

'We need to start building up what's called herd immunity': Scientific dissensus and public broadcasting in the Covid-19 pandemic

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Abstract

This article uses content and thematic analyses to examine how UK public service broadcasting (PSB) reported on the Covid-19 pandemic prior to the first lockdown on March 23, 2020. This was a period when the British government's response to the pandemic was being heavily criticised by the World Health Organisation and other parts of the scientific community. This paper finds that in PSB these criticisms were muted and partially given. Instead, broadcasting explained in detail—and directly endorsed—government policy, including the 'herd immunity' approach. Most coverage of international responses focused on the United States and Europe with little attention paid to states that had successfully suppressed the virus. When such states were featured their public health measures were not explained nor compared to the UK's strategy with the consequence that PSB was unable to alert the public to measures that could have contained the virus and saved lives. These patterns in PSB coverage can be explained by the close links between key lobby journalists and the government's communication machine as well as the broader political and social contexts surrounding broadcasting at the onset of the pandemic.

KEYWORDS

Covid-19, journalism, media, public service broadcasting

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The days have been dominated by a crisis no-one could have imagined – Covid-19.

(BBC Political Editor, 24 July 2020)

1 | INTRODUCTION

Perhaps more than any other recent public health crisis, the Covid-19 pandemic has brought the issue of scientific and medical expertise into the media spotlight. In the UK the televised daily government press conferences where the Prime Minister appeared flanked by the Chief Medical and Scientific Officers attracted exceptionally large audiences (Ofcom, 2020). This has brought to public prominence a range of epidemiologists, virologists, immunologists, statistical modellers and other biomedical experts. Some, such as the Chief Medical Officer Chris Whitty, have become household names. The increased visibility of scientific expertise and its very public integration into daily government press briefings has seen ministers claim that policy making is 'based on the best scientific evidence' or 'just following the science' (Devlin & Boseley, 2020).

However, public discussion of the pandemic and appropriate policy responses has been notable for the degree of dissensus amongst scientists. At one level this has involved controversy over the weighting of different kinds of expertise. So, one complaint has been that decision making has been flawed because of an overreliance on epidemiology and statistical modelling at the expense of public health expertise (Devlin & Boseley, 2020; Horton, 2022). There has also been intense controversy over policy making. This has involved disagreements over strategic policy—such as whether to allow widespread infection or follow the example of countries which adopted a policy of maximum suppression (OECD, 2020). But it has also been evident in debates on specific policies such as 'Covid passes' or the vaccination of children (Ball, 2021; Sleat et al., 2021). Such scientific dissensus poses challenges for PSB whose journalists must maintain impartiality whilst navigating claims and counter-claims grounded in highly specialised forms of knowledge.

This paper examines how public broadcasting represented this scientific dissensus and government policy making during the early stage of the pandemic in March 2020. The UK government's slow reaction to the onset of the Covid-19 crisis and its initial decision to employ a 'herd immunity' strategy have been widely criticised (Sample & Walker, 2021). By May 2022 over 178,000 deaths had been attributed to the disease in the UK—one of the highest per capita rates amongst high income countries (Our World in Data, 2022). While China had initiated its lockdown on January 23, 2020, the UK lockdown was not imposed until 2 months later. The epidemiologist Neil Ferguson estimates if this had been introduced just 1 week earlier, then deaths in the first phase of the pandemic would have been cut by at least half (Johns, 2020). Other countries had anticipated the dangers and learned from previous experience of SARS, MERS and other public health emergencies. At the time China's approach was lauded by the World Health Organisation (WHO) and though subsequently changed, did produce a fatality rate very much lower than that of the UK. Their techniques included control of movement, as well as extensive testing, tracking and isolation of cases, which proved very effective in suppressing the virus and reducing mortality. Such policies—which were in sharp contrast to what the UK government was doing—were being strongly advocated at the time by the WHO, scientists and medics in Britain as well as parts of the press (Blackall, 2020; Carr & Dyer, 2020; WHO, 2020a, 2020b, 2020c, 2020d).

This article examines how public broadcasting reflected this debate prior to the first UK lockdown. We include a detailed analysis of the main BBC and ITV evening news bulletins from March 9 to 20, 2020—the date when a full lockdown was announced. There are two major issues which we analyse. The first is how the debate around government policy, and the scientific arguments which unpinned it, were featured. Did public service broadcasting subject government policy to scrutiny and feature scientific experts who questioned their approach? Or did it report policy in a largely uncritical manner—or even endorse it? The second issue we examine is how alternative courses of action were presented to the public. Since other countries were enjoying success in their response to Covid, it would be within the remit of PSB to inform the public of how the disease could be suppressed and a

normal life resumed. We will discuss first the key roles and responsibilities of PSB as well as research on the sociology of news content and production. This will be followed by an exploration of the literature on the representation of expertise.

1.1 | PSB: Roles, regulations and reality

Debates around the democratic value of PSB are long-standing but have become more intense in recent years with the proliferation of competing media channels and the rise of the Internet (Donders, 2019). Historically the role of PSB has been conceptualised as being distinct from that of its commercial rivals by offering a diverse range of programming to suit all tastes regardless of class, status, gender or race (Medhurst, 2020). This is seen to guarantee pluralism by protecting minority content which might not survive in purely commercial environment. News and current affairs are viewed as a core element of PSB (Cushion, 2012). ITV's public service commitments are bound to standards set out in Ofcom's broadcasting code. These state that news must be reported with 'due accuracy and due impartiality' (Ofcom, 2021). The BBC's commitments are more explicitly codified. The Corporation's most recent statement of its roles lists 'to provide impartial news and information to help people understand and engage with the world around them' as the first of its five public purposes (BBC, 2022b, p. 2). To achieve this the 'BBC should provide duly accurate and impartial news, current affairs and factual programming ... (with) ... a range and depth of analysis and content not widely available from other United Kingdom news providers'. A key way the democratic role of PSB has been conceptualised is through the notion of the 'public interest'. For instance, the BBC's current editorial guidelines state:

We operate in the **public interest**—reporting stories of significance to our audiences and holding power to account. In our journalism in particular, we seek to establish the **truth** and use the highest reporting standards to provide coverage that is **fair** and **accurate**. Our specialist expertise provides professional judgement and clear analysis. We are **impartial**, seeking to reflect the views and experiences of our audiences—so that our output as a whole includes a breadth and diversity of opinion and no significant strand of thought is under-represented or omitted. We are independent of outside interests and arrangements that could compromise our **editorial integrity**

(BBC, 2022a, p. 6)

So along with a commitment to reporting 'significant stories' representing a 'diversity of opinion' and reporting in a 'independent', 'fair', 'accurate' and 'impartial' manner, the notion of 'public interest' is also linked to the traditional watchdog role of the media—'holding power to account'. This is further elaborated later in the document where it is stated that 'the public interest is also served in exposingcorruption, injustice, significant incompetence or negligence'.

