Political communication, press coverage and public interpretation of public health statistics during the coronavirus pandemic in the UK

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Abstract
This article examines the way numbers, often concerning risk, were communicated by politicians, covered by the news media and interpreted by the public during the early stages of the COVID-19 crisis in the United Kingdom. To explore this topic, we adopted a mixed-methods approach that included content analysis, comparative thematic analysis and a series of focus groups. Whilst coherency and consistency are touted as essentials in public health messaging, our textual analysis highlighted the disconnect between political communication and news media coverage. Whereas the UK government relied on vague references to curves and peaks to underpin a narrative of consistency and certainty in public health policy, the UK news media referred to specific numbers from within and outside the UK to criticise the government’s approach as haphazard and lacking. This disconnect gained even more significance during our focus groups. When discussing numbers, participants referred to news media coverage rather than political messaging, using these figures to challenge the timing and nature of the UK lockdown. These findings present a significant critique of the UK government’s communication during this health crisis. Instead of putting forward a coherent, homogenous and clear message to the public, the discourse around numbers and risk was diffracted, disconnected and opaque. This was largely due to the competing narratives presented by the news media.

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Introduction

In the face of the coronavirus (severe acute respiratory syndrome-coronavirus-2 or COVID-19) pandemic in early 2020, governments sought to inform the public about necessary collective action. These instructions, however, varied from country to country. Most liberal democracies and authoritarian regimes responded by placing entire segments of the population into ‘lockdown’, closing almost all economic activities, imposing travel bans and restrictions on free movement (Griffiths, 2020; Oltermann, 2020; Pearson and Nguyen, 2020). However, some political leaders adopted less stringent public health measures that focused on protecting the economy (Eisenhammer and Spring, 2020; Gómez-Brüera, 2020; O’Reilly, 2020).

One of these exceptions, at least at the start of the crisis, was the UK government. Whilst it was never officially confirmed, many commentators referred to the UK approach as something approximating ‘herd immunity’. This strategy was described by Patrick Vallance, the UK’s chief scientific adviser, as focusing on protecting the elderly and vulnerable, whilst allowing the general population to largely carry on as normal. In doing so, it was thought that the UK would ‘reduce the peak of the epidemic, pull it down and broaden it’, while allowing business as usual (FT, 2020). Within days of the explanation by Vallance, a significant U-turn took place. On 16th March, the UK government announced stricter measures. In addition to the current advice (washing your hands and self-isolating for seven days if you have symptoms of the virus), they also asked for whole households to isolate if one member of that household showed symptoms and strongly advised people to stay at home and not visit public spaces (e.g. bars, cafes and restaurants).

Our paper examines this U-turn in public health policy by focusing specifically on how numbers, often related to notions of public health risk, were communicated by politicians to the public. In a period where public messaging changed significantly, we argue that coherence of this communication is particularly important. To assess the consistency of this communication, we place political messaging and public exposure within the ‘media space’ (Castells, 2011). In doing so, we examined how the news media covered political messages and developed their own narratives on numbers. Understanding the way this quantitative information flowed between politicians, the news media and the public during a time of great uncertainty and danger is particularly important to the study of health and political communication. An incoherent, disjointed narrative presents significant issues concerning public adherence to health measures (Parvanta et al., 2010; SAGE, 2020a, 2020b).

In light of this, our research project asks: How coherent was the communication of numbers during the early stages of the coronavirus pandemic in the UK? To unpick this question further, we asked three sub-research questions: How did the government communicate numerical information during the pandemic? How did news media coverage of numbers relate to this political discourse? How did the audience interact, interpret
and experience this numerical communication? In doing so, we focused on the central issue of coherency and clarity through a focus on three sites of communication: politicians, journalists and the public.

