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POWER IN THE PANDEMIC
THE UK GOVERNMENT'S DISCURSIVE CONTROL OF THE POPULATION

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Abstract

As COVID-19 took hold of the UK, and the world, the UK Government were faced with the complicated challenge of protecting society. Within a system of biopolitical governmentality, the population is controlled not simply through the implementation of explicit rules and laws (although the pandemic saw plenty of these), rather it is directed towards self-governance through mechanisms of conduct of conduct. While the UK has not yet escaped the grip of COVID-19, much literature has nonetheless emerged in its wake already. As lockdown measures were implemented, there was a growing concern that the pandemic was facilitating governmental overreach (Agamben, 2020[a]; Denisenko & Trikoz, 2020; Santis, 2020; Zinn, 2020). Equally important, however, are the implicit tactics used by the government to exert control over the population by shaping the fabric of society. This study found that the Government's constructions of the roles of science, the Government, the people, and the virus formed an integrated discourse that worked to protect the Government's position of power and manage the population. The construction of science was employed to protect the Government from a virus with agency outside of the reach of state power, and from the implications of prioritising the economy over the people.

Keywords: pandemic; COVID-19; biopolitics; biopower; governmentality; discourse; power; knowledge

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Introduction

Despite the seemingly unprecedented nature of the COVID-19 pandemic in modern society, this study argues that the UK Government utilised long established mechanisms of control and drew on systems of power that exist far beyond the boundaries of the pandemic to manage the population. While the restrictions and policies implemented during the pandemic have undoubtedly had huge ramifications for daily life and are explicit attempts to control public behaviour, this study proposes that the discourse of the pandemic, as framed by the Government, was central to the mechanisms of control by which they governed. A Foucauldian framework functions as the theoretical basis through which a critical discourse analysis (CDA) of the UK Government's official communications is explored. This attempts to answer the questions:

1. How has Government discourse constructed knowledge of the pandemic?
2. To what extent, and in what manner, do these discourses engage with governmentality, biopolitics, and biopower?

Foucault Theory

Foucault's notion of governmentality refers to a shift in the mechanisms and priorities of governance that he argues occurred in the eighteenth century. Previously, in modern civilisation, sovereign power and disciplinary power had been dominant. Sovereign power lies in its ability to take life and allow to live (Foucault, 1978). Foucault explains that torture as a public spectacle is a manifestation of sovereignty because laws are representative of the will of the sovereign and breaking these laws constitutes an assault against it (Foucault, 1977). Similarly, disciplinary power, is also enacted upon the individual. However, while sovereign power is oriented around absolute obedience to the ruling sovereign, disciplinary power centres strict rules enforced by the threat of punishment.

In contrast, governmentality saw the state shift towards 'problems specific to the population' (Foucault, 2019, p. 215). Thus, the individual was no longer the primary target of governance. This aligns with his conceptualisation of biopolitics in which governance becomes oriented around the population, and specifically around its biological processes. Foucault states that 'methods of power and knowledge assumed responsibility for the life processes and undertook to control and modify them' (1978, p. 142).

Foucault explored this approach to governance in relation to the smallpox outbreak in the eighteenth century. Unlike in previous disease outbreaks in which disciplinary power had characterised the approach and people had been controlled via strict rules and exclusion, the smallpox outbreak focused on the disease as it manifested within the population. Thus, the outbreak, as well as the measures taken to combat it, prioritised its society wide effects. Factors such as the following became important to the state:

how many people are infected with smallpox, at what age, with what effects, with what mortality rate, lesions or after-effects, the risks of inoculation, the probability of an individual

dying or being infected by smallpox despite inoculation, and the statistical effects on the population in general (Foucault, 2007, pp. 9-10)

It was no longer about the existence of the disease in any one individual, rather it relied on a monitoring of the population as a whole to track the disease and inform decisions.

This governance of the population is built upon statistics and averages that conceptualise the whole. They define the population, producing the norms around which the government monitors and controls it. They also inform a new conceptualisation of risk that underpins the rationale of governance. For Foucault this approach to governance is integral to what he calls apparatuses of security. Within this, governments implement measures – laws and rules, or more subtle tactics – to manage the population “for its own good”. Governments undertook to control and maximise the health and wellbeing of the population and thus becoming responsible for it (Ahrens & Ferry, 2021; Foucault, 2007).

These norms also serve as the basis from which control is exerted over the population. Governmentality is concerned not with the direct and explicit interventions that characterise disciplinary and sovereign power, rather it works to direct the population through implicit tactics that shape society to elicit desirable behaviour (Foucault, 2019). Unlike the rigid binary of inclusion/exclusion under sovereign and disciplinary power, governmentality and biopolitics operate around a normative curve encapsulating a social hierarchy (Foucault, 2007). This mechanism of governance is often referred to as conduct of conduct as it relies on the compliance of the population to self-govern due to a move away from explicit rules. Foucault (2019) explains:

It is the population itself on which government will act either directly, through large scale campaigns, or indirectly, through techniques that will make impossible, without the full awareness of the people, the stimulation of birth rates, the directing of the flow of population into certain regions or activities, and so on. (p. 216)

The constitution of knowledge is a fundamental aspect of conduct of conduct. For Foucault, knowledge, power, and discourse are inextricably linked, existing within, and manifesting through, each other. Figure 1 is a simplified conceptualisation of the relationship between the three in their capacities as productive of one and other. Their interconnectedness, however, also renders them capable of the opposite, of exposing the other, of rebelling and defying.

