

HEALTH COMMUNICATION DURING A PANDEMIC: WHAT IS OUR ROLE AS COMMUNICATION SCHOLARS? INTRODUCTORY NOTE

COMUNICAR EM SAÚDE EM TEMPOS DE PANDEMIA: QUAL O NOSSO PAPEL ENQUANTO ACADÉMICOS DE COMUNICAÇÃO? NOTA INTRODUTÓRIA

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When something happens that is truly unusual and gets widespread attention in a collective of human beings either because the population demand it or the powerful think it is in their interest that the population knows, we are faced with a situation that allows communication researchers and laypersons to study communication at work, directly, immediate, proximal, and one's own concerns still fresh. Only the unusual events might come between the researcher and her object. If the event is joyful, elation might occupy observers' hearts and minds. If the event is a threat, fears might distract the observer from observing. If a country is locked down, most everyday tasks in managing one's life get more difficult and consume more time.

A time will come, though, when the event will no longer preoccupy our lives, and we will start to wonder, *how did all this happen? And why? And what will the consequences be?* That time is long passed by for the covid-19 pandemic as many of us will turn to their favorite theories and try to explain, with the instruments these theories offer, why and how the pandemic materialized and developed. One can only hope that this enterprise will succeed as often as possible, and we formulate this:

thesis 1: it is our task to find out what we can learn from the covid-19 pandemic about communication.

Communication is in good hands as communication researchers understand more and more of it. Tradition has it that the treatment of communication subjects in the work of other disciplines is often shallow and lacking insight into the newest findings from communication research proper (Hannawa et al., 2014). Or so some of us (communication researchers) think. Irrespective of where the truth lies in this matter, it might be helpful for research not to start with theories from our own field of communication but from

the striking characteristics of the event and then try to uncover why and how they could develop. This order of thinking can be pursued by researchers of communication as well as those from other disciplines involved in the covid-19 complex. These include medical researchers from some disciplines, epidemiologists, virologists, political science, transportation experts, economists, lawyers.

Even the earliest rumors about a new infectious disease of the respiratory system, virulent in the province of Wuhan in China, came escorted by critique of communication behaviors. As early as a few months after the virus had secured a hold on the Western world, the term of an infodemic gained currency. Its prime address was the World Health Organisation, but soon there was criticism of the communication behaviors of more or less everybody who joined in the chorus of demands, reports, appeals, and defenses. Much of the criticism was Pavlovian, but to a large degree understandable, given the images of hospitals on the verge of breakdown under the burden of covid-19 patients challenging the capacity of healthcare institutions in wealthy countries of the world. The pace the virus took in its foray across the globe contributed to a critical tone in the coverage of the pandemic. The promises of such thinking are formulated as:

thesis 2: starting from special features of the pandemic and searching causes for them is a promising approach.

When lives are at stake and tremendous pressure to act is exerted on the political system, criticism in communication channels is nothing unusual, not in the channels of traditional mass media, nor in the communicative space that has come to be called social media. Criticism is not a bad thing as such, but it can become dysfunctional if it is based on erroneous information. We will come back to this, but first, ask what the special features are that studies could use as the starting point of inquiry.

The covid-19 pandemic was a first. Nothing like that has ever occurred. Of course, this assertion is not meant to deny that other infectious diseases in earlier days happened; just think of the so-called Spanish flu of the first winter after the end of World War I or the black death of 1347 and the following years. We do not want to open the discussion, where and how these cases differed from one another or what the similarities or differences were in medical terms. What made covid-19 different is the way communication devices were used and became part of the event itself, the pandemic, and the attempt to contain it. The 1918/19 influenza happened in a world that just then adopted the radio as the latest media information innovation, and television still had 25 years before it left a mark. And the black death swept over Europe 250 years before the first newspapers.

Five or six communication revolutions later, digital communication devices became part of the story. Daily reporting of indicators of social severity of the disease gave people a device to judge the pandemic's progress and later its retreat and return. People awaited numbers the relevance or the computation of which they may have had trouble to explain. On top of this, people were bothered with debates on which indicator was the best one to base political decisions on. The daily report on the progress of the pandemic reminded some of a patient in surgery who watched his own operation on a magnetic resonance imaging machine.

A quite different feature was pictures, mainly those that illustrated the capacity problems of the healthcare system. Pictures of current events used to be something you remember having seen on yesterday's television news, with hardly a chance to see it again. Today, with easy access to the internet, they have become something to google in your coffee break whenever you want to look at it again.

A communication exchange between a patient (information seeker) and a provider might end in a state that is worse than before. Think of a personal narrative of how a change in medication helped you tremendously. You post it on a social support website, where it is picked up by a seeker, who takes it for advice and spends time and energy trying to get a prescription. Doctors will not give it to you because they know better. Your frustration grows. The example leads to a state that is, in total, worse than before, and all three actors might have contributed to that: the doctor might not have done his best in explaining to you why the medication was not suited for you, thus creating more frustration than necessary. The poster could have been clearer about the personal nature of what he was to report. Something like a warning label of self might have impeded the misunderstanding. And you yourself revealed your low capacity for reading and interpreting the giver's tale. A similar example could be constructed with a message warning of a certain treatment and a miscomprehending seeker reading that as a recommendation.

