However, the objective version of ‘Physical Distancing’ as explained in medical discourse was perceived in the mediatized reality. Moreover, mediaization offers a critical viewpoint on how media narratives influence the public’s comprehension and consciousness of physical distance. We can better understand how these narratives affect society’s behaviors and attitudes by examining how various media outlets convey information and messages on public health measures. This observation suggests that discourse is socially constitutive as different mediatized realities co-exist in our societal and cultural practices.

AUTHORS CONTRIBUTION
UK did the substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data. LR has given final approval of the version to be published. RG made important contributions to data conception and acquisition. AV served as the corresponding author and drafted or critically revised the article for important intellectual content and final approval of the version to be published.
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The authors haven’t used any generative AI/ AI assisted technologies in the writing process.

REFERENCES