Risk Communication during COVID-19 and National and Global Lessons Learned

Coman, A. Ioana; Lilleker, Darren; Gregor, Miloš

"The problem we have in mid-September 2020 is that no-one knows what the endgame is with COVID-19" (Lilleker, et al., 2021, p. 333). This realization began our previous volume's concluding chapter, dedicated to the crisis political communication in 27 national and two supranational case studies, during the first waves of COVID-19. The analysis of various communication strategies and rhetoric used by the various governments showed how scarcely prepared were the national and international institutions to successfully manage such a global crisis, we also found highly varying approaches across the nations and how the culture and politics shaped communication, policies and outcomes.

The pandemic generated by COVID-19 was a crisis of global proportions that stretched over several years with moments when it seemed that the disease and the virus were defeated only to come back with a vengeance as the virus keeps mutating. This has led to a rare characteristic of crisis and risk management and communication –a constant back and forth between crisis and risk phases/stages of management and communication. Consequently, this led us to the question of how well organized the governmental risk communication strategies were within a more targeted and representative range of countries across the dragged more extended period of the COVID-19 pandemic. Enter this book: a rich analysis across 17 countries of each government's risk communication processes and messaging through the lens of Warren and Lofstedt's (2021) risk communication analysis framework. The various analyses of countries offered an opportunity to examine risk communication approaches across a variety of forms of government, cultural traditions, and attitudes towards public communication. Holistically, the

book allowed a comparison on a global scale that can have both analytical value (in building new theoretical models) and predictive value (building risk communication strategies suitable for each circumstance). Following Warren and Lofstedt's framework we can identify certain constant traits of the various risk communication messaging and strategies as evidenced in the analysis from the individual chapters and below we briefly explore the different and similar threads between the countries analysed.

Messenger Attributes

Throughout the nations analysed, communication was predominantly top-down, with small differences or variations regarding the dominant entity/institution or personality. In some countries, the President or Prime Minister (usually a charismatic figure) was the messenger or source who controlled the message flow, as was the case of Bolsonaro, Narendra Modi, or Xi Jinping. The exception were two or three cases in which either the health minister (Italy) or the spokesperson (Thailand) were the ones who occupied the spotlight. A special case was that of New Zealand, where the Prime Minister and the Minister of Health shared the spotlight and responsibility for communication, creating a situation characterized as the "extraordinary nature of this pairing."

There seemed to be few situations in which the health experts were not in the backseats. A more unique example, in Sweden during public communication, the politicians occupied the backstage seats while the doctors and other specialists were the ones who conveyed the important messages to the public.

Throughout all the analysed countries and throughout the period studied, the dominant means of communication were those consistent with a top-down system: press conferences, briefings, periodical TV appearances of the political leaders. Sometimes these ended up

becoming “collective rituals” such as in Italy, Ghana or New Zealand. Additionally, and still consistent with a top-down unilateral approach was the creation of special websites and social media pages. Even through these means of communication which could have allowed a more interactive approach and public listening, the studies in this volume note few situations of dialogic communication, often mentioning the dissatisfaction of the public who expected their questions to be answered. An interesting and picturesque initiative is that of Mexican officials who came up with cartoon characters “Susana Distancia” (Distance Susana), accompanied by others such as “Prudencia” (Prudence) or “Esperancia” (Hope) in an attempt to make the prescriptions recommended by health officials more concrete but also agreeable.

Some of the chapters highlight the cases of political leaders who have become role models through their appropriate behaviour in crisis situations, reinforcing by personal example the risk and health preventive instructions sent through different messages and through different media: the Italian Minister of Health, Prime Minister and Minister of Health from New Zealand, or spokesperson from Thailand. On the other hand, it seems many of the other political leaders presented themselves as role models trying to create or impose the image of “father of nation” or “saviour of the nation” – such as was the case of the Prime Minister Conti from Italy, Babiš from the Czech Republic, Modi from India, or President Xi from China. The approach was observable more often in countries where populists or leaders with autocratic tendencies were present. Several countries have experienced changes in presidents, prime ministers, or governments, either due to elections or due to resignations or the loss of majority support, as was the case in the U.S., Italy, or the Czech Republic. This in turn led to various changes in communication techniques, but in no case was the general strategy changed (e.g., top-down).