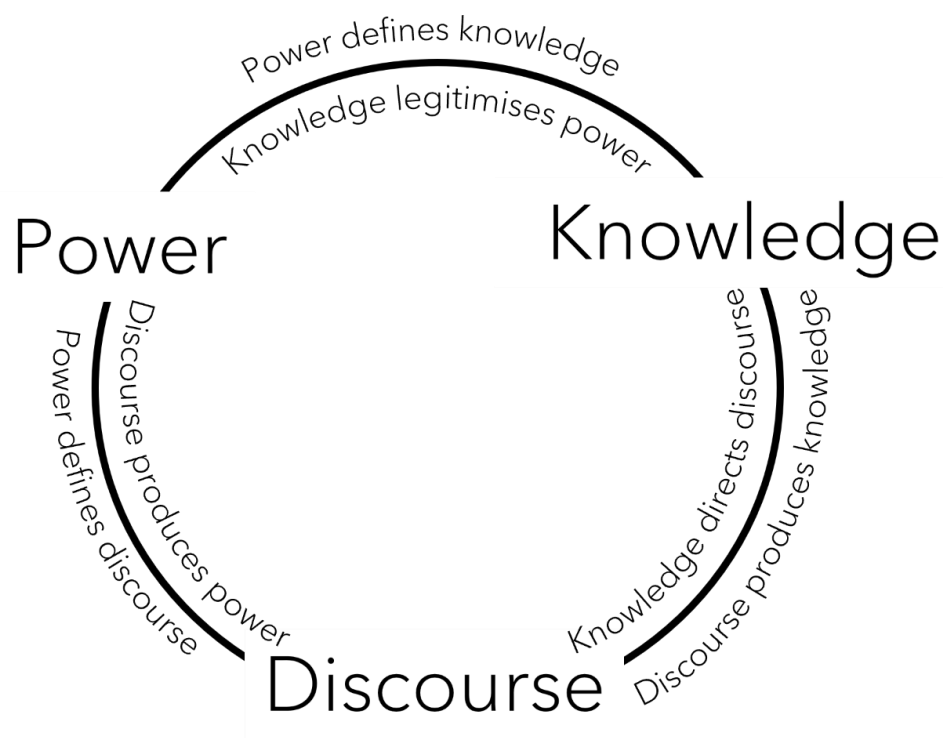


Figure 1: the inter-relations between the power, discourse, and knowledge.

Held within the knowledge of a society is that which is considered truth. Foucault argues that, rather than objective fact, that which is considered truth is rooted in the specific cultural, social, and historical context of each specific society and is defined by power (Foucault, 2020). These ideas are integrated into society and formulated as truth through what Foucault calls ‘games of truth’ (Foucault, 1978). These are strategic mechanisms through which objects or ideologies are positioned as fact. Truths are defined by power and produced by discourse. They define society as they are integral to the way

objects and subjects are understood and therefore, are a primary mechanism of conduct of conduct. It is through the construction of truth that the social hierarchies of the normative curve permeate throughout society as they become knowledge.

Literature Review¹

Biopolitics According to Agamben

Another prominent theorist in the sphere of biopolitics is Agamben. While his work will not form the primary theoretical framework for this study, it provides an alternative lens through which to understand the systems of power.

Agamben's work is based around his argument that there is a hidden tie between biopolitics and sovereign power that lies in the existence of a state of exception. He theorises that, through a state of exception in which normal law ceases to apply, human beings can be stripped of their legal status and transformed into what he calls 'bare life'. Agamben contends that politics is inherently against the biological nature of human beings, i.e. bare life. Modernity has resulted in increasingly high levels of control and regulation of the biological aspects of humanity as it pertains to the political and economic order of society. The sovereign power of the state has control over individuals through biopolitical mechanisms. Sovereignty allows states to invoke a state of exception which grants total control over bare life. As technologies of biopower increase, the exception increasingly becomes the rule (Agamben, 1998).

