Swedish exceptionalism, herd immunity and the welfare state: A media analysis of struggles over the nature and legitimacy of the COVID-19 pandemic strategy in Sweden

Katarina Giritli Nygren
Forum for Gender Studies, Mid Sweden University, Sweden

Anna Olofsson
Risk and Crisis Research Centre, Mid Sweden University, Sweden

Abstract
Compared to many other countries, Sweden has managed the COVID-19 pandemic with no lockdowns, less regulation and more voluntary action expected of citizens and organizations. In this article, the authors explore media representations of national preventative strategies and how they were anchored in broader discourses. The article aims to analyse the development of crisis narratives and struggles over legitimacy during the first phase of the COVID-19 pandemic in Sweden. Employing a critical discourse analysis, the authors investigate the editorials and opinion articles in Sweden’s largest morning newspaper, Dagens Nyheter, during the spring of 2020. The authors combine descriptive analyses of the development of the crisis narratives with discursive analyses of conflicting ideologies in the debate. The study indicates that three crisis narratives dominated the debates: health, the economy and democracy. Within and between these narratives, struggles over legitimacy in the handling of COVID-19 were captured in several conflicting perspectives or paradoxes: Swedish exceptionalism versus the world, centralization versus decentralization and herd immunity versus herd humanism.

Corresponding author:
Anna Olofsson, Risk and Crisis Research Centre, Mid Sweden University, Kunskapens vag 1, Oestersund, 83125, Sweden.
Email: anna.olofsson@miun.se
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Introduction
In the early summer of 2020, the Swedish government’s management of the COVID-19 pandemic stood out in comparison to that of other nation-states. The world also seemed shocked by Sweden’s relaxed approach to COVID-19. By the end of June 2020, the official statistics showed that there were 68,451 confirmed infections and 5333 deaths from a total population of 10.3 million people in Sweden (Public Health Agency of Sweden, 2020). These figures were dramatically higher than those of neighbouring countries such as Finland (7241 infections, 328 deaths, total population of 5.5 million; THL, 2020) and Denmark (12,832 infections, 606 deaths, total population of 5.8 million; SST, 2020), comparisons that came to play an important role in the crisis narratives. These figures have been questioned in terms of how infections and deaths should be accounted for and compared between countries (Modig et al., 2020), but these are the figures that are used internationally, for example, in the WHO’s situation reports (World Health Organization, 2020). The Swedish government launched a number of measures to manage the spread of infection, support the health sector, assuage people’s concerns, reduce the effects on the Swedish economy, among other things, but it did not close schools, and the society remained more open compared to other European countries. The Swedish strategy relied, as many other countries, on individual citizens’ sense of responsibility (Regeringen.se, 7 April 2020). Citizens received daily information and instructions about individually targeted self-protection techniques from the website of the Public Health Agency of Sweden and press conferences held by the state epidemiologist Anders Tegnell, Prime Minister Stefan Löfven and other representatives of the government and expert public agencies. All these public figures continued to underline the importance of the role that citizens play in stemming the spread of the virus and avoided measures to enhance law enforcement that sought to restrict citizens’ rights. In a previous article, we reflected on the Swedish strategy and suggested that the Swedish management of COVID-19 very much fell under the description of what Foucault (2003 [1976]) called the governing of conduct and individual responsibilization (Giritli Nygren and Olofsson, 2020), a political rationality with a long history in the Swedish welfare state (Berg, 1914; Olsson, 1997).

The path chosen by the Swedish government, which initially had broad political support, even from opposition parties, was heavily criticized as early as 8 March by Peter Wolodarski, the editor-in-chief of Sweden’s largest morning newspaper, Dagens Nyheter (DN). In his weekly chronicle, Wolodarski (2020a) wrote:

Excuse me, but why does it take a couple of weeks for Swedish authorities to respond to reports of serious virus spread and a severely stressed health system? Don’t they [the government] understand that valuable time is lost? Thousands of Swedes have now been able to make those trips [ski trips to Italy] against better knowledge – it should not have been this way.

This kind of open criticism from leading media representatives might be expected. However, if we look at previous pandemics, the Swedish mass media have lined up and
supported the government’s crisis management, at least in the initial phase (Mulinari and Vilhelmsson, 2020). For example, during the H1N1 (Swine flu) pandemic in 2009, the mass media worked with expert authorities and the government, creating a strong alliance that promoted mass vaccination for the common good, even though it meant downplaying the fact that vaccination was only beneficial for a minority and might even have been harmful to some (Mulinari and Vilhelmsson, 2020: 337).