Consistency and clarity of COVID-19 communication

The chapters of this book show that there is no common denominator in terms of consistency and clarity of communication, even if it would have been expected that in a crisis and risk situation like this at least clarity of communication would be dominant. This seems to be explained by four main causes:

a) the long COVID-19 duration (years) which meant different periods of the pandemic so that a consistent or efficient communication strategy developed for one stage no longer worked in a later other stage.

b) the differences born from political polarization (especially in countries that experienced or faced electoral campaigns during this period) or the differences of interests between politicians, concerned with maintaining political and popular support, and health experts, concerned with the application of risk and crisis preventive measures (see the U.S. or Brazil). A special case is represented by the situations in which within the same governing team, there are inconsistencies between the statements of the same leader at different times (see the Prime Minister Babiš in the Czech Republic) or between the statements or positions of the different members of the government (see Israel or the U.S.).

c) The many dramatic situations that erupted unexpectedly in some cases forced changes in direction making having fixed strategies difficult – for example the uneven waves or new mutations of the initial virus.

d) In some countries, the divergences between risk communication advocated by the central government and that of the specific regions/localities are noted (see Italy, or South Africa).

COVID-19 communication methods

In terms of communication methods in such conditions it is natural, in a sense, that the predominant method was observed as a top-down and one-way. The differences appear, however, as the chapters show, between a top-down communication generated by the circumstances of the crisis situation and a top-down communication in which authoritarian political structures are added to these circumstances (see China). This means, as the analyses on China, Iran, Egypt, Vietnam reveal, that to the element of one-way communication are added various censorship measures, blocking journalists' access to information, when possible, blocking information from outside, and intimidating those who contradict or criticize the official message.

Significant differences also appear between the use of emphatic rhetoric with an emphasis on emotional elements and other cases in which dry informative messages lacking the ability to mobilize are dominant (as we will highlight later when we discuss the frames used in official messaging across nations).

Another constant or common note was - unfortunately - the absence of civil society from the communication system in which the lack of dialogic strategies has also inevitably led to the marginalization of essential institutions such as NGOs, the academic environment, the press (often transformed only into an amplifier of government messages). The numerous minorities of various nature (ethnic, religion, race, sexual orientation, etc.) were often not involved in the discussion of the measures and especially in their implementation, something that caused dissatisfaction, sentimental marginalization and the inevitable acceptance of conspiracy theories, sensationalist information and even fake news. In some cases, governmental officials used inclusive messaging as a rhetorical means to win support, but lacked the ability to follow through

on the implied promises, such as in the case of Modi's messaging to his "underprivileged brothers and sisters" which then failed to translate into tangible programs for their well-being. A few exceptions were the involvement, even if not strong enough or from the beginning, of the Māori minorities in New Zealand, or of chieftaincy and social religious leaders in South Africa. Another notable example was the Swedish government website which in order to include all affected minorities reproduced information in 29 languages.

COVID-19 message attributes (framing and emotive messaging)

A diversity of frames, which in some cases evolved and changed over the phases of the pandemic (in others not so much), could be noticed across the different nations throughout the chapters. Generally, these numerous frames in government messages could be divided into three large categories:

a) ***Frames focused on the specific situation of the pandemic***. Here some of these are focused on the idea of mobilization and the fight against the virus, such as "the war against COVID-19" (Czech Republic); "we defeat Coronavirus" or "with the divine help we will defeat Corona" (Iran), "fighting pandemic" (Vietnam) or "the enemy is the virus" (Ghana). Other frames emphasize the values and behaviours that must guide people's actions during the pandemic, such as: "alarm and raise consciousness" or "endurance and perseverance" (Sweden), "reduce panic" (Egypt), "virus vigilantes" (Japan), "prepare but not panic" (India), or "Stay home. Stop the disease." (Thailand).

b) ***Messages whose frames were less related to the pandemic but related to the political objectives or the ideology of the governments of the respective countries.*** Such were the messages of Bolsonaro whose messaging' frame was identified as "Brazil cannot stop"

emphasizing the idea that the economic development of Brazil and its effort to become one of the strongest nations cannot be stopped by the virus. Also, the Chinese leadership was noted to have broadcast a series of messages whose frame was identified as “Battle against the influence/aggression of the Western world”, something in line with the ideology of the Chinese Communist Party.

c) ***Frames that are more generic and can be related to any risk or crisis situation and beyond***. These suggest ideas that can be applied to multiple contexts, such as of responsibility, solidarity, etc. Examples include: it's up to you (US), unity and solidarity (China), or everything will be fine (Italy).

In some countries, these frames changed when, in the later phases of the crisis, new challenges appeared, and communication campaigns used messages focused on new ideas, values and norms of behaviour. For example, in Italy in the first stage of the pandemic, the Conte government used messages focused on frames such as “adopt preventive behaviours”, “foster dialogue” and “guiding individuals in situations of danger”; while Mario Draghi’s government which came in the second phase of the pandemic, sent messages focused on frames such as “respect the rules”, “individual responsibility” or “restart the country”. Frame changes were also identified in Sweden, Israel, Japan, India, etc.