However, sociological studies of mass communications have often pointed to the structures of power within which news production is located and its role in legitimising social interests including those of the state. This research has challenged PSB's claims to produce 'balanced' and 'impartial' reporting. Instead, studies focussed on how PSB reports on a range of issues including industrial relations (Curran & Seaton, 1997; Glasgow Media Group, 1980, 1982; Mills, 2016), economic affairs (Basu & Ness, 2018; Berry, 2013a, 2013b, 2016a, 2016b, 2018, 2019; Mills, 2016; Philo, 1995), foreign wars (Glasgow Media Group, 1985; Lewis et al., 2006; Philo & Berry, 2004; Philo & McLaughlin, 1993), civil conflict (Miller, 1994) and Britain's relationship to the European Union (Berry et al., 2021; Wahl-Jorgensen et al., 2013) have all pointed to consistent imbalances in coverage. These include a tendency to favour the government of the day—particularly if Conservative—over other parties, political and other Establishment elites over civil society and citizen voices, and supporters of the free market or City sources over left of centre or Keynesian perspectives.

In explaining the tendency for PSB to favour incumbent governments and right of centre Establishment positions research has pointed to the role of political economy and the social organisation of newswork (Schudson, 1989). For the BBC a key issue involves its relationship to the state. Burns (1977, p. 192) likened this to that of a Quango which whilst able to exert some autonomy—'government control' was 'a matter of negotiation'—was expected to operate in 'conformity with government purposes'. This conformity was established through discussion between ministers and senior BBC executives (Burns, 1977; Mills, 2016; Schlesinger, 1978). The government of the day also has significant leverage over the BBC through its ability to set the licence fee and appoint the Board of Governors. From the 1980s successive governments have used explicitly partisan appointments to reshape the upper management of the Corporation (Curran & Seaton, 1997). Research has also pointed to the significance of the close correlation between the class and educational backgrounds—as well as mutual networks of friendship—between political elites and senior broadcast editors and journalists (Manning, 2000; Sutton Trust, 2019). These elite networks have also now reproduced themselves within the sphere of social media (Mills et al., 2021). In addition, along with the use of public relations, there is well documented evidence of threats and direct political intervention by senior politicians in an attempt to influence coverage—especially in times of intense controversy or crisis (Curran & Seaton, 1997; Miller, 1994).

Explanations drawn from the sociology of newswork have highlighted how hierarchical control—particularly the system of 'referring up' controversial political material to senior editors—shapes broadcast coverage as well as socialising junior reporters into the approach necessary for career progression (Schlesinger, 1978). Research has also pointed to how reporting is structured around key elite events such as press conferences, summits or the release of official information through the use of the 'news diary' (Berry et al., 2021). In this way the relationship of 'bureaucratic affinity' between news organisations and government allows broadcasters to plan ahead and ensure that there is a steady conveyor belt of stories to deliver to audiences (Fishman, 1980). Finally, research has identified the key impact of structuring reporting around institutional sources and 'beats', the most important of which is based at Westminster. Here many political journalists operate within the 'lobby system' where they receive twice daily briefings from the Prime Minister's press secretary. This system socialises journalists into Establishment culture and has been criticised for creating a symbiotic relationship between reporters and political sources which encourages passivity and uncritical journalism (Glasgow Media Group, 1985; Mills, 2016). Although, broadcasting is not a completely closed system the operation of these various factors goes a long way in explaining why news accounts tend to be dominated by official sources and Establishment positions.

1.2 | Journalism and expertise

Research on media reporting of health news has shown that experts tend to dominate patterns of source access (Albæk, 2011; Conrad, 1999; Stroobant et al., 2018). The predominance of such experts has also been found in research on the reporting of previous pandemics. For instance, Staniland and Smith (2013) examined 13 studies looking at how media reported the 2009 H1N1 'swine flu' pandemic across a range of countries and found that public health officials and scientists dominated media frames. However, as Morani et al. (2022) note most sourcing studies tend to just present quantitative data on the prevalence of experts. Few explore what experts say, how patterns of source access translate into the dominance of certain arguments or how journalists chose to foreground, downgrade or endorse the perspectives of experts.¹ This study will add to the currently limited literature which provides a more detailed account of how expertise is represented.

Another strand of research has focussed on why journalists are drawn to expert sources. Experts are attractive to journalists because of their authority and status which burnishes the credibility of news accounts whilst also reducing the need for fact-checking and verification (Albæk, 2011; Stroobant, De Dobbelaer and Raeymaeckers, 2018). For journalists working in PSB, structuring news around the perspectives of experts allows reporters to adhere to professional standards grounded in objectivity and impartiality (Kovach and Rosen-

thal, 2001). Journalists are also drawn to experts because in areas of highly specialised knowledge they can help explain and simplify complex scientific debates (Albæk, 2011). This can aid public understanding and also allow journalists to scrutinise policy making.

During the coronavirus pandemic the UK government has attempted to justify policy by claiming it was 'guided by the science' but concerns over transparency and whether scientific advice was becoming politicised led to the formation of Independent Sage—a group of scientists acting as a counterweight to the government's official advisory body (SAGE). Members of Independent Sage have sometimes been critical of official messaging, policy and the advice offered by government scientists (e.g. Reicher, 2021; Sample, 2021). This dissensus raises the issue of what role scientific experts should play in public debate and policy making. As Dommett and Pearce (2019, p. 675) note experts can play many different roles as 'as pure scientists who provide information, issue advocates who focus on the implications of research for an agenda or decision-making, science arbiters who inform decision-making without seeking to drive a particular agenda and honest brokers who clarify and seek to expand the choices of decision-makers'. Ball (2022) argues that for government scientists during the pandemic such roles became blurred with the consequence that they were not able to speak 'truth to power' and ended up legitimising policy failures.

This degree of expert dissensus represents a shift from previous pandemics. As Mellado et al. (2021, p. 5) note previous pandemics—like natural disasters or security crises—tended to operate as 'sphere of consensus' events, which 'generate cooperation between media and public authorities, suspension of watchdog roles and bracketing of partisan divisions'. Here, they argue, the media operates within the Briggs and Hallin's (2016) biomedical authority model of health communication, where its primary role is to communicate the scientific consensus to the public. But, as they observe, in the coronavirus pandemic not only were experts, and hence media accounts, divided but scientific understanding of the virus was hazy—particularly in the early stages of the pandemic—and the scope and scale of the outbreak meant that it was impossible for biomedical sources to control the public narrative, a problem amplified by the rise of social media. The upshot of this was that the role journalists played in mediating scientific opinion during the coronavirus pandemic may be less akin to previous pandemics than the reporting of scientific controversies.