**Numbers, persuasion and power**

This work sits within a broader body of literature that examines the rhetorical nature of numbers across public communication, namely within the news media (Koetsenruijter, 2017; Lawson and Lovatt, 2020; Roeh and Feldman, 1984). When used rhetorically, numbers are generally used to construct a phenomenon in a particular way that legitimises policies or ideological positions (Desrosières, 1998; Fioramonti, 2014; Lugo-Ocando and Lawson, 2017; Merry, 2016; Zuberi, 2001). For example, Assa (2019) documents how measurements of states’ wealth have been a centuries-long rhetorical struggle by nation-states to legitimise specific economic policies. The contemporary incarnation is the rise of gross domestic product as the definitive account of national economic prosperity, effectively delineating between rich and poor countries and dictating the successes or failure of macro-level economic decisions (Fioramonti, 2014).

When numbers are communicated in this way, politicians largely rely on the news media. At its simplest level, journalists can operate in a facilitatory role by repeating government statements with little or no qualification or they can be disruptive by directly interrogating government communication (Peters, 2016: 10). Such a dynamic between politicians and journalists is often placed within a structural relationship between politics and the news media.

Early accounts largely positioned the news media as reproducing power through their coverage (Hallin, 1986; Herman and Chomsky, 1988). But more contemporary theories have stressed the way the news media change the nature of politics itself, observed most clearly in the early work on mediatisation (Mazzoleni and Schulz, 1999). In this sense, mediatisation is a notion that the dynamics imposed by the media, shapes and frames the ‘discursive regimes’ of political communication in society (Gee, 2014a, 2014b). Governments then adopt policies and approaches that are targeted towards responding to these discursive regimes and frames (Hjarvard, 2008; Lundby, 2009). In reality, this relationship is probably best described in Blumler and Esser’s (2018) article that refers to the push–pull mechanism of mediatisation where, depending on the context, the news media or politicians have more power to dictate narratives.

**Health communication**

The mediation of numbers by politicians and the news media to the public takes on particular significance in health communication. More often than not, these numbers are used to express ‘risk’ – one of the defining logics of modern society and politics (Beck, 1992, 2006 [1986]). This can be observed in public health campaigns, where government advertisements express the risk of certain behaviours to individuals’ health. A recent Public Health England (PHE) campaign explained that ‘smoking increases the risk of developing more than 50 serious health conditions’ (PHE, 2020a). The hope here is that individuals will perceive the risk of this type of behaviour and be dissuaded
from engaging in it. But these numbers are not just used to express the dangers of a certain behaviour, they can also express the effectiveness of certain campaigns. The PHE-led Stoptober campaign explained that ‘if you can stop smoking for 28-days, you are five times more likely to stay smoke-free for good’ (PHE, 2020b).

The prevalence of these campaigns and their potential for changing behaviour has led to a number of studies assessing the effectiveness of using different types of information in health campaigns (Briggs and Hallin, 2016; Hill, 2017; Motta-Zanin et al., 2020). Whilst there is a lack of consensus on whether quantitative or qualitative information has the most impact on decision-making (Allen and Preiss, 1997; De Wit et al., 2008; Kopfman et al., 1998), it is clear that numbers do play a significant role in shaping views and instructing actions when we consider public health campaigns (Allen and Preiss, 1997; Zebregs et al., 2015).

However, numbers are not just used to elicit changes in individual behaviours. Quantitative information on risk is also used by governments to legitimise specific public health policies they are seeking to introduce. For example, an increased taxation on cigarettes might be legitimised by presenting the risk that smoking presents to the wider public. Often the political narrative centres on ‘evidence-based policy’, where scientific research and advice dictate changes in public health policy. Over the past 20 years, academic literature has increasingly argued that this is not always the case. Instead, the logic of science-based policy is often inverted: governments and politicians performatively listen to scientific research yet actually use this information to justify decisions that have already been taken at the political level (Hope, 2004). In these cases, science is tasked with the responsibility of validating policy.

When we consider health emergencies, such as a pandemic, this dual capacity of numbers describing risk is evident. Governments strive to communicate the health risks to the public to both legitimise emergency public health policies but also to encourage immediate collective public action and behaviour (Beck, 2006 [1986]; Gardner, 2009; Shrader-Frechette, 1985). Within this dynamic, the news media also engage with notions of risk – often journalists adopt notions of shared risk to campaign for empathy and action (Cottle, 1998; Lugo-Ocando and Andrade, 2019). As Bakir (2010: 5) explains, there is a range of research that examines the relationship between the news media and risk, focusing on the media’s role in: ‘providing risk knowledge to inform citizens; generating and determining public acceptability of different risks; motivating the public to take responsibility for, and action regarding, risks; and providing imaginative schemata regarding voluntarily chosen risks’.