In terms of emotional appeals, most of the messages, and frames that structure them, were focused on positive emotions such as hope, togetherness, solidarity, etc. The exception is the Czech Republic with messages focused on fear, or China with messages focused on anger toward the enemy (i.e., Western Power rather than Covid).

In some countries, the construction of messages was marked by political polarization and the politicization of the virus, but also of the preventive/risk measures. Two examples are already

well-known Donald Trump and Bolsonaro. In these cases, a chasm separated the speech of health experts and that of political leaders - the latter promoted denialism claiming that medical data are exaggerated or the product of a conspiracy. They also supported and promoted fake drugs that would have miraculous effects, criticized and even cancelled preventive lockdown policies, and demonized health experts, in a permanent effort to reduce their credibility. In many other countries, the COVID-19 issue was not politicized, even if there were criticisms of the opposition to the government's strategies.

Public trust in government

As is to be expected in the face of such a large-scale crisis (both in terms of victims and its duration), governments cannot maintain a high degree of trust. Even in New Zealand, which was given as an example of effective navigation of the COVID-19 pandemic, limiting the damaging consequences of the virus, maintaining political balance and having a unifying communication strategy, a certain decrease in trust in the government was noted. What is referred to as “pandemic fatigue” occurred which led or contributed to a decrease in trust in the government. In other countries, declining trust in governments was due, as the studies in this volume show, to the intersection of several factors:

a) The long duration of the pandemic with the loss of human lives and the blocking of the normal functioning of society.
b) The dramatic effects of the lockdowns that affected millions and millions of people and that, even if they had positive results on a medical level, on a social and economic level, they had a negative effect on people’s lives, relationship and so mental health and generated a state of anger and frustration.

c) Crisis and risk management errors that led to numerous “U-turn” type decisions, creating confusion and leading to uncertainty among the public as to the government’s ability to be on top of and manage the situation.
d) The communication errors that generated, even when the measures were correct, irritation and the appearance of chaotic management.

Additional factors observed in some nations where things such as the circumstantial situations such as suspicions of corruption by the administration (Ghana), permanent and violent attacks from the mass media (Thailand), the circulation of rumours and misinformation from social media (in a lot of these countries analysed), or public distrust in the vaccine manufactured in the respective country and the frustration that they cannot benefit from vaccines with recognized effectiveness (Iran).

Regarding misinformation and disinformation – the majority of countries faced this phenomenon to a greater or lesser extent, especially due to inaccurate or false information circulating on social media. While some governments could have control over the prevention messages sent top-down and have the means through legislative measures to control misinformation on mainstream media, social media is largely beyond regulation and allowed the perpetuation or circulation of numerous elements of disinformation or at the very least the exaggeration of the real data. Studies also noted that, in certain cases at certain moments of the pandemic, the mass media tended to spectacularize or sensationalize the events during the pandemic, but we must note that they were not the source or cause of large flows of disinformation. In a way, the exaggerations of journalists had a much smaller impact than the exaggerations and promotion of conspiracy theories by political leaders, charismatic influencers or various celebrities (as was the case in the U.S. for example). A remarkable initiative belonged

to the Italian government, which created a website “Attenti alle bufale” (Beware of hoaxes) in which misinformation, rumours and false media reports related to COVID were reported and dismantled, which contributed to defusing some tendencies to exaggerate the negative effects of COVID-19.

Lessons for risk communication

While in May 2023 the Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization (WHO) declared “with great hope” the COVID-19 was no longer a “global health emergency,” he warned that it remains a global health threat[i]:

> COVID-19 claimed a life every three minutes – and that’s just the deaths we know about. As we speak, thousands of people around the world are fighting for their lives in intensive care units. And millions more continue to live with the debilitating effects of post-COVID-19 condition. This virus is here to stay. It is still killing, and it’s still changing. The risk remains of new variants emerging that cause new surges in cases and deaths. The worst thing any country could do now is to use this news as a reason to let down its guard, to dismantle the systems it has built, or to send the message to its people that COVID-19 is nothing to worry about. What this news means is that it is time for countries to transition from emergency mode to managing COVID-19 alongside other infectious diseases.

At the conclusion of our work on this book, in 2024, COVID-19 still impacts our world – new variants, new cases, and people dealing with long health issues from the virus are prevalent across societies. As Dr. Mandy Cohen, director of the U.S. Center for Disease Control and Prevention (CDC) argues there is a hard balance between the confidence of being done with “the

emergency" phase of this pandemic and the continuous need for governmental and individual risk management in this reality that people should not "forget that COVID is still here and still poses a risk."[ii] Consequently, it is more important than ever for scholars, practitioners, health experts and governments to continue to look at the data and adapt and improve their approaches, as Balog-Way et al. (2020, p. 2253) stressed: "Perhaps more than any other event in recent memory, the COVID-19 pandemic has underscored the sizable gap between risk communication research and practice in many, but certainly not all, countries and organizations."