1.3 | Research questions

Based on the review of the literature on (a) the roles and responsibilities of public service broadcasting and (b) the relationship between journalism and expertise, the rationale for this study rests on two foundations. First, the social value of the research. The object of this research—Britain's initial response to the Covid-19—has been described as 'one of the most important public health failures the United Kingdom has ever experienced' in an official government report (Sample & Walker, 2021). The report found a failure to lock down early and not utilise 'measures that worked in other countries' led to tens of thousands of avoidable deaths. In such a context evaluating whether public service broadcasting acted in line with its mandate to report in the public interest and hold the government to account in this critical period is of major social importance. The second rationale for this research is that it seeks to extend knowledge in two areas. First, in going beyond merely counting the prevalence of different sources, to quantitatively and qualitatively analyse how journalists foregrounded or downgraded competing viewpoints it provides a more in-depth account of how journalists manage scientific controversy than in previous studies. Second, whilst previous pandemics have been characterised as 'sphere of consensus' events, this study seeks to examine how journalists respond when the scientific community does not speak with one voice but instead is riven with competing accounts and policy prescriptions. Therefore, this study will address the following research questions:

RQ1. How was UK government policy and its critics reported?

RQ2. How was the policy response of other countries reported, particularly those who had successfully contained the pandemic?

2 | METHODS

This paper is based on an analysis of 12 days of BBC and ITV 10 O'clock news coverage from March 9 to 20, 2020. These bulletins were selected because they were the most influential source for coronavirus news. Research from Ofcom (2020) found that 82% of the public turned to the BBC for coronavirus news, 56% to other broadcasters, 49% to social media and 43% to newspapers. The bulletins selected for analysis were the most watched on each channel and had seen a 92% year on year increase in audience (Ofcom, 2020). This sample was chosen because it was a key period which required immediate action. If the government had instituted a lockdown just a week earlier then deaths in this first phase of the pandemic would have been halved (Johns, 2020).

To generate the sample a researcher accessed the bulletins through the Box of Broadcasts website. All items relating to coronavirus were then transcribed. By item, we refer not to stories but individual news segments—such as a stand-alone anchor only item or edited package. In total 214 coronavirus news items were transcribed producing 6306 lines of news text.

The news texts were then subject to two forms of analysis. The first was a quantitative content analysis which was coded by a single experienced researcher. First, we recorded the lines of text in the item. Second, we classified the location of the item, whether it was domestic only or had an international element. To classify as having an international element a segment would need to have at least two sentences relating to a foreign country, though just under one in four segments were entirely devoted to what was happening in a country outside the UK. We had originally used a third category—'mixed'—but this was discarded because adequate inter-coder reliability could not be obtained. If the item had an international element we coded the country or countries that were featured. Third, we coded all cases where government policy was described, explained, justified or endorsed. In coding this we noted who was commenting on government policy and the quantity of news text involved. Under this variable we captured both direct and reported speech—though the categories have been collapsed into one variable in the analysis. Reported speech was coded broadly to encompass terms such as the 'government believes' or 'the Prime Minister acknowledges'. So if a view, belief or intention was linked to a specified source it was coded as a case of indirect speech. Fourth, we coded any indirect or direct criticism of government policy. Indirect criticism involved either questioning government policy and/or highlighting that other states were taking a different approach. For example:

Journalist: All of Europe wants to avoid scenes like these in Italy. But the UK's approach is in stark contrast to measures taken elsewhere

(BBC1 main evening news, March 13, 2020)

[Unidentified voice addressing Lyn Truss]: Are you doing enough to stop the virus?

(BBC1 main evening news, March 17, 2020)

To be coded as direct criticism a journalist or source would need to explicitly state that policy was flawed in some sense and/or suggest an alternative. This could relate to the overall strategy for dealing with the pandemic or with an aspect of policy such as the provision of personal protective equipment:

Journalist: The sad truth is the worst of the outbreak is almost certainly still to come, but across the UK, growing numbers of doctors are already worried about the shortage of protective clothing and equipment, and say their message is not getting through. They have written in strong terms to

TABLE 1 Intercoder reliability statistics.

Variable	Intercoder agreement	Krippendorff's alpha
Domestic/International	97.2%	0.945
Foreign country	90.0%	0.868
Source describing/Explaining/Endorsing government policy	80.0%	0.708
Presence of indirect criticism of government policy	95.6%	0.909
Source and direct criticism of government policy	82.1%	0.716

the government to say so. They are concerned about their patients' health and not unreasonably, their own

(ITV main evening news, March 19, 2020)

For direct criticism we coded both who was making the criticism and how many lines of news text were involved.

In order to check the reliability of the coding process 10% of the sample was coded by a second coder and intercoder reliability tests were run on the variables in this sub-sample. As can be seen in Table 1 intercoder agreement was at least 80% on all variables.

The second method used in this paper is termed thematic analysis. Its value is to show how the news may prioritise or give legitimacy to some explanations. This involves a qualitative analysis of specific explanations in the text and how they are used to organise meaning. We term these explanatory themes. They can be simply assumed in accounts that are given by journalists or other commentators. An example would be the assumption that the virus cannot be completely suppressed and that attempts to do so would be followed by its resurgence. If journalists do make such an assumption, then it can effectively downgrade other potential action to eliminate the virus and also weaken criticism of the lack of such action. In such circumstances, the journalist is effectively endorsing a way of understanding a situation and what is possible within it. The presence of such assumptions can be identified by a close examination of the text, as for example, when a journalist states:

This applies to all countries around the world who are involved in lockdowns or other restrictions, because as soon as you lift those restrictions, the virus can come back again.

(BBC1 main evening news, March 16, 2020)

The importance of explanatory themes and the assumptions which they contain is that they act to structure the meanings of news to audiences. They can affect which subjects are chosen to be pursued in news accounts, or which are highlighted in headlines or explored in interview questions. In that sense, they are dominant and are likely to be directly embraced by journalists. There may be evidence or commentary in a bulletin which contradicts the dominant theme, but these tend to remain as disparate fragments. An interviewee, for example, might give an account which differs from the main narrative, but this will not be highlighted and presented as a clear, and contradicting alternative. It may be undermined or perhaps 'sandwiched' between other accounts which reduce its force.

3 | RESULTS

3.1 | The government position(s) and their critics

On March 3, 2020, the government published the 'Action Plan to Tackle the Spread of Coronavirus'. The first phase of this was to detect early cases, follow up contacts and prevent spread. It was also believed at the time by the government and its advisors that if the virus infected the relatively less vulnerable groups, then a 'herd immunity' would develop. However, in practice, this first part of the plan was doomed as there was no quarantine on entry to the UK. The phases which followed were attempts at mitigation. The purposes of this are listed in the policy document as

being to 'slow the spread in this country, if it does take hold, lowering the peak impact and pushing it away from the winter season' (Department of Health and Social Care, 2020).

There was no policy to eliminate the virus. The approach was an attempt to limit the spread to match available health resources. The document also contains, as a planning principle, that the UK will: 'be active global players—working with WHO' (Department of Health and Social Care, 2020). But UK policy was actually very different from that advocated by the WHO at the time. Their very strong and consistent advice was to use aggressive measures to stop the virus. For instance, on 12 March, as the UK government was embracing its 'mitigation' strategy, the WHO Director General issued a statement explicitly against such an approach:

The idea that countries should shift from containment to mitigation is wrong and dangerous. On the contrary, we have to double down. This is a controllable pandemic. Countries that decide to give up on fundamental public health measures may end up with a larger problem, and a heavier burden on the health system that requires more severe measures to control.