For our paper, we focus on the specific role that the news media plays in mediating the political communication of risk to the public. As seen elsewhere in studies of journalism, reporters generally rely on well-established actors and institutions as sources. More often than not, this is also the case for communicating risk (Jönsson, 2011). But there have also been notable exceptions. In 1998, a study from The Lancet declaring a link between the Measles Mumps and Rubella vaccination and autism gained widespread attention within the British press. This was despite a scientific and political consensus that disputed these findings (Goodlee et al., 2011).

There is relatively little research, however, on the use of numbers in the coverage of health emergencies, such as epidemics and pandemics. Instead, this substantial body of
work has mainly focused on qualitative information (narrative, images, videos and so on) within news media coverage and political communication during epidemics. This can be observed across the previous literature on Severe Acute Respiratory Syndrome, Middle-East Respiratory Syndrome and Ebola (Luther and Zhou, 2005; Towers et al., 2015; Washer, 2004). The same can also be said for understanding how individuals are exposed to, interpret and assess risk during epidemics (Briggs and Hallin, 2016). This piece intends to address that gap by examining the communication of numbers across politics, the press and the public during the early stages of the coronavirus pandemic that struck the world in 2020 (O’Grady, 2020). Particular attention is paid to the coherency of this communication to appreciate the consistency in how numbers were communicated across politics, the news media and the public.

A consistent political narrative, reflected in the news media, is considered a particularly important component of communicating risk during a health crisis. In The Essentials of Public Health Communication, Parvanta et al. (2010: 141) list ‘clarity’ and ‘consistency’ as two of the five essential characteristics of an effective media strategy. Furthermore, the advice to the UK government from the Scientific Pandemic Influenza Behaviour (SPI-B), a sub-group of the Scientific Advisory Group for Emergencies (SAGE), repeatedly stressed the need for clear government messaging on the risk posed by the pandemic to ensure public adherence to public health measures was based on rational, informed decisions. This was deemed even more important considering that alternative public health measures were being communicated by the news media to the public (SAGE, 2020a, 2020b).

**Methodology**

To examine this intersection between the public, politics and the news media in the communication and interpretation of numbers, we decided to focus on a particularly important period in the early stages of COVID-19 in the UK: 13 to 19 March 2020. This covered a three-day period on either side of the UK government’s change in public health policy on 16 March 2020. It was on this day they shifted from a relaxed approach to the virus, characterised as ‘herd immunity’, to more stringent public health measures (FT, 2020). This period was also defined by a wealth of different, competing numbers in public discourse. Most notably, the publication of a report from Imperial College London (ICL) that reported 260,000 lives would be lost if the government did not change its course of action (Kelly, 2020; van Elsland and O’Hare, 2020). Therefore, we argue that this particular period of time is an important moment to examine the coherency between political communication of numbers, the numbers reported by the news media and how the public interpreted and experienced these statistics.

Given the range of different numbers in public discourse, we decided to focus on a specific type of quantitative information: historic, current or projected number of cases, deaths and tests. A focus on public health statistics helps us understand our findings within the existing literature on health, communication and risk.

To appreciate the prevalence and form of these statistics in political communication, we conducted a focused content analysis of government press releases (Krippendorff,
Using the official UK government repository of press releases, we conducted two separate searches for ‘COVID-19’ and ‘corona’ both between 13 March 2020 and 19 March 2020. This returned 109 unique documents that ranged from 55 words (lower bound) to 1899 words (upper bound). These press conferences were important sites of political communication during this period. All 109 press releases were coded in a focused content analysis (such an approach has been used by Tasseron and Lawson (2022) and Ortega-Chavez and Lawson (2022)).