Although somewhat surprisingly, the disease had not (yet) been discursively incorporated into the populist discourses that dominated the media landscape before the pandemic, now, for a while, the main media focus was not on migration, crime and order, and opinion ‘polls showed increased public support for the Social Democrats’ and Prime Minister Stefan Löfven (Sunncrantz 2017:43, Kantarsifo, 2020). ‘Instead of pitting experts against common sense, ordinary people or politicians, critics pitted Tegnell and Swedish exceptionality against domestic and foreign experts in order to generate conflicting narratives in the news coverage’. (Sunncrantz 2017:44). Part of these conflict narratives involved people’s trust in politicians in the long run and challenges for democracy as we know it. In the same critical chronicle mentioned previously, Wolodarski (2020a) wrote:

If the politicians who are advocating openness, pluralism and tolerance are not perceived to be in control, doors are opened for populists and authoritarian nationalists. The grave of globalization is being dug. The space for gullibility and indecisiveness is less now. The risks have increased. Do you trust Sweden to be well prepared when the unexpected happens? Do you feel safe with our preparations in case of war, economic crises or pandemics? Facts and science must always be the basis for important decisions. But when circumstances change quickly, readiness and an immediate ability to adapt are also required. The politician’s responsibility is broader than that of the professor. No Prime Minister can outsource leadership in a national crisis to a state epidemiologist, chief economist or commander-in-chief.

Thus, the editor-in-chief called for political leadership in the situation in order to avoid populism and future political crises. He was not alone, and in this contribution, we are interested in exploring the kinds of crisis narratives envisaged by the opinion articles in DN and the forms of debate these differing narratives incited and performed. We analyse the development of the crisis narratives and discursive struggles over legitimacy in the debates during the first phase of the COVID-19 pandemic in Sweden. Employing a critical discourse analysis, we investigate the editorials and debate articles in Sweden’s largest morning newspaper, DN, during the spring of 2020. We also combine descriptive analyses of the development of the crisis narratives with analyses of conflicting ideologies in the debate.

**Exploring the ideological aspects of the discourse in the COVID-19 crisis narratives**

The following analysis explores discursive struggles over legitimacy in an ‘agenda-setting’ Swedish newspaper during the first phase of the COVID-19 crisis in Sweden. Here, we trace the ideological struggles within the narratives using critical discourse analysis. Tracing discourses and uncovering the performativity of risk require deciphering how
media representations of proposed preventative strategies can be seen as a consequence of the articulation of a particular problem in terms of risk and its causal explanations. Pandemic narratives travel across the public sphere through news, entertainment, social media, etc. – narratives that both shape and are shaped by this security pact and discourses of power (Davis, 2017). Wald (2008) introduced the term ‘outbreak narrative’ to describe mediated narratives of global infectious diseases and how they shape the way we understand and manage pandemics. Thus, crisis narratives can be used for the purposes of governance, disciplining citizens through dominant messages rooted in cultural discourses, politics and science (Davis, 2017). For this reason, we investigate how the crisis narratives activated during the pandemic acted in conjunction with other narratives and discourses of power to make COVID-19 understandable and manageable. It should be mentioned that our focus is on discursive/ideological utterances in media and not on their manifestations in people’s practical behaviours. Thus, we turn to critical discourse analysis of social actors, discursive strategies and intertextuality (Hodge and Kress, 1993; Lemke, 1995).

According to Hodge and Kress (1993), two broad discursive strategies are used in ideological struggles: the representation of ‘reality’ and the manipulation of the orientation to reality. We explore these discursive strategies in this article: In what ways were the events and participants represented, and how were these events and participants evaluated? One of the particular realizations of these strategies is through the activation of risk discourses, the construction of threats and what needs to be safeguarded through discursive means.

Previous pandemic studies with a biopolitical perspective have, among other things, analysed the myths, narratives and the problematization of the specific pandemic and the public (Davis, 2017; Davis et al., 2011). The internal dynamic of risk discourses involves the articulation of some kind of threat, a critical point of no return and a suggestion of certain preventative strategies. Following Foucault (1990), we view risk and its embedded presence in power discourses as a key element in understanding how knowledge and dominant discourses coalesce with the exercise of power, particularly through the logic of security (see also Giritli Nygren et al., 2020). During the current pandemic, as in previous ones, we have seen how such logics are used to serve and legitimate certain actions (Davis et al., 2011). For example, when and if exceptional measures are taken during a pandemic, such as COVID-19, depends on the ‘security pact’ between the government and its citizens (Hannah et al., 2020).

However, it is important to point out the dynamic and fluid nature of these struggles and the positions that they help construct. Exactly what comes to be considered a risk concerning a crisis is influenced by the socio-spatial-temporal context, and new risks arise, while old ones disappear. However, it seems possible to understand a particular risk in a given socio-spatial-temporal context in terms of how this risk is done – in other words, how it is understood, described and used by different actors (Giritli Nygren et al., 2020).