(WHO, 2020d)

And he called for a system of 'robust surveillance' to test, trace, isolate and quarantine contacts. This was on the day that the British government made the decision that it would no longer try to 'track and trace' suspected cases, but instead, testing would be only for those in hospital with serious breathing problems (Sinclair & Read, 2020). As the *Daily Mail* reported, 'health chiefs are only currently testing patients in hospital...The controversial decision infuriated the World Health Organisation, who warned the pandemic won't be stopped unless officials find every infected patient' (Matthews, 2020). On 13 March, the WHO Director-General underlined the point again:

Not testing alone. Not contact tracing alone. Not quarantine alone. Not social distancing alone. Do it all.

(WHO, 2020c)

In this period, there were strong criticisms being made of the UK government approach. But in the news coverage which we analyse, these tended to be downplayed when they did appear and were not developed as a central theme to offer an alternative to government policy. Indirect criticism which involved questioning of government policy or the highlighting of the fact that Britain was taking a different approach to other states appeared in 12.6% of news items on BBC news and 15.5% of items on ITV. These were generally fleeting references—typically a line or two of news text. For instance:

China has responded by closing off entire cities. Other countries have done the same. But until now, the UK has kept the most drastic measures in reserve. Some critics have questioned the modelling of the outbreak in Britain. But the scientists doing the work say it is better than nothing.

(BBC1 main evening news, March 17, 2020)

The data on the prevalence of direct criticism is presented in Tables 2 and 3. As can be seen direct criticism of government policy appears in 11.8% of news items on BBC1 and 15.5% of articles on ITV. Four key findings are worth highlighting from this data. First, the government's approach is infrequently criticised in reporting and the criticism that does appear usually consists of brief isolated comments which are not developed into a coherent alternative perspective. Second, scientists are very rarely featured on television criticising the government. On BBC1 it was in one in 40 news items and on ITV it was in one in 50. This is marked contrast to how often they are featured describing, explaining or endorsing the government's approach (see Table 4). Third, the bulk of criticism on both channels comes from doctors and nurses decrying the lack of PPE, ventilators, NHS resources or testing capacity for medical staff. These don't relate to the government's central strategy to opt for a mitigation rather than suppression policy. Direct criticism calling for more restrictions or faster action against the virus appear in approximately one in 20 news items across the two channels. The only example of direct criticism of the government's herd immunity approach appears in this single reported statement from the WHO.

TABLE 2 Proportion of news items and lines of news text containing direct criticism from sources on BBC News.

Criticism/ Source	Lack of testing of NHS staff	Lack of PPE/ Ventilators	Poor comms/ Info	Need more restrictions/ Faster action	Need more NHS resources	Herd immunity is wrong policy	Total
Journalist	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)
Scientist	0.8% (2)	0% (0)	0% (0)	2.5% (10)	0% (0)	0.84% (2)	2.5% (14)
Medic	1.7% (12)	4.2% (15)	0% (0)	0% (0)	0% (0)	0% (0)	5.0% (27)
Politician	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)
MOP	0% (0)	0% (0)	0.8% (2)	0.84% (2)	0% (0)	0% (0)	1.7% (4)
Other	0.8% (2)	1.7% (3)	0.8% (1)	2.5% (6)	0% (0)	0% (0)	3.4% (12)
Total	3.4% (16)	5.0% (18)	1.7% (3)	5.8% (18)	0% (0)	0.84% (2)	11.8% (57)

TABLE 3 Proportion of news items and lines of news text containing direct criticism from sources on ITV News.

Criticism/ Source	Lack of testing of NHS staff	Lack of PPE/ Ventilators	Poor comms/ Info	Need more restrictions/ Faster action	Need more NHS resources	Herd immunity is wrong policy	Total
Journalist	1.0% (1)	0% (0)	1.0% (1)	2.1% (3)	0% (0)	0% (0)	4.1% (5)
Scientist	0% (0)	0% (0)	1.0% (2)	2.1% (6)	0% (0)	0% (0)	2.1% (8)
Medic	1.0% (13)	6.2% (49)	0% (0)	0% (0)	3.1% (10)	0% (0)	8.2% (72)
Politician	0% (0)	0% (0)	0% (0)	4.1% (11)	0% (0)	0% (0)	4.1% (11)
MOP	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)	0% (0)
Total	2.1% (14)	6.2% (49)	2% (3)	6.2% (20)	3.1% (10)	0% (0)	15.5% (96)

TABLE 4 Proportion of articles and lines of news text describing/explaining/justifying government policy by source type.

	Journalists	Politicians	Scientists	Other	Total
BBC	29.4% (242)	18.5% (121)	15.1% (63)	6.7% (25)	36.1% (451)
ITV	33.0% (214)	25.8% (134)	14.4% (72)	7.2% (11)	38.1% (431)

The World Health Organization has raised serious concerns about the UK's strategy to allow enough people to be infected with the virus who then recover, in order to build up so-called herd immunity.
(BBC1 main evening news, March 14, 2020)

When direct criticism of the mitigation strategy was featured it was common for journalists to insert the government's rationale straight afterwards which had the effect of neutralising the criticism:

[Anchor]: And Robert is here to talk about all this. Look I was just talking with Emily there you 've probably heard it, but *there is a view that the government is being slow and we're going to end up as Italy anyway so why not do it all sooner?*

[Political Editor]: So the government's position is straightforwardly that it is following the scientific advice and I've talked to a lot of distinguished scientists about this and they say that actually people like the Chief Medical Officer Chris Whitty, the Chief scientific Adviser Vallance are top class and they

would trust them when they would say it is literally pointless at this point to tell people with coughs and colds to stay at home but in two weeks time, if the virus increases its spread as they expect, we will be asked to stay at home if we've got a sniffle or a cough.

(ITV main evening news, March 10, 2020—our italics)

Table 4 contains the data on the proportion of articles and lines of news text given over to describing, explaining and justifying government policy. On both channels journalists spend the most time discussing policy followed by politicians and scientists. As the data shows the representation of scientific opinion is very heavily weighted towards the government's position. Any viewer tuning into PSB in this period and seeing a scientist would be far more likely to find them describing, explaining or supporting government policy than questioning or criticising it. This was partly a function of the prominence given to government press conferences where scientists were featured laying out the rationale for policy. Yet given how highly contested the government's approach was there was nothing stopping broadcasters from also featuring the opinions of the many scientists critical of official policy.