Within this book, in reflecting on the various challenges and some triumphs of risk communication during the COVID-19 pandemic as evident in the nations analysed representing the diverse politics and cultures of the world, several evident lessons emerge that we hope can be of help.

1) **The importance of clear, consistent and transparent communication cannot be overstated**. While this is advice given in every basic crisis and risk communication lesson or manual, the pandemic showed us once again, at a global scale, what happens when the messaging is or is perceived as inconsistent, confusing and not transparent. Effectively conveying information, engaging the public openly, engaging in dialogic communication and listening sessions, and maintaining transparency in the decision-making processes yield more successes in terms of building and maintaining public trust and ultimately achieving higher compliance with public health measures. Conversely, instances of misinformation, conflicting messages, lack of transparency or perceptions of corruption and mishandling, eroded trust and hindered efforts to contain the spread of the virus.

2) **Tailoring communication strategies, messaging and sources to diverse audiences and contexts is essential during such prolonged and global scale crises**. Risk communication rarely is a one size fits all affair. Cultural norms, language barriers, socioeconomic disparities, varying levels of literacy should be considered and addressed throughout the various stages of messaging (from framing to channel and source selection). Moreover, flexibility and adaptability are also essential to resonate with various publics and especially so when it comes to traditionally underserved and disproportionately affected publics (Coman et al., 2023; Coman et al., 2024; Kalocsanyiova et al., 2023). As these chapters and previous research (see among many others, Bailey, 2021; Coman et al., 2023; Guidry et al., 2023; Kalocsanyiova et al., 2023; Nan et al., 2021; Strydhorst & Landrum, 2022) showcase not understanding various audiences and early and consistently tailoring these messages and sources to various audiences can permanently hinder public health efforts.
3) **The need for collaboration and coordination among stakeholders and different message sources at all levels from local, regional, national to international levels**. Such a global crisis showed the interconnections of global health and the imperative of collective action. Those who fostered collaboration between government agencies, healthcare providers, community organizations and private sectors were better at mobilizing resources, sharing expertise and implementing cohesive public health measures. Moreover, as Paulik et al. (2020, p.552) urged early in the pandemic we need to "elevate the role of science in public and political decision making" and:

> The health sciences community must seize this opportunity as a call to action to more forcefully and effectively convey science and health risk information to the

world, especially during this and future times of crisis. Now is the time for health and science professionals to sharpen communication strategies to guide decision makers to protect the health of individuals, families, communities, and nations.

4) **The critical role of emotional appeals, of empathy, compassion and sensitivity in risk communication**. This pandemic showed that risk communication cannot be reduced to solely scientific dry, albeit right, messages without addressing the fears, uncertainties of the public. Doing so helps foster trust and a sense of solidarity, it can foster the we-ness that is argued to ensure the whole society will work together, collaboratively, to mitigate the impacts of a crisis on all its members (see Jetten, 2020).
5) **The imperative of implementing proactive, pre-emptive communication and the need for preparation, building a resilient community and trust before crises hit**. Early and transparent communication about emerging threats, potential risks and mitigation measures can help prevent the spread of misinformation, alleviate panic and empower individuals to take certain measures. Timely communication enables swift responses and facilitates the implementation of evidence-based interventions that could better contain outbreaks. Moreover, there is a need for better health education and information on preventing the spread of viruses long before an outbreak or pandemic hits. Publics need to better understand the way of science (the uncertainty element and why certain preventive measures might change – as was the case with the advice on the use of face masks). Finally, trust was already weakening before the pandemic in a majority of countries, in some cases years before (Edelman Trust Barometer[iii], see archives for 2018-2020).

As many nations still navigate the ongoing challenges of COVID-19 and its variants, and especially as governments should prepare for future health crises, these chapters highlighting failures and victories and their lessons offer invaluable insights that can inform and improve future pandemic preparedness and response efforts. The pandemic, as well as other global crises, such as climate change, underscore the importance of integrated and collaborative risk communication. Integrating these lessons into the crisis and risk communication strategies is paramount. By prioritizing clear, transparent, and culturally sensitive communication, fostering collaboration across sectors and communities, and emphasizing empathy and proactive engagement, we can enhance our collective resilience, build a ready, educated and united public, and mitigate the impact of future pandemics or other challenges on a global scale.

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[iii] Edelman Trust Barometer, https://www.edelman.com/trust/trust-barometer