Ideologies are inscribed in discourse; as a result, we can try to describe and explain how the different ideological positions enacted through the texts analysed in this article represent principles that help explain the world and serve particular interests. The discourses triggered by the COVID-19 pandemic can be conceived in the context of
discursive formation, as they are a set of discourses dealing with the same subject, thereby building a discursive reality. The discourses activated in the newspaper texts emerge in a traceable moment and as a response to an explanation about or an expansion of other discourses. Analyses of the resources characterizing the representation of these events – and the intertextual relations constructed through them – provide a possible explanation for the different interpretations and appropriations that COVID-19 has had to serve particular ideological interests at the national level, which are expressed in the sampled articles.

**Corpus and analytical method**

The corpus is based on first-hand analyses of editorials and debate articles in one of the Swedish quality morning newspapers, *DN*, Sweden’s largest morning newspaper. It reaches 1.1 million people daily and has about 800,000 unique online readers each day (Orvetso konsument, 2019). It is ‘independently liberal’ in orientation, and its ambition is to perform ‘agenda-setting journalism’ and be the opinion-leading newspaper in Sweden (*DN*, 2013).

We collected our corpus through an online search in a national digital archive of the news outlets, Mediearkivet (Retriever). Mediearkivet is Scandinavia’s largest digital archive of media sources, in print and online, and it is possible to conduct online full-text searches through it. We searched for all editorials and debate articles between 1 January and 31 May 2020, and deployed two separate searches for the editorials and debate articles using the keywords ‘corona’ and/or ‘COVID’. We also searched editor-in-chief Peter Wolodarski’s chronicles mentioning corona/COVID. As a result, we obtained 7 chronicles, 76 editorials and 43 debate articles. Debate articles can be described as letters to the editor where authors outside of the newspaper, often experts, politicians or stakeholders, debate a particular subject. In our corpus, the majority of authors were scientists from various disciplines, including medicine, the economy, political science and philosophy. A number of articles were written by ministers (e.g. Minister of Finance Magdalena Andersson) and party leaders (e.g. the Liberal Party’s Nyamko Sabuni, the Centre Party’s acting party leader, Anders W Jonsson, and the Conservative Party’s Ulf Kristersson). Other examples of authors were a former minister, chairpersons of NGOs, religious leaders and union and industry representatives. The texts and/or opinion pieces thus bear witness to the discourses that operate within this national agenda-setting newspaper.

Consequently, it is the discourses themselves, rather than the documents and individual statements, which are the principal subject of analysis here. For this reason, the material is treated as a whole: the various texts were assembled and treated as a single document, and the statements of individual interviewees are, therefore, of lesser significance and can instead be treated as coming from exponents of a discourse (Fairclough, 1995).

The process of analysis began with a brief read-through of all the articles to identify those that might be irrelevant, which resulted in the exclusion of eight articles. In most cases, this was because COVID-19 was simply acknowledged as a time signifier and was not the main subject of the article. Altogether, after omitting these articles, the empirical material consisted of 117 articles. It is important to note that the starting date of our research, 1 January 2020, marks our attempt to include the start of the escalation of the pandemic.
The first step in the coding process involved identifying the development of the main themes within the crisis narrative of the COVID-19 debates. During this process, all articles were read and analysed by the authors, and three crisis narratives were identified: health, the economy and democracy. Table 1 illustrates the distribution of the three narratives across the chronicles, editorials and debate articles. The articles often covered more than one of the narratives. For example, while the chronicles included stories about both democracy and the economy, the main story in each chronicle focused on health.

Moving from themes and narratives to discourses and ideologies, we identified how the narrative practices were embedded with interests, values and beliefs in an ideological sense. We explored discursive strategies used to define and evaluate the pandemic in the articles by focusing on how events and participants related to COVID-19 were represented and ideologically set. Tracing discourses in this way enabled us to examine what was discursively normalized and what was silenced or hidden through this normalization (Fahlgren et al., 2016). Narratives produce meaning and interpretations, allowing for the evaluation of events in terms of hopes and fears; they display epistemic, moral and ideological stances and discursive struggles (e.g. Hodge and Kress, 1993). Tracing discourses and uncovering the ‘performativity’ of risk involve deciphering media debates, which can be seen as a consequence of how the problem was articulated (Giritli Nygren, 2019). As such, texts or statements are not considered isolated entities. Instead, they are considered part of other discourses and meaningful contexts. Before we present our analysis of these three narratives and how they become performative, targeting the effects of the narratives and the forms of governance they enable, we will present a short descriptive analysis of the development of the crisis narratives.