It would be expected that during a public health emergency broadcasters would spend substantial time outlining government policy and its implications. However, in coverage this often went beyond description to strong support and an underlining of the legitimacy of government policy. For example, in this account by the BBC's Political Editor, there was a consistent reiteration and affirmation of the government stance. This is from 18 March, 5 days before the UK lockdown and well after the strong warnings from WHO. There is a consistent repetition of how 'clear' the government has been in its step-by-step approach, guided by the best information to save lives. This was in reply to a question from the news anchor on whether there will be new restrictions:

Well Sophie, *the government's position has always been quite clear*, that they have taken decisions as and when the data looked at and produced by government scientists has been changing over time. But *they have also been quite clear* that there has been a range of things on the table, *a kind of series of steps*, or to use the jargon that's been used in Whitehall, *it's like a ladder with different rungs*, and *as we go up the stage of getting through this outbreak*, the government needs to take different actions to try to clamp down and *above all else of course to save lives*. It was notable today that the Prime Minister didn't rule out increasing the level of restrictions on our lives. In fact, *he was quite explicit in doing so*, but I think that said, *we should also be clear that the government has been trying very hard and clear about the fact that they are taking a step-by-step approach*. They are trying to *be guided every day by the best information* that is put forward to them in what is clearly a very rapidly changing situation, where all sorts of demands are being put on everybody in government, and of course everybody around the country, and there is no question with that schools announcement today, that's been something that has been coming for a while, *the direction of travel has been quite clear*, but we are already at a stage where people's lives are being profoundly changed by the way in which this disease is unfolding, not just in this country but of course around the world, and there is a sense that Whitehall is really trying to scramble to keep up with the pace of how this disease is spreading, and for the government of course, that means there are no straightforward decisions here. They are making very, very big promises, but there is of course a lot of political pressure over how in the days, weeks and months they will be able really to make them come true.

(BBC1 main evening news, March 18, 2020—our italics)

This does have the feel of a state broadcaster reassuring the population about the clear and measured approach of its leaders, guided by the best information. It is describing a government which at that time was being widely criticised for the confusion of its response. The science which the government was reported to be following was strongly

contested. As the *Financial Times* had commented 6 days before the above report: 'the prime minister is facing tough questions about why he is not taking more draconian measures to tackle coronavirus'. Even earlier on 10 March, Richard Horton, editor of *The Lancet*, had made a statement widely shared on Twitter that:

The UK government—Matt Hancock and Boris Johnson—claim they are following the science. But that is not true. The evidence is clear. We need urgent implementation of social distancing and closure policies. The government is playing roulette with the public. This is a major error.

(Horton, March 10, 2020)

On 18 March, the same day as the above BBC report, Horton (2020) wrote in the *Guardian* that UK politicians and their advisors had ignored the evidence from China and Italy. The research findings from January and February had been published in *The Lancet*. They were accompanied by strong warnings of a global spread of the virus but were not acted upon at the time in the UK. There was apparently a belief in the government that the new virus could be treated like influenza. Horton notes how a government expert advisor had been explicit on this and the theory of 'herd immunity' in an interview for BBC *Newsnight* on 13 March. The UK's approach was to allow a controlled epidemic such that the 'majority of the population become infected'. As Horton writes, the advisor had suggested that 'ideally', we might need 'a nice big epidemic' among the less vulnerable. 'What we are going to have to try and do,' he said, was to 'manage this acquisition of herd immunity and minimise the exposure of people who are vulnerable'. But as Horton noted, with a 1% fatality rate and perhaps 60% of the population infected, the result would be a very large number of deaths. As he put it, 'any numerate school student could make the calculation'.

This very dangerous strategy was justified by the assertion that attempts to suppress the virus would result in resurgence as soon as controls were lifted. But since this was a new virus, and the results of attempting to repress it were only just being known, there was no evidence that the virus could not be eliminated within a population. The WHO and critics in the UK had distinguished it from other viruses such as influenza and had pointed to the value of immediate public health measures in suppressing it, but the broadcasters endorsed the government approach and the pace of its response. On 9 March, the BBC news anchor asks the health editor, why are we not taking 'very, very rigorous measures?' The reply is that:

There is no point going too early with bans, you can't then take it off the table, if it doesn't work to begin with and you lose public confidence.

(BBC1 main evening news, March 9, 2020)

On 12 March, the BBC political correspondent reported the government as saying that their approach is based on the 'best scientific advice' and comments that 'rushing into drastic action might not be the safest route' (BBC1 main evening news, March 12, 2020). Both BBC and ITN covered the very serious growth of the epidemic in Italy. On 9 March, an ITN presenter asks the science editor if the UK is dealing with the epidemic 'better' or 'Are we just going to end up as Italy fairly soon?' The reply is that, 'We are dealing with it as well as we can'. He notes rather fatalistically that 'we are going to end up where Italy is' and gives the government's position on 'natural immunity', slowing it down and 'delay':

I think the honest answer has to be we are dealing with it as well as we can but we are going to end up where Italy is at some point in the not too distant future. These epidemics follow these sorts of trends. There's a slow linear phase and then things get a bit exponential for a while until there is enough natural immunity out there for the outbreak to start to coming down. We are heading in that direction. What they're all playing for in Government at the moment is how much can you slow the steepness of that line down. Italy's as you see has gone up very steeply. It's quite worrying it has overwhelmed the health care system in Lombardy etcetera. It's all about slowing it down hence this delay tactic they're going to be unveiling fairly soon.

(ITV main evening news, March 9, 2020)

As previously noted some bulletins did contain criticism of government policy. An ITN bulletin on 12 March featured Professor John Ashton saying 'from day one, the government's approach has been complacent', and reports briefly that the 'WHO has pleaded for aggressive action'. It also features the Shadow Health Secretary saying, 'The British public are hearing about what's happening in Ireland, what's happening in Norway, what's happening in France, and they're asking legitimate questions about why we are not doing the same.' (ITV main evening news, March 12, 2020). The BBC news on the same evening does not include these criticisms. It shows clips of Leo Varadkar in Ireland and Nicola Sturgeon in Scotland pointing to differences in approach, but follows with this:

Number Ten is well aware outwardly they are taking a less stringent approach than some other countries, even our near neighbours, but that is based on what they say is the best scientific evidence they have in the genuine belief that we are in this for the long haul, perhaps three months from the worst, and more draconian measures will only have an effect if they're taken at the right time.

(BBC1 main evening news, March 12, 2020)

In a later segment in the same bulletin, the news presenter asks, rhetorically, 'what's the thinking behind today's measures and the impact on the NHS?' This introduces a piece by the health editor in which he looks at 'what can people who are infected expect?'. He asks a member of the public who has had the infection:

Interviewee: I have had worse flu, without a doubt. I'd say the most debilitating aspect is the uncontrollable coughing. That is probably the worst bit. The rest of it, the fever is no different to a normal flu-type symptom. And I'd say it's not to be worried about.

(BBC1 main evening news, March 12, 2020)

A graph is then shown by the health editor to illustrate how the government strategy will work, he comments that, 'with the interventions, it's hoping to flatten the peak and delay it'. The government chief scientist is then shown speaking on how this flattening would attempt to match NHS resources:

Patrick Vallance: So, we are trying to reduce the number of cases at any one time. That's very important for NHS, in order to make the NHS able to cope with this. And it's also important because it pushes it out in summer months, where the NHS is less busy.

(BBC1 main evening news, March 12, 2020)

We are told by the health editor reducing virus cases beyond this is difficult and 'that might not be a bad thing'. Then there is more from the chief scientist:

Patrick Vallance: It is not possible to stop everybody getting it, and it's also actually not desirable. Because you want some immunity in the population. We need to have immunity to protect ourselves from this in the future.