This involved the identification of numbers that described the historic, current or projected number of cases, deaths and tests in the press releases. The results outline the frequency of these numbers in the documents and the types of numbers used. These frequencies were used to establish the importance of numbers in political communication by the UK government during this early period of the pandemic. We conducted an inter-coder reliability test on 10% of the sample ($n = 11$). All variables scored above 0.8 for Krippendorff’s ALPHA.

The findings of the content analysis were used to guide a qualitative textual analysis. For news media coverage, we selected three news outlets that represented both commercial and public outlets and left-, centre- and right-leaning organizations (Jones et al., 2007). To select which news outlet was chosen, we relied on OFCOM’s (2019) research – selecting the most popular news outlets. The commercial, left-leaning outlet was represented by The Guardian Online; the commercial, right-leaning outlet by The Mail Online; and the public broadcaster by BBC News. To understand the relationship between the press releases and the news coverage, we only included articles that referred directly to one of the government press releases. This resulted in 74 news pieces. Both the news articles ($n = 74$) and the press releases ($n = 109$) were analysed together in a comparative thematic analysis that focused specifically on the types of numbers used in the content analysis.

This sample was analysed using Braun and Clarks’ (2006) six-stage process for thematic analysis. To develop our initial codes, we examined the articulation of numbers carefully – identifying specific words or phrases used in relation to figures. These were turned into themes that pointed to broader patterns of language. Once these themes were established, we compared how and when the themes were evident in the press releases and news media coverage. Through this comparison, we developed our analysis of how numbers were used differently by politicians and journalists. Whilst our analysis did not focus on data visualizations, these were identified where they intersected with political discourse.

To complement our quantitative and qualitative textual analysis, we also conducted five online focus groups from 30 March to 1 April 2020. We recruited participants through social media advertisements, focusing on people over the age of 18 who were living in the UK at the time of the pandemic. Each group consisted of between 3 and 6 people and the conversation was guided by a semi-structured interview schedule that focused on where people received their information about the pandemic, how they experienced certain numbers that circulated and their thoughts on the government’s handling of the pandemic. Once these conversations had been transcribed, we conducted a thematic analysis (Braun and Clarks, 2006). This was used to find common sentiments across the five discussions, guided by our focus on numbers and the influence of journalists and
politicians on people’s notion of risk. The findings were then compared to the textual analysis to form our overall analysis.

**Results**

Whilst the government relied on scientific evidence from epidemiological modellers and behavioural scientists, they rarely communicated the specifics of this information to the news media or the public. In fact, our content analysis found that only seven government press releases out of 109 (6.4%) included statistics about COVID-19. In place of specifics, the government made vague references to curves, peaks and trajectories. Alongside this unclear language, they learnt about the discourse of evidence-based policy. It was the news media that provided specific quantitative information on COVID-19.

They reported on the current number of cases in the UK, those who tested positive for the virus and the number of people who had died. Journalists also referred to numbers from outside the UK, specifically pointing towards the spread of coronavirus in China and Italy. They were also keen to emphasise the ICL report that predicted the number of deaths from the government’s pre-March-16th plan compared to the more stringent action it later took. These numbers were often used by *The Mail Online* and *The Guardian Online* to emphasise the uncertainty and confusion over the UK’s strategy to deal with COVID-19. *BBC News Online*, on the other hand, adopted a distinctly impartial approach in its reporting. The coverage emphasises the lack of continuity between the news media and the government in the use of numbers and the narratives they underpinned.

The importance of this disconnect is further highlighted in our focus groups. Across all five discussions, participants referred to numbers as being particularly important in their perception and experience of COVID-19. The report from ICL, however, was only referred to in detail during one focus group. Instead, it was the rising death toll emerging from Italy in early to mid-March that seemed to particularly resonate with the participants.