**Table 1. Distribution of the crisis narratives in the corpus.**

|                | Chronicle | Editorials | DN debate | Total |
|----------------|-----------|------------|-----------|-------|
| Democracy      |           | 21         | 2         | 7     |
| Economy        |           | 19         | 10        | 29    |
| Health         | 7         | 22         | 23        | 52    |
| Other          | 13        |            |           | 13    |
| **Total**      | 7         | 75         | 35        | 117   |

The discourses of risk and conflicting narratives of crisis

From the very beginning of the pandemic, the three narratives of health, the economy and democracy featured in the editorial and debate articles. Over time, the focus moved from health from an international perspective – with discussions about the situation in China, Italy, Iran and the United States often related to democracy and the economy – to the situation in Sweden and how the government and the Public Health Agency managed the crisis. Thus, since the pandemic was defined as a multifactorial crisis, the narratives were entangled both as a health and economic crisis, which depended on political action at the expense of democracy. Wolodarski (2020a) wrote:
The fundamental assignment of the state is to protect us, to safeguard our lives. The choice between our health and the economy is simplified. Good public health is a prerequisite for a good economy and vice versa. We must save both. . . It is the state’s responsibility to help all companies and employees who are brutally affected by the pandemic. But we must manage to keep two thoughts in mind at the same time. Our lives come first. We cannot allow human desperation in Wuhan and Bergamo to be repeated in Sweden. It would be a venture that would break society’s most basic contract: that every human being has an inviolable value.

There was another shift over time in the coverage, particularly in the editorials. At the beginning, the coverage was hopeful, and there was a strong belief that Sweden would manage the pandemic. Hope and trust were directed towards Swedes, who, in solidarity, could fight the pandemic. However, over time, when the number of infections and deaths increased, hope diminished and was replaced by an appeal to better manage the pandemic. A more decisive political leadership on managing the virus was demanded as well as greater effort in supporting industry and citizens who lost their jobs. ‘It would be great if Stockholm and Sweden could keep the virus shut down through freedom and responsibility. . . But if the responsibility is not enough, the authorities must adapt and sharpen the tone. Recommendations are good, but sometimes rules are better’ (DN, 2020e). Wolodarski’s chronicles did not follow the same development: from the start, he was critical of the government’s management of the pandemic. He continued to demand the government take more responsibility and follow the rest of the Nordic and European countries, which quarantined and enforced more restrictions.

It is not possible to delegate decision-making to any state epidemiologist, chief economist or director general. In a national crisis, driven by an ongoing international crisis, the prime minister must step forward, preferably with the other party leaders, and make open, clear and effective decisions that instil confidence and make a direct difference. (Wolodarski, 2020b)

These quotes do not only illustrate the connection between the narratives; they also show the conflicting positions published in DN’s editorials and opinion articles about the pandemic and the government’s strategy in managing it. We will later show that this was also true among the defenders of the government’s strategy, exemplifying some of the underlying power struggles both in the debate and in Swedish society.

Swedish exceptionalism versus the world

The Swedish strategy has been a topic of contestation in opinion articles. Some have called for stronger mitigation and suppression of the pandemic, while others have defended the Swedish way. Apart from the (many) strong statements from the editor-in-chief, there were two debate articles, signed by 22 researchers (Bjermer et al., 2020; Carlsson et al., 2020), that completely rejected the Swedish way of managing the pandemic and called for more stringent measures and lockdowns. Although other critics did not invoke the same securitized rhetoric, voices were questioning the management of the pandemic, arguing for the need to complement the current strategy with large-scale testing and infection-tracing. However, in the end, most articles supported the non-authoritarian management of the pandemic by the Swedish government. The discursive struggle in the articles seemed to be more about Swedish exceptionalism versus reactions from
the rest of the world. The most common storyline, through which both defences and critiques were articulated, was the pressure on Sweden from the outside, which required the country to defend itself.

If a fair comparison is to be made, one should compare all countries, both those who apply a stricter strategy and those who apply a more recommendable strategy. . . . Some have chosen our Nordic neighbours as the objects of comparison in order to justify a stricter strategy. They have so far had fewer cases and lower mortality than Sweden. On the other hand, a number of other countries that implemented a strict strategy were excluded, but who nevertheless had more cases and more deaths per inhabitant than Sweden, for example Belgium, France and the United Kingdom. The conclusion is that, among countries that have applied a strict strategy, some have so far had worse and some better results than Sweden. (Rosén and Stenbeck, 2020)

In the face of a global disaster such as the COVID-19 pandemic, multilevel (e.g. international, national, regional and local) and transboundary governance (transgressing certain boundaries and creating others) tended to be downplayed on behalf of nation-state-based crisis and risk management approaches. Thus, the debate about whether the Swedish strategy was ‘right or wrong’, tended to revive a ‘container’ logic of nation-states (Beck, 2009), a logic that views global society as organized exclusively in terms of nation-states, with governments having the authoritative power over their populations. Defending the Swedish strategy became part of an institutionalized risk management that contributed to a sense of national identity building. As mentioned in the introduction, the populist discourse that generated conflict narratives was not about pitting the people against the elites at the local level but, rather, pitting Sweden against the world or, in other words, pitting state epidemiologist ‘Tegnell and Swedish exceptionality against foreign experts’ (Sunnercrantz 2017:44). Exceptionalism was used in the debates as a signifier for Swedes’ high levels of trust in institutions and politicians, as exemplified in the quote below from an editorial:

The Swedes have tremendous trust, both to each other and to the state. This truth is being repeated over and over again nowadays, because it is the one that has shaped our official strategy against the new coronavirus: If everyone takes responsibility we will jointly prevent the infection from happening in Sweden. But the proud true-blue-Swedish coin has a back-side. Because the same trust also entails a not insignificant act of paralysis. . . . And this is the disadvantage of the high level of trust: that it easily switches to superstition. (DN, 2020b)

However, this instalment of a particular Swedish identity, characterized by high trust, responsibility and solidarity, was also viewed from the outside, where the trustworthiness of Sweden in the eyes of others was threatened. As exemplified at the end of the above quote, this exceptionalism was also posing a risk. To mitigate this risk, proponents called for Sweden’s harmonization with the strategies of the rest of the world:

A reasonable basic principle going forward is to do and say the same as the outside world, unless we have proof that it is harmful. The economic value of forcing the infection down to neighbouring countries through testing and tracking is now enormous, even if that level is not sustainable in the long term. . . . If large parts of the outside world have mouth protection in
public transport, despite the fact that the evidence is weak, for the time being, we should do the same to show that we also take contamination seriously. (Nordström Skans, 2020)

The exceptionalism portrayed in this discourse shows a link between the Swedish strategy and the belief in Sweden’s uniqueness and superiority over others. This link is peculiar because it establishes uniqueness as a foundation for an exceptional state’s disposition as impossible to be replicated by others. On one hand, Swedes have high levels of trust in their institutions, neighbours, etc. On the other hand, the rest of the world distrusts the Swedish state. This interplay between uniqueness (or particularity) and universality is what constitutes the paradox of exceptionalism in the debate.

Centralization versus decentralization

In the corpus, we found conflicting narratives on the management of the pandemic both in Sweden and internationally. Should the management be centralized or decentralized? The narratives were embedded in discourses about the nation-state and the distribution of power in a neoliberal economy. There was a fear expressed in the articles that the pandemic was opening up interventions that not only controlled the disease but also changed the political landscape. In the early stage of the pandemic, articles talked about how the patrolling of police and military personnel on the streets of Italy, France and Spain drew much international attention, expressing worry that such actions may be used to increase state power. However, the discussions were not limited to this. By the end of March, when the Swedish prime minister announced that the government had decided against gatherings of 50 people or more, the newspaper described the measure as a threat to democracy (DN, 2020a): ‘A serious side effect of Covid-19 is that the democratic immune system risks being greatly weakened.’

This discussion on the centralization of power and restrictions to democracy was entangled with economic discourses. In a debate article, business sector representatives, in an attempt to win influence in Western democracies, expressed concerns regarding the fear brought about by the pandemic in countries such as China and Russia (Wästerberg and Åsbrink, 2020): ‘It is urgent to prevent the corona from leading to authoritarian influence in Sweden and to override important Swedish interests. In plain text, it is about ensuring that companies of strategic importance remain in Swedish ownership.’ However, the message was about the need for the Swedish government to support businesses to avoid economic recession rather than a threat to Sweden’s sovereignty. By the end of May, the same message was framed in a somewhat different manner. The pandemic was described as an opportunity for Swedish companies to expand and increase their market shares, as the global economic outlook got better again, conditional on public investments and support for industry (Sabuni and Persson, 2020). The argumentation favoured strong political action in support of the economy, and the rhetoric exemplified the response to the pandemic; it emphasized the nation-state as the unit for attributing risks and interventions, which also lead the way to centralization, the reaffirmation of national sovereignty and centralized governance (Hannah et al., 2020). Thus, in this narrative, worry about the consequences of the pandemic on democracy was expressed as a result of the demand for stronger leadership in the management of the pandemic.
A conflicting narrative was the critique of decentralized organization and the management of the Swedish healthcare sector, where counties (regions) and municipalities, together with private actors, are responsible for hospitals and elderly care (DN, 2020b). In the 1990s, far-reaching changes in the Swedish public sector began with cutbacks and restructuring (Larsson Taghizadeh and Lindbom, 2013). Reforms guided by New Public Management introduced risk analysis in an intense drive towards cost-cutting and productivity increases (cf. Beaussier et al., 2016), and both policy and professional narratives changed over time, moving from arguments about improving access and making services more responsive to patients to a clinical risk-based argument: the necessity to ensure safety (see Jones and Exworthy, 2015). Public sector and healthcare restructuring was thus bound up with the proliferation of risk terminology, risk analysis and risk governance (see Power, 2007). In the corpus, decentralized healthcare was questioned, and the lack of preparedness and capacity, as well as an inability to protect both healthcare workers and patients, was used to ask the government to take responsibility and action. All in all, it shows that the Swedish strategy does not seem to have been based on how things are – but on how one thinks it should be. Because you cannot distinguish Sweden’s strategy from the reality that exists around the country. If the municipalities and regions cannot live up to the strategy, the strategy must be adapted to the capacity of the municipalities and the regions. (DN, 2020f)