(BBC1 main evening news, March 12, 2020)

Later in the bulletin, the news presenter addresses questions to the medical correspondent. He further explains the government position, substantially endorsing it and speaking of what 'we' need to do. He is asked why the UK is not following many other countries, including France and Ireland, in shutting their schools. He replies:

The government is adamant it is being led by the science and the scientific advice is that unless you were to shut all schools for three months it would barely have any impact on suppressing the epidemic, and they don't think banning mass gatherings at this stage would have much effect either.

(BBC1 main evening news, March 12, 2020)

He also emphasises the nature of COVID as a 'mild illness': 'Most people will get a mild illness, four out of five, but one in 20 may need critical care'. This news then continues with a statement on the need for 'herd immunity' and more reassurance that 99 out of 100 people will survive, albeit there will be 'a bumpy few months':

The aim now is not to completely suppress the epidemic. We need to start building up what's called herd immunity. A final point, it's worth stressing that 99 out of 100 people who this get this will survive it, but it's going to be a bumpy few months.

(BBC1 main evening news, March 12, 2020)

The downplaying of the severity of the virus—particularly on the BBC where it was described as 'mild' for 'most' seven times by journalists (once on ITV)—contrasts sharply with the warnings that had been coming from Chinese scientists. As Richard Horton noted above, these had been published in *The Lancet* but there were also other sources. On 4 March, the online news portal *Sina* had reproduced evidence from an earlier report in *Health Times*, on why the virus was seen as so deadly. It was reported that Covid attacks the heart, liver, and kidneys, as well as lungs and is 'highly infectious, much more difficult to treat than SARS'. It was also said to spread via droplet, touch, through air and was 'even asymptomatic' (*Health Times*, 2020).

That the disease could be asymptomatic was also reported elsewhere. On 1 March the *Observer* quoted the former chair of the Global Health Council Jonathan D. Quick who noted that, 'We've now seen cases in six continents, apparently "silent"—that is, at least partly asymptomatic' (Spinney, 2020). On 12 March, the *Guardian* reported research findings from Singapore and China that 'two-thirds and three-quarters of people respectively appear to have caught it from others who were incubating the virus but still symptom-free' (Sample, 2020).

But on BBC news, advice on the possibility of continued social mixing was still being given. On 13 March, the Deputy Director of the National Infection Service for Public Health England appears on *BBC Newsnight*. He states that: 'People can go to the pub as long as they have no symptoms. There is absolutely no restriction on their movements or what they do'. The interviewer then asks what about weddings, are they something that people shouldn't go to? The reply is to stay away if you have a cough or a fever and the message is:

PHE speaker: What we do know about the virus is that you are unlikely to be infectious when you don't have symptoms.

(BBC Newsnight, March 13, 2020)

The interviewer asks about foreign holidays, should people not book them? The reply is:

There is no reason why people shouldn't book their holidays. I myself am gonna go on holiday. The chances of getting coronavirus abroad and the UK will be broadly similar.

(BBC Newsnight Twitter, March 13, 2020)

In the early days of the Covid outbreak, the reassuring tone of some media coverage and the lack of perceived urgency on the part of the government may have had the effect of reducing public perception of risk. On 5 March the *Daily Mail* reported a YouGov survey of 10 countries which 'put Britain last, both in public fear and likelihood of taking steps to limit risk' (Howard, 2020).

3.2 | The British response and international comparisons

We will address now how the news reported the successful strategies of other countries and the extent to which these were used to comment upon or criticise policy in the UK. As we have seen, the WHO was extremely critical of the 'mitigation' strategy and was advocating immediate, aggressive action against the virus. We will look first at

how their interventions into public debate were featured in news and then move to the study of reports on individual countries.

The policies advocated by the WHO were based in part on their analysis of public health measures in China. In February 2020, they had sent a team of 25 international experts, and the WHO itself, to report on the Chinese response to the virus and to inform other countries on how to prepare themselves. Their findings were published on 28 February and offered very powerful conclusions:

These are the only measures that are currently proven to interrupt or minimize transmission chains in humans. Fundamental to these measures is extremely proactive surveillance to immediately detect cases, very rapid diagnosis and immediate case isolation, rigorous tracking and quarantine of close contacts, and an exceptionally high degree of population understanding and acceptance of these measures.

(WHO, 2020a, p. 19)

They also note that:

China's uncompromising and rigorous use of non-pharmaceutical measures to contain transmission of the COVID-19 virus in multiple settings provides vital lessons for the global response.

(WHO, 2020a, p. 19)

But in the main broadcast news on that day, the report and the views of the WHO and international experts are barely mentioned. The BBC commented that:

The World Health Organisation says most, if not all countries, should expect outbreaks. The World Health Organisation said the risk of a global spread of the virus was high though containment was still possible.

(BBC1 main evening news, February 28, 2020)

And on ITV:

The World Health Organisation has said the global impact has huge implications. [Director of WHO speaking]: 'We have now increased our assessment of the risk of spread and the risk of impact of Covid-19 to very high at global level.

(ITV main evening news, February 28, 2020)

What is missing is an analysis of which containment measures are likely to work and how these compare with what was being undertaken in the UK. How effective, for example, was the UK's test and trace programme relative to that of China? The details of the Chinese approach had been given in the report. The BBC in the same bulletin did, however, have space to repeat a reassuring message about Covid being a 'mild illness' comparing it with 'seasonal flu'.

The WHO report was covered in digital media outlets such as *Business Insider*. But the mainstream broadcasters seemed reluctant to discuss its findings. There were reasons to be circumspect about information from the Chinese state. The whistleblower Li Wenliang had been disciplined for warning about the virus and there were claims that the Chinese government could have alerted the world to its dangers sooner. The authors of the WHO report perhaps anticipated a critical response and asserted categorically that the fall in cases in China was 'real' (WHO, 2020a, p. 17).

Media institutions such as the BBC also have the capacity to check the validity of such claims. There are many journalists and correspondents located in China and the BBC had access to Chinese medical personnel. On 28 February, the day of the WHO report, BBC online includes an extended interview with Xie Jiang, a doctor from Wuhan.

He confirms that the situation is now more under control and endorses strong actions such as the locking down of Wuhan:

We should always take quick action, just like we locked down Wuhan, and if we did it earlier, the result could have been better. I lost five patients in one night, can you imagine that, in one night, I lost five lives.

(BBC News Online, February 28, 2020)

He warns the rest of the world to take care, 'Don't neglect this disease'. This report is headed, 'On the front line in Wuhan', and above that was a larger headline saying 'WHO issues "highest alert" over coronavirus'. This was on the same day that the BBC main news had repeated the message on covid as a mild illness and compared it with seasonal flu. The news does not cover the central messages of the WHO report and of the Chinese doctor that the disease is deadly or their imperatives for immediate action and most importantly the advice on the strong interventions that were needed. They remain on the margins or are ignored. This is a pattern which is repeated through the period of our main sample when statements from the WHO or information from countries successfully suppressing the virus are reported.