Presumably, there are more ways that health communication is deeply affected by the potentialities of the internet. Think, for instance, of the ways the creators and advocates of conspiracy narratives could organize their followers and their strange worldview with the help of the world wide web. But we need not aspire to comprehensiveness here when the message is clear:

thesis 3: largely due to the existence of the internet, the covid-19 pandemic was the first of its kind.

We mentioned the presence of criticism already but stated that criticism as such is not problematic unless it is based on error. If we take communication seriously, as researchers and as participants alike, we have to insist that what is communicated is correct. As simple as this sounds, this demand is not only difficult to sustain, it is close to impossible to know when the truth is communicated and when it is not. Some pragmatic considerations might help.

Let us ask: how is untruth communicated? We do not mean the technical side, for which the answer would be: same as truths. There are some typical patterns that ease the spread of untruths and still allow the communicator to get away with it or avoid losing their credibility. Think of a scientific error that has not survived empirical testing, but not all colleagues have recognized that. One of this school of thinking advocates, in a public lecture, the error as a truth (which makes up an untruth), while a colleague on the next day contradicts (a truth). A reporter accurately writes two news stories about the two lectures, and another day later, another newspaperman files a story of scientific controversy,

depicting both camps in their best (or worst) light and following the papers maxim not to take sides in scientific controversies the author is not expert enough to judge by herself. As seen from a journalist's perspective, the two stories by the reporter are similar achievements as he did justice to both events. Common sense, however, would hold that the reporter told an untruth on the first day and a truth on the second. Of course, many journalists would take issue with finding the first story an achievement, holding that a writer has to be careful and truthful, and somebody who meets these ideals would have found the dubious nature of the first scientist's position.

The simple example presents a simple situation that can already demonstrate that the categories of truth and untruth can be difficult to assign. And the mix of forces that create untruths is, in any case, more complex than the probably most popular concept of media criticism: fake news. The term was, of course, coined by U.S. President Donald Trump before covid-19 came. What he meant is fairly easy to grasp: fake news is news he did not like. Such a subjective and unsupported concept discredits the serious and utterly necessary institution of media criticism because it reduces the criticism to an expression of a political opinion, invented by someone who would have been situated on the right-wing fringe of the major party in the US. The dubious origin of the term makes us plead for not using this term for a scientific approach that puts the achievement of the mass media on the discursive agenda.

The mismatch of elements in media coverage and effects indicates more than untruths; they hint at a form of system failure. Examples are ways of news reporting that are almost coercively understood as carrying the message that the corresponding events are becoming more frequent. The classic study is by Mark Fishman (1981) and deals with an alleged increase in crimes against the elderly, of which the crime statistics did not know anything, while the media put the subject on the agenda, and the people perceived an increase that did not exist. A variant of this is Mazur's (2004) hypothesis that people understand rising coverage of technologies as an indicator of a coming threat and become skeptical of the technology. This means that coverage alone can alter sentiments or opinions. The summary is this:

thesis 4: there are many ways not to tell the truth.

The newspaperman is writing the story of the controversy in the example sketched above. This part of the story hints at an input on news products coming not from the narrated materials but from the apparatuses that produce them. The demanded balance of the story does not depict any quality of events but a condition of the institution that produces news content. Whether and how something like this happens is also to be found for digital media in a situation of threat.

If we go back to media communication, we are often faced with an inclination of mass media to continue narratives that already exist. This appears to happen for other participants than the media. Most salient may well be the way the opponents of vaccination gained new strength. The fact is interesting enough to formulate it at once:

thesis 5: the covid-19 pandemic re-vitalized the traditional enmity of a section of the population towards vaccination.

Astonishingly, this could be observed in many different countries, and it is similarly confusing in all of them. Medical science and majorities of the population know for sure that vaccination is an efficacious, affordable, and largely safe device against becoming infected, and if infection occurs, a means to softening the course of the disease. It is utterly beneficial, and yet large sections of the population do not want it. The development was preceded by the continuing debate about wearing breathing masks. The discussion of vaccination, moreover, turns an old perception upside down: we were used to allegations that the powerful and the elites do not take the threats serious that normal people are exposed to in areas such as environment, food safety, on the job, and other. The new allegation is that elites invent threats in order to alienate people's attention from their actual lives.

Remains the “globality” of the pandemic. We have a large share of the planet's human inhabitants facing a biologically similar situation, to which many different reactions were possible. The coming of the virus is an example of what was called “the event as event”. Its opponents are the cultural, political, economic, and communicational forces to be scrutinized for causes and consequences as “event as news”. Such comparisons have proven to make excellent communication studies. If we do like our forebears did, the opportunities appear to be endless.