Thus, what we find here is a desire for more state control and, hence, centralization, and a belief or presumption that state control would also mean better preparedness and management of the pandemic and more equal healthcare (DN, 2020d; Ribeiro, 2020). As discussed earlier, the editor-in-chief also asked for stronger political leadership on the national level in order to control the pandemic rather than trusting citizens to follow recommendations. We interpret this as a paradox, whereby centralization is seen as a solution to the shortcomings of the Swedish strategy, despite the fear that democracy would be weakened under extreme measures.

**State ownership vs privatization**

In a similar line of argument, the privatization and downscaling of public expenditure in the welfare sector were questioned, and in the early phase, the pandemic was used as a promise for political change.

Covid-19 puts a stop to three decades of privatization and austerity policies throughout the Western world. The neglected crisis preparedness and the severely slim medical care testify to how poorly prepared Sweden and many other countries in our area have been before a major crisis like the one we are currently going through. Let’s move on and never repeat the historical mistakes that have been made. (Kallifatides et al., 2020)

Once again, state ownership and control were sought. The relationship between crisis and control is well-known, but what is interesting is to study how the lack of and need for control were formulated and directed, the lines of conflict (or ideologies) activated and how they worked through the effects of the crisis. As argued earlier, one ideological
view was the return to state control, which is not only about centralization but also about an alternative future in which the pandemic is seen as a game changer:

The Corona crisis, of course, also leaves room for reflection and re-prioritization. Resuming air travel and consumption at exactly the same level as during the boom we have just left will probably be seen as both uneconomical and unnecessary. (DN, 2020c)

Primrose et al. (2020) observed that the dual crisis of the pandemic, in relation to both the health sector and the economy, might raise questions such as those encountered in our corpus, including criticism of the neoliberal tenets of the current capitalist order. However, like them, we found that little in the debate warranted any changes and that the questioning of privatization was done vis-a-vis conflicting arguments in defence of the right to choose and the right to capitalize on public spending in the welfare sector:

Do not take the fight against the pandemic as a reason to restrict freedom of choice in the welfare sector. Instead, continue with a commitment to increased enterprise and strengthened freedom of choice in welfare. This can be done by making the Lagen of valfrihet [Act of freedom of choice] (lov) mandatory for the welfare sector throughout the country. We need increased private sector investment in welfare. (Andersson et al., 2020)

These voices in the debate echoed an ideology that prescribes the total deconstruction of the Swedish model and sees COVID-19 as an opportunity to steer governmental action, both in the short and long run, towards more choice and more profit in the welfare sector. As we have written elsewhere (Giritli Nygren et al., 2020), the opportunity to make such choices is linked to the uneven distribution of resources, and the concept of the ‘right choice’ divides people according to who is considered more at risk (Shamir, 2008). The paradox or line of conflict here rests on two different ideologies: one that defends the current model rooted in the neoliberal and capitalist system and one that sees the pandemic as an opening for an alternative future.

**Herd immunity versus herd humanism**

The regional and local healthcare system, particularly elderly care, was debated not only in terms of governance and organization but also in terms of how we view our elderly, who have occupied a central place in the debate in Sweden and elsewhere. Statistics presented around the world have shown that the highest mortality rate from COVID-19 is among people aged 70 and over. Experts have repeatedly warned that the virus is especially dangerous for the elderly. In the Swedish context, this debate was articulated as follows:

The principle of equal value does not seem to apply to the elderly. Has the pace of societal change become so high that it is only progress that applies, without actually appreciating what previous generations have contributed to the development of our society, including their experiences and skills? (Ekström and Löfqvist, 2020)

Herd immunity was often mentioned in international criticisms of the Swedish strategy, and several opinion articles also raised this critique, as in the extract below, written by the priest Annika Borg and a former priest in the Swedish church, Johanna Andersson:
The information that elderly infected by corona are beginning to be treated as dying, that is, not being helped to cure the infection or to have food and drink, but instead are given morphine patches, without having their relatives involved and gaining insight is deeply worrying. . . . As Sweden’s choice of strategy becomes increasingly questioned, the public view of the welfare state [folkhemmet] needs to be seen in light of the pandemic. It is not the first time in the history of the ‘folkhemmet’ that groups are dehumanized and set aside for what is considered by the authorities and the state to be the best for the herd. . . . An independent ethics commission for Covid-19, consisting of medical experts, philosophers, theologians, writers and artists who critically examine political and governmental decisions based on the issue of humanity needs to be established immediately. (Borg and Andersson, 2020)

In our corpus, we found that the ideological struggle was instated as a choice between herd immunity and herd humanism, and the Swedish strategy was constructed as having sacrificed the life of the elderly in the pursuit for herd immunity. The management of COVID-19 illuminates an ongoing devaluation of the elderly and has given rise to a struggle for a reinscription of value into ageing.