On 11 March for example, the WHO declared the virus to be a global pandemic. The BBC reports this and the presenter asks the science correspondent about the significance of the move. He replies that the WHO is 'deeply concerned about the low-level of action in some countries', but he does not speak of the relative lack of action in the UK. He then asks rhetorically 'what does it mean for the UK government?' He reduces the force of what the WHO is saying by replying to his own question, 'Not a lot in practice'. He then suggests that the WHO statement is giving the UK government 'the cue' to move to the delay phase:

So what does it mean for the UK Government? Not a lot in practice for the UK Government but it gives them the cue if they wish to move to the next phase of the action plan.

(BBC1 main evening news, March 11, 2020)

To move towards mitigation and away from containment and suppression was not WHO policy. The Director-General of WHO had actually said that day in the press conference:

We cannot say this loudly enough, or clearly enough, or often enough: all countries can still change the course of this pandemic. If countries detect, test, treat, isolate, trace, and mobilise their people in the response, those with a handful of cases can prevent those cases becoming clusters, and those clusters becoming community transmission. Even those countries with community transmission or large clusters can turn the tide on this virus. Several countries have demonstrated that this virus can be suppressed and controlled.

(WHO, 2020b)

But these words on the suppression of the virus and the measures that were being used successfully by other nations are not reported here. The next day, BBC news has the WHO in its main headlines and reports that, 'The World Health Organisation declares Europe the focal point of the global coronavirus outbreak' (BBC1 main evening news, March 13, 2020). The newsworthiness of the Director-General's speech is that Europe is the centre of the pandemic with high case numbers. But a reason for this was that East Asian countries were pursuing successful policies to suppress the virus as the Director-General explicitly noted in his speech. This again is not reported in the bulletin. What is missing is an analysis of what has worked elsewhere and a comparison with the lack of such action in the UK.

TABLE 5 Proportion as a percentage of items featuring countries in international only items and lines of news text in brackets.

	BBC	ITV	Total
Italy	21.2% (192)	20.0% (101)	20.7% (293)
USA	18.2% (143)	15.0% (89)	17.0% (232)
Multi-Europe	18.2% (162)	15.0% (59)	17.0% (221)
Multi-continent	12.1% (104)	5.0% (30)	9.4% (134)
Spain	12.1% (94)	5.0% (6)	9.4% (100)
China	3.0% (30)	15.0% (89)	7.5% (119)
Republic of Ireland	3.0% (25)	10.0% (29)	5.7% (54)
France	6.1% (36)	5.0% (16)	5.7% (52)
Iran	0.0% (0)	5.0% (27)	1.9% (27)
South Korea	3.0% (23)	0.0% (0)	1.9% (23)
Canada	0.0% (0)	5.0% (6)	1.9% (6)
Israel	3.0% (4)	0.0% (0)	1.9% (4)
Total	100% (813)	100% (421)	100% (1234)

In another bulletin on 12 March, ITN briefly featured Doctor Margaret Harris from the WHO, who cited Singapore as an example of a different approach. The correspondent introduces her:

... the UK is increasingly looking alone in Europe. Will this Square be empty in two weeks time and should it like Italy, be empty now? Not necessarily says the World Health Organisation which has pleaded for aggressive action.

Dr Margaret Harris [WHO]: We want to see every community slowdown the transmission of this virus. If you look at Singapore for instance they have not had to go into lockdown. They have been able to slow down the virus. Now they do it their way, you will do it your way.

(ITV main evening news, March 12, 2020)

But there was no account of what the two approaches are and how they differ. The suggestion from the journalist is that the UK might not need a lockdown. But Singapore had avoided a lockdown in part by employing a very efficient test, trace and quarantine of cases. This had not been developed in the UK, and as we have noted, this was the day on which community tracing was actually stopped.

In Table 5 we provide data on news items devoted entirely to reporting a single country or countries' experiences and responses to the pandemic.

As can be seen the bulk of reporting focuses on what is happening in the United States and Europe. Coverage of countries in the sample which had successfully suppressed the virus—China and South Korea—accounted for only 11.5% (142/1234 lines) of news text on international experiences/responses. We will now examine in detail how broadcasters reported those countries.

On 9 March the BBC featured the only report in our sample from the broadcaster devoted to the situation in China. The bulletin reports the WHO as saying that China offers a model to follow. But instead of identifying what that model is, the comments from the WHO are 'sandwiched' in a sequence of statements which criticise China for censorship:

Journalist: As the international community struggles to contain the spread of coronavirus, the World Health Organisation has praised China for its response, suggesting it offers a model for others to

follow. But inside China, there's anger over the way the authorities have handled the outbreak, with censorship being stepped up, the very approach that experts say helped to accelerate the spread in the first place.

(BBC1 main evening news, March 9, 2020)

The correspondent then shows videos that have been blocked on the Chinese Internet, for example, 'a medic complains about the quality of protective equipment'. There is then a brief statement from Dr Gauden Galea of the WHO making the same distinction as above, between the failures in political response and what can still be learned from what has been done.

Dr Gauden Galea (WHO, China): We are epidemiologists, not litigators. We know that the country has identified that there were shortcomings. It is not the WHO's role at this stage. Our role is to really help with the positive lessons of moving forward.

(BBC1 main evening news, March 9, 2020)

But this is not a distinction in which BBC here shows much interest or in the 'positive lessons' that can be learned. Instead, the above comment is followed by more on censorship. There is then an interview with an anonymous Chinese researcher saying that China is repeating the censorship that happened during the SARs outbreak in 2002. The correspondent then comments that China wants the world to focus 'not on how censorship may have cost lives, but on the strength of a system that has now brought the epidemic under control'. Still he is unwilling to accept the point made by the WHO that the focus should be on public health for the world and what works to achieve it. He asks if the reason they are not criticising China is because of its 'political and economic clout'. Dr Galea then repeats the point that the world is facing an epidemic, China has shown how it can be controlled and it is crucial for the lessons from its experience to be learned:

Dr Gauden Galea (WHO, China): There is a large epidemic happening. We have seen how through a concerted national effort at the top level of government has flattened that epidemic and gained the time for other countries to learn those lessons and not to have to face that same issue.

(BBC1 main evening news, March 9, 2020)

But again, there is no enquiry as to what these lessons might be. Instead, the BBC correspondent returned once more to the issue of censorship and states that some Chinese citizens are not 'grateful for the efforts of the Party'. The more successful countries are sometimes featured, but they remain at the periphery in the sense that there are no lessons drawn from them and used as a critique or directly expressed alternative to UK policy.

On 11 March, the BBC included a favourable report on testing and tracing from South Korea. The correspondent makes the important point that 'scientists believe early testing and early treatment could be why fewer people are dying here'. And she points to the scale of the operation, 'Makeshift clinics such as this one are set up to combat mass infections. Nearly a hundred staff at this building in Seoul contracted Covid-19. Now everyone who works here will be tested' (BBC1 main evening news, March 11, 2020).