**Content analysis**

The content analysis of communication from the UK government highlighted the sparse use of numbers (either as text or figures) to describe the coronavirus. Out of 109 articles, only seven pieces (6.4%) contained quantitative information on the spread of COVID-19 in the UK (see Table 1). Of these articles, it was most likely that one \(n = 3\) or two \(n = 3\)

| Frequency of numbers in an article | Number of articles (n) | Percentage of articles (%) |
|-----------------------------------|------------------------|-----------------------------|
| No numbers                        | 102                    | 93.6                        |
| 1 number                          | 3                      | 2.8                         |
| 2 numbers                         | 3                      | 2.8                         |
| 3 numbers                         | 1                      | 0.9                         |
statistics were used. It seems, therefore, that quantitative explanations regarding the spread of COVID-19 were not an important part of the government’s discourse.

Across the seven articles that included numbers, four types of statistics were adopted: the current number of tests conducted, the current number of cases, the current number of deaths and the predicted number of cases (see Table 2). The number of tests was the most frequently used within an article ($n = 5$) and predicted cases the least ($n = 1$). In all but one article ($n = 6$), these numbers were used in relation to policy. That is, a statistic was positioned as the rationale underpinning specific health interventions.

Importantly, the press releases only referred to one predictive number across the entire 109 pieces of communication. This occurred in Boris Johnson’s statement on 16th March 2020 when he explained that ‘without drastic action, cases could double every 5 or 6 days’.

**Thematic analysis (i): Government press releases**

Our thematic analysis of these press releases highlighted how instead of using specific statistics the government referred to the graphical representation of COVID-19. Instead of describing the number of cases or deaths, they adopted a language centred on curves, peaks and flattening. This can be observed in the extracts below.

So, looking at the curve of the disease and looking at where we are now – we think now that we must apply downward pressure, further downward pressure on that upward curve by closing the schools (UK Government, 2020b).

When the government did opt for specific numbers, these largely centred on the current and future levels of testing. In this way, when the government referred to current levels of testing, they always emphasised the way this number was to be increased over the following weeks. Two extracts below demonstrate this.

Last week, the NHS and PHE increased testing to 5000 a day and that number continues to increase. By next week it is hoped that testing will increase to 10,000 per day. (UK Government, 2020d)

**Table 2.** Type of number by the number of articles.

| Type of number     | Number of articles ($n$) | Percentage of articles (%) |
|--------------------|--------------------------|----------------------------|
| Current tests      | 5                        | 4.9                        |
| Current cases      | 2                        | 1.8                        |
| Current deaths     | 3                        | 2.8                        |
| Predicted cases    | 1                        | 0.9                        |
| Predicted deaths   | 0                        | 0                          |
| Other              | 0                        | 0                          |
And ramping up daily testing from 5000 a day to 10,000 to 25,000 and then up to 250,000. (UK Government, 2020c)

Whilst the government did not communicate specifics about the scientific information they were relying on, they did use the discourse of science within their press releases. They refer to collections of scientists, specific science-related titles and government bodies specifically set up to provide scientific advice.

Today, we need to go further, because according to SAGE [the Scientific Advisory Group for Emergencies] it looks as though we’re now approaching the fast growth part of the upward curve. (UK Government, 2020c)

Today the Scientific Advisory Group for Emergencies met to discuss the latest evidence on the spread of the virus and the effects of the measures we have already taken to slow its spread. And Patrick is going to update us in a second about that. (UK Government, 2020b)

The reliance on science and scientific expertise provided a certain thread to health policies. The government explained that they had been, they were and they will continue to follow scientific advice. In this way, expertise and evidence were used strategically to emphasise continuity rather than change. This can be observed in the extract below.

Chief Medical Officer for England Professor Chris Whitty said: Our approach to responding to this outbreak has and will remain driven by the scientific and clinical evidence so we do the right thing at the right time. (UK Government, 2020a)

In other words, the response (or policy) by the government may change. But the scientific rationale behind these changes will remain the same.

**Thematic analysis (ii): News media coverage**

Whereas the government relied on the discourse of science to emphasise continuity in lieu of actual numbers regarding the spread of the virus, the news media provided a wealth of quantitative information to underpin a narrative of uncertainty and confusion in government policy. When referring to the spread of the virus, journalists relied on data provided by PHE, Scotland, Wales and Northern Ireland. This data was used to create data visualizations and provide in-text pieces of statistical information.