The opposite was also visible in the debate. Hanne Kjöller wrote an editorial on 16 May 2020: ‘For my own part, I am more concerned about how people live (and die) than people in elderly homes where 90 per cent of elderly . . . have dementia, may end their lives a few months earlier than they otherwise would.’ One avenue for thinking about this apparent resurgence of biopolitical concerns in the COVID-19 crisis was suggested by Hannah et al. (2020), who drew on Foucault’s writings about the themes of biopower, (auto)immunity and sovereignty as a debate over the ‘ethics of biopolitical valuation’. The arguments in the debate could be said to rest on two contrasting ethical principles: the more Kantian ethical principle, that human beings are ‘ends in themselves’, and utilitarianism, where what is good for a population is understood as the greatest good for the greatest number of people.

In the ideological struggle between herd immunity and herd humanism, another paradox remained hidden: the paradox of who is even accounted for in the debate. The elderly were identified as an at-risk group and, even more, as a group that was sacrificed for the greater good. Other groups were not debated and defined in the same way, despite the high mortality rates. This reveals which subjectivities became desirable in the crisis narratives and which ones became ‘invisible’, as they were not accounted for in the coverage of the pandemic crises (Giritli Nygren et al., 2020).

Conclusions

This contribution analysed the development of crisis narratives and struggles over legitimacy during the first phase of the COVID-19 pandemic in Sweden. Employing a critical discourse analysis, we investigated the editorials and debate articles in Sweden’s largest morning newspaper, DN, during the spring of 2020. Our analysis showed how the struggles over legitimacy in the handling of COVID-19 dealt with Swedish exceptionalism versus the world, centralization versus decentralization and herd immunity versus herd humanism. Moreover, it invoked broader-level discourses and even ideologies. Although it should be noted that our analysis did not represent media reporting in general, our focus on editorials and opinion pieces in DN captured the debate from a very specific
angle, as these pieces were intentionally written with the aim of influencing public opinion and the political agenda. Based on other types of articles and those in other media outlets, the result could have been different. Returning to the struggles over legitimacy and the underlying ideologies in the debate, pro-globalization and securitization discourses tended to reproduce neoliberal or global capitalist ideologies. Moreover, from a discursive perspective, exceptionalism, as a set of discourses based on nationalist ideology, was closely linked with national identity building. For example, the first paradox discussed in this article dealt with Swedish exceptionalism in relation to the rest of the world and how this could be considered as a particularity, or even a sense of superiority, at the same time as the rest of the world questioned Swedish risk governance. This paradox shows how underlying ideologies in the debate enhanced the nation-state project and nationalism and strived for cohesion, as critical voices in the debate also sought national and governmental action.

To think about the performative aspects of risk means to think of how power operates and produces governable subjects. Hannah et al. (2020) noted that, with COVID-19, some governments have become more authoritarian; experts such as epidemiologists have become more influential; and citizens have been relegated to a position of being in need of control, unable to participate, or perhaps unwanted, in decision-making. We do not claim that this is the case in Sweden, but we find this ideology represented in some articles published in DN. For example, regarding the paradox in the debate about how the pandemic should be governed within Sweden, we found both a desire for centralized governance and a worry that this same centralized governance would threaten democratic processes. However, alternative ways of organizing healthcare in general and pandemics in particular were not discussed. This desire for state control not only turns citizens into subjects in need of control but also rejects regional and local healthcare, deeming them substandard. The debate showed that Swedish exceptionalism functions as a springboard for fewer regulations in establishing a particular Swedish identity characterized by high trust, responsibility and solidarity as well as for more control. These conflicting ideologies – one that validates neoliberal policies of the individual and one that validates authoritarian governing practices – are ideological justifications of the same form (cf. Hooker and Aliis, 2009). Thus, the ideologies in the debate exposed a paradoxical form of governance which enhances both individual responsibilization and centralized state power.