On the same bulletin, it is also reported separately that in the UK there will be 'a significant increase in testing capacity'. The UK approach was actually very different and very inferior to that in South Korea, but there is no comparison made here between the two. The British version of contact tracing is also described. Health officials identify the close contacts of those who test positive but if they are judged to be low risk, then no action is taken. The sharp contrast between the approaches of the UK and that of South Korea became even more apparent the following day when the government made the decision to limit testing to those with breathing problems in hospital. This decision was not reported on the BBC or ITV main evening bulletins that day.

ITN featured an account of China on 10 March, noting how measures including 'locking down 10 major cities' had a 'dramatic' impact on case numbers. A Chinese doctor is interviewed, and describes how immediately before

the lockdown in Wuhan, the health services there were overwhelmed and this led to many deaths. The correspondent then states that, 'Dr Du Bin says other countries should not hesitate to introduce a lockdown'. The interviewee reinforces the point:

Dr Du Bin: One day earlier, such kind of measures will absolutely decrease the number of patients. From the clinician point of view, from the epidemiologist point of view, it's true.

(ITV main evening news, March 10, 2020)

Then in the studio, there is a discussion between the news presenter and the political editor. He states that what is happening in China is 'really significant', but then returns to the herd immunity perspective that without people catching it, 'the virus will simply take off again':

It's the fact that in a country with a 1.4 billion population, China, we had 20 new cases today. Now if we believe those statistics, then actually, this epidemic will not be as severe as many have feared. And talking to our scientists, what they don't know is whether the coercion within Hubei and Wuhan on individuals to stay at home has led to a short-term drop or a permanent solution. The reason it might be short-term is that people are not mixing and there is no spread but people are equally not building up the antibodies and as soon as they are allowed back on the streets, the virus will simply take off again.

(ITV main evening news, March 10, 2020)

The problem with this projection is that the measures that had been undertaken in China did not consist simply of people staying at home. There was a very efficient test and tracing system—as with Singapore—and local disease units conducted interviews with patients, identifying contacts and organising quarantine. Travel also was limited and health check points established at public transport hubs. In addition, temperatures were taken prior to getting on buses or entering hospitals, shoes were disinfected before entering markets and masks were universally worn. Perhaps most importantly, the population was encouraged to be alert and work to suppress the virus as the goal was elimination of the disease—a strategy strongly emphasised by the WHO in its 28 February report.

On 17 March ITN gave another account of China. Most of the item (27/41 lines) focuses on the negative social and psychological impacts of lockdowns. The Asia correspondent does note that the UK now has the 'benefit of experience of countries like China and others in Asia where containment does appear to have been a success'. But aside from a very brief statement on the importance of 'massive, almost blanket community buy-in' for the lockdown the measures underpinning the success of China's containment strategy were not outlined nor compared with the UK policy response.

ITN returned to China on 19 March noting that 'something scarcely believable is said to be happening in China. They have reported no new home-grown cases. None at all'. The Asia correspondent then comments that 'it has taken a Herculean effort for China to get to this stage'. But the measures that have been implemented are not compared to the UK's approach nor outlined beyond a brief reference to 'restrictions on movement' and a comment that 'anyone arriving into China is now facing a mandatory 2 week quarantine.'

The outcomes for countries that had deployed a range of public health measures to successfully suppress the virus were extremely good. Taiwan ended 2020 with just 7 deaths, New Zealand had 25, Singapore had 29, and Vietnam 35. In a single day, on December 30, 2020, the UK recorded 981 deaths, the highest number since 24 April. On the main news bulletins that night in December, there was no mention of other countries or how the UK compared with them.

4 | CONCLUSION

This paper set out to explore how PSB reported on the UK government's coronavirus strategy and the scientific debate around it during the crucial early phase of the pandemic. This was a period of significant scientific dissensus where the British approach had been repeatedly criticised by the WHO, which urged countries to adopt the aggressive

containment measures which had allowed other states to suppress the virus and protect public health. However, as this paper has demonstrated the scientific critics of government policy were sparsely featured. They occasionally appear in isolated, free floating comments but their views are not developed into an alternative perspective on policy. In contrast, broadcasters devoted substantial coverage to explaining and endorsing the government's approach to the pandemic. Little of the coverage on international responses focused on countries which has suppressed the virus and their successful containment measures appear as discreet fragments that are not unpacked or contrasted with the British approach. A journalism orientated to protecting the public interest ought to have least investigated the successful approaches that been well demonstrated elsewhere. However, public media was unable to alert the public on the need for these in the UK.

Why was public service journalism unable to explore the approaches that were being successfully employed elsewhere or offer a developed critique of government policy? A number of factors rooted in the sociology of news-work and wider political context appear relevant. The focus on European and Northern American responses to the virus—along with the marginalisation of the successful responses of Asian countries—is in line with previous research which finds that broadcasting tends to focus on Western states—particularly North America—and pays relatively little attention to other countries unless the story has a domestic angle (Scott, 2009). This finding has been attributed to 'competitive newsroom cultures', the 'metropolitan attitudes' of news executives and the perception amongst many editors that audiences are not interested in stories from the Global South (Scott, 2009). Yet these seem inadequate explanations for the limited and negative coverage of China's response to the pandemic. An alternative explanation is that broadcast journalists 'index' the focus and tone of their reporting to domestic state policy where relations between Britain and China had soured markedly in recent years (Bennett, 1990; des Garets Geddes, 2020; Mills, 2016).

The predominant focus on government perspectives and the marginalisation of critical voices appears to be in large part a product of elite political journalism's close integration with the government's communication machine—a tendency amplified by the introduction of daily press conferences featuring the Prime Minister and Government scientists. Much reporting, as our analysis demonstrated, came from Lobby journalists—particularly the political editors at both channels—who were key framers of the government's policy responses. As noted earlier, this immersion within the 'Westminster bubble' and need to maintain access and cordial relations with government sources may mitigate against critical journalism. However, it also important to recognise the broader contexts in which reporting took place. One concerns the sense in which the reporting of the pandemic represented a national crisis event akin to wartime. In such situations critical journalism can fall victim to 'rally around the flag' approaches where reporters become reluctant to criticise government policy (Van Aelst, 2021). The space for critical journalism is also impacted by the strength and coherence of the governing party. When governments are weak or divided this creates more opportunity for dissent and opposing voices (Philo, 1995). However, at the onset of the pandemic the government was in an unusually strong position having just won an 80 seat majority and facing an ineffective official opposition in transition. Finally, it worth highlighting the attacks made against PSB in the lead up to the pandemic including the threat to abolish the BBC's licence fee (Mullin, 2021; Taylor & Waterson, 2019). Such contexts are unlikely to be conducive to journalism which asks hard questions of government policy. This only reinforces the need to insulate PSB from government pressure so that it has the freedom to speak truth to power and always report in the public interest.

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DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

ETHICS STATEMENT

All materials reproduced in this article are in the public domain and no human participants were involved in this research.

ENDNOTE

¹ For examples of studies that do adopt a more granular approach see Berry, 2019, Morani et al., 2022 or Wahl-Jorgensen et al., 2013.

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