The most commonly used graph was of the cumulative number of cases of COVID-19 each day, referred to in the government press releases as the ‘curve’ (Partington and Collinson, 2020; Proctor et al., 2020b). This data was also used to provide geographical splits of COVID-19 cases across the United Kingdom, Wales and London (Boyd, 2020; Proctor, 2020). In general, these visualizations generally focused on UK cases and deaths but certain visualizations also mapped the global spread of coronavirus (Jiang, 2020). Whereas data visualizations were generally attributed to a data source, journalists across all three outlets referred to the number of cases of coronavirus and the resulting
deaths without referring to the source of that information (BBC, 2020b; Proctor et al., 2020a).

When *The Guardian Online*, *The Mail Online* and *BBC News Online* referred to a source outside of the government, the most significant was the report published by ICL on 16 March 2020. The news outlets focused on two numbers: the predicted 250,000 people that would die if the government continued its current course and the 20,000 people that would die if they adopted more stringent measures. These numbers were referred to as the rationale for the government changing from a soft ‘herd immunity’ approach to stricter measures of social distancing and isolation. *The Guardian Online* and *The Mail Online* used these figures to provide clear criticisms of the government’s approach to handling the virus.

That was issued [change in government advice] after expert modelling suggested the approach could cut the estimated coronavirus death toll from 260,000 to 20,000 (Mohdin, 2020).

The change of stance over ‘social distancing’ on Monday came after modelling by a team of government advisers at Imperial College London warned that what was previously thought to be the ‘worst case’ scenario of 250,000 days was actually the most likely outcome. (Tapsfield, 2020)

By drawing attention to the lockdown measures adopted across European countries, these articles present another, related, narrative: the ‘right’ public health policy could be observed across the continent before an external, unexpected report pushed the UK government to make an official U-turn. According to this coverage, the UK was not only wrong, but it was also among the handful of countries taking such a relaxed approach.

**Focus groups**

To get a sense of public perceptions, we organised five focus groups. Throughout our discussions, participants consistently referred to the importance of numbers in their experience of COVID-19.

I was talking to people about how we were going to pool resources to homeschool the following week (…) I woke up on the Sunday morning, and I remember seeing the newsreel that found about 6,000 people had died in Italy in that recording period. I whatsapped that group and said, ‘I can’t do it.’ (Participant 1a, 2020)

As outlined above, participants referred to numbers in vague and specific terms. When using vague language, they generally talked of ‘increases’ or ‘rises’ rather than the language of ‘peaks’ or ‘curves’ based on the visualization of data. Whether specific or vague, there was a general trend towards referencing numbers from other countries. In February, during the early stages of the pandemic, participants referred to numbers emerging from China. But as one participant explained, these numbers did not resonate at an individual level.
And my husband has always, from the beginning, he’s been very, very conscious of how bad it is, from the news that we were getting from China and stuff, but for me, it just felt like it just wasn’t really hitting home kind of thing. (Participant 5c, 2020)

It was only when participants started to see large numbers coming out of Italy at the start of March that the seriousness of the disease really hit home. The number of deaths was particularly important in emphasising the scale of the threat faced.

I think for me, it was when the numbers started getting really big when it started getting into hundreds of people [dying] every day in Italy. Then that realization of just the numbers of people who were going to die, and the realization that it was the same thing that was happening in Italy was going to happen here in the UK as well. (Participant 2c, 2020)

The death toll from Italy seemed to possess a more powerful position compared to other numbers, such as from China, due to its proximity to the United Kingdom. This was expressed in our discussions with specific reference to why Chinese numbers were seen as less important and why Italian numbers particularly resonated.

China, outbreaks of things in China, we’ve heard that in the news before people tend to see it, as very, very removed from our lives. (Participant 6a, 2020)

Obviously, we are seeing that we’re two weeks behind Italy, the numbers do stack up for the comparison between the UK and Italy. (Participant 6d, 2020)

The first extract points towards a notion of de-sensitisation towards epidemics and pandemics from East Asia, as well as a distance between the problems faced in China and the lived experience of those in the UK. The second extract, on the other hand, positioned the UK as intimately linked to the epidemiological trajectory of Italy. This notion that the Italian experience was to be replicated in the UK in ‘a couple’ or ‘few weeks’ was a commonly expressed sentiment across different groups. Furthermore, it seems that the legitimacy of Italian numbers played an important role too.