The different discursive responses to the management of the COVID-19 crisis in Sweden thus reflect existing debates in society about the very nature and scope of the Swedish welfare regime (folkhemmet). Furthermore, they reveal the underlying power dynamic in Swedish society and perhaps in neoliberal societies more broadly. For example, the debate about herd immunity reveals a paradox between two ethical standpoints: (1) that every life is an end in itself and (2) a more utilitarian view on human life – with the Swedish strategy often being pictured as striving towards the second stance. According to Foucault (1990), populations in the logic of security are understood in terms of certain quantifiable factors that can be used to govern for the greater good. Although the Swedish management of COVID-19 can be described as what Foucault (2003 [1976]) called the governing of conduct and individual responsibilization (Giritli Nygren and Olofsson, 2020), this, in turn, is embedded in a strong belief in the ability of
the state to take action in crises and the obedience of the individual. Here, quite an interesting contradiction occurs, one that might tell us something about the different ways in which neoliberalism is articulated and translated within the frame of the Swedish welfare state. Norms and normalization are, to some degree, inscribed by discipline but, to a great degree, are produced through individuals exercising their freedom. While one of the most important traits of neoliberalism has been argued to be the weakening of the state (see e.g. Foucault, 2008; Harvey, 2007), what emerged in the paradoxes is that the conflicting positions entailed different types of trust and contingency between citizenship and state power in the making of the national project – without questioning state power as such.

At the time of writing this article, Sweden was experiencing the second wave of the COVID-19 crisis, and November 2020 might be more difficult than expected, with stricter regulations being reintroduced. The number of infections dropped in Sweden during the summer, and so did the public debate. The public debate about COVID-19 was overshadowed first by discussions about gang crime in Swedish suburbs, and then by the presidential election in the US. Currently, however, as the number of infections increases, it will be interesting to see whether new struggles and paradoxes will arise in the public debate or whether those identified above will continue to feature.

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ORCID iD

Anna Olofsson https://orcid.org/0000-0001-5000-311X

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Author biographies

Katarina Giritli Nygren is Professor of Sociology at Mid Sweden University. Her research explores different forms of governance relationships with a focus on processes of inclusion and exclusion in terms of gender, class and ethnicity in different contexts in relation to, for example, risk governing and national security.

Anna Olofsson is Professor of Sociology at Mid Sweden University. She has extensive experience studying risk from a societal and individual perspective, particularly in relation to gender, class and ethnicity, and their intersections. Her research includes both theoretical and methodological developments in the sociology of risk and uncertainty, for example the framework for intersectional risk theory.

Résumé

Par rapport à de nombreux autres pays, la Suède a géré la pandémie de la Covid-19 sans confinement, avec moins de réglementation et plus de marge de décision pour les citoyens et les organisations. Dans ce chapitre, nous explorons les représentations médiatiques des stratégies nationales de prévention et leur ancrage dans des discours plus larges. Notre objectif est d’analyser le développement des récits de crise et des différendes sur la légitimité au cours de la première phase de la pandémie de la Covid-19 en Suède. Nous avons réalisé une analyse critique du discours sur les éditoriaux et les articles d’opinion publiés au printemps 2020 par le grand quotidien suédois Dagens Nyheter. Nous combinons des analyses descriptives du développement des récits de crise avec une analyse discursive des idéologies présentes dans le débat. L’étude révèle que trois récits sur la crise dominent les débats : la santé, l’économie et la démocratie. Dans et entre ces récits, un différend sur la légitimité dans la gestion de l’épidémie apparaît dans diverses perspectives contradictoires ou paradoxaux : l’exceptionnalisme suédois contre le reste du monde, la centralisation contre la décentralisation et l’immunité collective contre l’humanisme collectif.

Mots-clefs
Covid19, pandémie, récits de crise, Suède, gouvernance, médias.

Resumen

En comparación con muchos otros países, Suecia ha manejado la pandemia de Covid-19 sin confinamientos, con menos regulación y más margen de decisión para ciudadanos y organizaciones. En este capítulo exploramos las representaciones mediáticas de las estrategias preventivas nacionales y su anclaje en discursos más amplios. Nuestro objetivo es analizar el desarrollo de las narrativas de crisis y las disputas por la legitimidad durante la primera fase de la pandemia de Covid-19 en Suecia. Hemos llevado a cabo un análisis crítico del discurso en los editoriales y artículos de opinión publicados la primavera de 2020 por el principal diario sueco, Dagens Nyheter. Combinamos los análisis descriptivos del desarrollo de las narrativas de crisis con un análisis discursivo de las ideologías presentes en el debate. El estudio revela que tres narrativas sobre la crisis dominan los debates: salud, economía y democracia. En y entre dichas narrativas,
la disputa por la legitimidad en el manejo de la epidemia aparece en varias perspectivas conflictivas o paradójicas: excepcionalismo sueco versus resto del mundo, centralización versus descentralización e inmunidad de rebaño versus humanismo de rebaño.

**Palabras clave**

Covid19, pandemia, narrativas de crisis, Suecia, gobernanza, medios de comunicación.