There are countless possible discussions related to the spreading of SARS-CoV-2. This issue is dedicated to “Health Communication During a Pandemic” and presents texts that offer us a systemic vision of Communication and Journalism during the pandemic, namely in the first year of SARS-CoV-2. We will organize this thematic issue into four parts.

The first part is strictly dedicated to Journalism and begins with an article signed by a research team (Felisbela Lopes, Rita Araújo, and Olga Magalhães) who portrays the news coverage of covid-19 through the analysis of the Portuguese press. Based on an extensive quantitative analysis of news texts, researchers seek to identify the most quoted news sources. Isabel Ferin Cunha, Carla Martins, and Ana Cabrera also chose Portugal as their research field, and they analyzed the communication strategies used by the Portuguese government in crisis management, discussing its reproductions on the television news coverage through an empirical study focused on the three first months of this virus' dissemination. The following article is signed by Andreu Casero-Ripollés, who names the main changes promoted by covid-19 in the journalistic field in Spain. He highlights five areas: news consumption, business models, working conditions, misinformation, and relationships with political actors. The first part is complete with a text by Gladys Adriana Espinel-Rubio, Raúl Prada-Núñez, Kelly Giovanna Muñoz Balcázar and César Augusto Hernández Suárez, who write about the routines and work practices of journalist women in Colombia and Venezuela during the health emergency context caused by covid-19.

In the second part, we highlight the role of technologies in constructing information and their impact on the public media space. Luís Bonixe chooses three podcasts that represent different models by media companies: one is produced by the public service radio (Antena 1), another one by an entertainment radio (Rádio Comercial), and the last one is produced by a digital medium that has its own radio (*Observador*). The researcher thinks of the importance of this new tool to health journalism since its role in covid-19 information is undeniable. Sandra Pinto, Eunice Oliveira, and Elsa Costa e Silva focus their research on the Stayaway Covid app. They analyze a sample composed of 182 news items published in the press, radio, and television, within which they identify news sources and conclude that politicians assumed a leading role in the consolidation of the dispute in this public health controversy, especially when it comes to the intention of making the app mandatory.

The third part deals with social media. By claiming that social media platforms are huge vehicles of health misinformation, Gil Ferreira built a questionnaire in order to identify antecedents and prerequisites for the belief in misinformation, reaching the conclusion that individuals with populist feelings have lower trust in institutional strategies to fight the pandemic, they privilege social media as a source of information. They show a greater acceptance of conspiracy theories on the disease. Cheng Cheng and Rita Espanha present a critical literature review on social media and covid-19, underlining relevant communication strategies and problematizing effects of what is published. Social media may be promoters of covid-19 related information and preventive health behaviors, even though there is a widespread discussion on the exposure to online content and mental health.

We close this theme issue with two articles centered on strategic communication. Based in Portugal, Gisela Gonçalves, Valeriano Piñeiro-Naval, and Bianca Persici Toniolo analyze government communication during the beginning of the second wave of covid-19. They assume that the (un)fulfillment of authorities' recommendations is directly associated with trust in news sources. Their work is partly grounded in an online questionnaire survey developed within an international research from European Public Relations Education and Research Association *Com-Covid* network. Andreia Garcia and Mafalda Eiró-Gomes focus on health users, and they seek to understand the health center clusters and institutions in charge of primary health care involvement in health communication related to covid-19.

The Varia section includes three articles. Jorge Veríssimo, professor at ESchool of Communications and Media Studies of Politécnico de Lisboa, shares his reflections on the extension of advertising strategy to storytelling. In his article, he highlights the communicational wealth of this narrative process on the persuasive message of advertising. Simultaneously, the author discusses the evidence of *pathos* and *ethos* in brand communication, asserting the roots of contemporary advertising in classical rhetoric. Based on three language contexts, Enrique Castelló-Mayo, Margarita Ledo-Andión, Antía López-Gómez, and Silvia Roca Baamonde explore the relationship between the normalization

process of European minority languages and the practice of subtitling films. The researchers from the University of Santiago de Compostela argue that the screening of subtitled original versions safeguards the originality of the audiovisual work and promotes linguistic diversity, with significantly lower costs than the dubbing process. Drawing on several authors who have discussed control systems, the prison context, and security issues, Rafaela Granja unveils “The Invisible Implications of Techno-Optimism of Electronic Monitoring in Portugal”. The Communication and Society Research Centre researcher argues that the discourses disseminated by official institutions, the media, and the surveillance industry promote a technological optimism that narrows the public debate on the reform of justice and the penal system instead of promoting dialogue on these phenomena’s social and cultural roots.

Back to SARS-CoV-2: it is undeniable that in a global world, disease knows no geographical boundaries and that communication and, by extension, journalism are central elements in fighting a pandemic. Hence they deserve deep and continuous discussions. This journal’s issue represents a contribution from the academic community to that important path, and it collects researches from different countries and settings, a much-needed practice in the field of health communication (Hannawa et al., 2014).

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