There is so many different things that interplay with that because, obviously, there’s just the general distrust around China and how they approached the whole situation in the first place. (Participant 1a, 2020)

It seems that these numbers did not just resonate because they were from a country that was closer but also because participants trusted Italian statistics more than those coming out of China. Whilst it is clear that these figures had an effect at a personal level, they were also cited when participants referred to the government policy. In the extract below, the participant points towards the death toll in Italy as the reason for the U-turn in policy.

I think, probably, because they [the government] were looking at what was happening in Italy where it was spreading very quickly and obviously listening to their scientists. I think that’s what drove the change. (Participant 2b, 2020)
At a more general level, participants referred to the numbers emerging from Italy when criticising the relaxed approach by the UK government before 16 March 2020.

I think that then forced us into a situation [to change policy] especially watching what was going on in Italy then suddenly Spain. (Participant 2a, 2020)

I was watching the news in Italy and in Spain, and looking what was going on. The people were not aware of the serious situation that was coming to us. (...) I feel it took very long for the government to take a serious action for this. (Participant 3e, 2020)

For these participants, it seems that their notion of risk, formulated through numbers, was rooted in what was happening in other European countries. In particular, the stark numbers emerging from Italy, especially when considered in relation to China, seemed to resonate with participants. This was particularly acute when discussions referred to these numbers to criticise government policy. Whilst not unanimous, a relatively coherent critique could be identified across all groups: the government saw the risk coronavirus posed from other countries yet did not act quick enough to prevent the virus from spreading in the UK. The narrative from these focus groups largely matches with the results of an online survey about COVID-19 conducted by researchers at ICL. Their findings highlight a similar level of distrust regarding government policy, with many participants believing that the UK would follow the same path as Italy, in terms of rising numbers of cases and deaths, if nothing was done (ICL, 2020).

This is a particularly important finding when we consider the analysis of political communication and news coverage above. It seems that focus group participants referred to numbers, and the narratives they underpinned, from the news media rather than politicians.

**Conclusion and discussion**

These findings point to the continued importance played by the news media in mediating science communication (Hart et al., 2015; King et al., 2017). Within the role as a mediator, the news media did not passively replicate government messages. Instead, their coverage fits within conventional normative assumptions about how the news media should act – such as being a ‘watchdog’ and holding the government to account (Kovach and Rosenstiel, 2007). Not only did they provide more specific statistical information than the government, but also did they used this information to criticise the official health policy. This critique provided a considerable counter-point to the government’s messaging regarding continuity and control that was based on vague references to numbers. Such a finding counters some of the emerging literature regarding the coverage of coronavirus. Researchers found that newspaper coverage in Argentina, Mexico and the US followed efforts by public health authorities to create public engagement and, simultaneously, to contain a sense of alarm and control discourse about the pandemic (Hallin et al., 2020).

The critical and proactive approach taken by the news media also seems to have exposed the public, as represented by our focus groups, to information regarding the
risk of the pandemic. For our participants, the quantitative notion of risk was not expressed in terms of personal risk to the disease – for example, you have a 2% chance of dying from coronavirus – or in terms of the prevalence of the disease in the UK at a general level – for example, there are around 10,000 cases in the UK. Instead, participants referred to the number of deaths per day observed in other countries that were deemed similar to the UK. This was most obviously observed in the data emerging from Italy. These daily death tolls operated in a similar way to projections. They functioned for our participants as a statistical foreshadowing of an impending health crisis.

The exclusion of this information from the government press releases suggests that communication of risk during crises does not always emerge from the government. The news media play an active role too. In other words, the idealised flow of information from politicians, through the news media, to the public is less important in this case than the relationship between our participants and the information they received from journalists. The concerns expressed by SPI-B on 4 March 2020 over the news media presenting alternative public health policies to the public seem to have played out in practice (SAGE, 2020b).

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