In February 2020², Agamben made a series of blog posts critiquing governments' handling of the pandemic. Their controversial nature and tendency towards conspiracy theory elicited the reactions of scholars worldwide (Berg, 2020; Pacheco, 2020). His analysis drew on his conceptualisations of bare

¹ Excerpts of this Literature Review and theory descriptions at the beginning of each analysis chapter have been taken from my own literature review, completed January 2021, entitled *The Role of Biopolitics in the COVID-19 Pandemic*

² See Appendix 1 for a timeline of the pandemic in the UK.

life and the state of exception as he criticised the implementation of lockdown strategies, arguing that they posed a fundamental threat to human rights (2020[b]; 2020[c]). He claimed that lockdowns were being used by states to integrate extended sovereign power into normal, everyday life; he does not see these measures as temporary (2020[b]; 2020[c]). He stated: 'such a vague and undetermined definition will make it possible to rapidly extend the state of exception to all regions, as it's almost impossible that other such cases will not appear elsewhere' (Agamben, 2020[a]). He went on to suggest that the pandemic is at minimum being vastly exaggerated, if not entirely fabricated, for the purpose of providing justification of a totalitarian regime that exceeds the level of control of Fascism and Nazism (2020[b]). He described lockdown as being a form of 'presumably fictitious health security' (2020[c]) and stated that it is no more serious than a normal flu (2020[a]). According to Agamben, both the pandemic and the actions taken to control viral spread constitute the exercise of sovereign power through a biopolitical framework which has ultimate control over the right to life.

While Agamben's statements have been widely criticised, others have also expressed concern regarding the potential threat to human rights, both in the present and future, posed by the current state of exception and restrictions. Denisenko and Trikoz (2020) state that 'biopolitics is exerting powerful pressure on the protective barriers of human rights and freedoms' (2020, p. 2). Many countries have introduced and imposed emergency laws temporarily limiting the movements and activities of their citizens, including when and why they can leave their own homes, who they can see, and where they can go. Not only is there concern about this infringement on rights in the immediate (Denisenko & Trikoz, 2020), but some have noted that this extension of state power sets a dangerous precedent that may be irreversible (Agamben, 2020[a]; Santis, 2020; Zinn, 2020). This idea of the inherent danger of a state of exception is the basis of Agamben's original argument; a state of exception becomes the norm. For him, the existence of such a clause in our systems of power poses a constant threat to human rights and freedoms (Agamben, 1998).

Agamben also argued that life under lockdown restrictions constituted a shift into widespread bare life as society lets go of everything which defines human life above the base biological processes (Agamben, 2020[a]). Berg (2020) counters this, arguing that lockdown restrictions attempt to protect communities from potential devastation, and it is these communities of friends and family that are essential to humanity:

But we are not making sacrifices for the sake of anyone's mere survival. We sacrifice because sharing our joys and pains, efforts and leisure, with our loved ones — young and old, sick and healthy — is the very substance of these so-called "normal conditions of life." (Berg, 2020, p. 6)

Agamben's critiques of the pandemic, while raising important points regarding the danger posed by the state of exception, also seem to overlook some nuances, as well as veering into conspiracy theory territory in his critique of the dangers of COVID-19. Agamben's conceptualisation of the power systems underpinning governance, specifically governance of the pandemic, is less comprehensive than that achieved when applying Foucault's work. While Agamben has legitimate concerns about increased government control and the threat to freedom posed by the existence of a state of exception, his approach does not account for the very real public health risk posed by COVID-19 and the government's duty to protect the population that is encapsulated in his notion of apparatuses of security.

Furthermore, his attribution of this solely to mechanisms of sovereign power is limited in its scope; while some governmental power was exerted over the population in the form of rules and laws dictating their behaviour through the pandemic, this was also managed through subtle, indirect means. Foucault's work, conversely, addresses different manifestations and mechanisms of power and it is for this reason that his work was favoured over Agamben's as the framework for this study.

Governmentality and Biopolitics in the Pandemic

Since the beginning of the pandemic, many scholars have produced analyses of the situation, building on both Foucault and Agamben's work on biopolitics and governmentality.

Lorenzini (2021) uses Foucault's work as a frame of reference to discuss the COVID-19 pandemic. He stresses that the description of biopolitics as 'making live and letting die' fails to account for the complexities in the way in which biopolitics manifests in society. He says that it 'does not really consist in a clear-cut opposition of life and death, but is better understood as an effort to differentially organize the gray area between them.' (2021, p. S43). Biopolitics, according to him, organises society through valuation of human life and perpetuates and exploits inequality as a method of governance. Despite Lorenzini's wariness of Foucault's famous quote, the notion that biopolitics is inherently linked to inequality and social hierarchy is one that Foucault himself also proposed: 'They [biopolitics] also acted as factors of segregation and social hierarchization, exerting their influences on the respective forces of both these movements, guaranteeing the relations of domination and effects of hegemony.' (Foucault, 1978, p. 141).

Foucault argues that biopower itself is the root of racism as it 'inscribes it in the mechanisms of the state' (2004, p. 254). He contends that biopower relies upon the categorization and classification of the population based on real or perceived biological characteristics. Therefore, racism is part of its very foundation. He asserts that 'the modern State can scarcely function without becoming involved with racism at some point, within certain limits and subject to certain conditions' (Foucault, 2004, p. 254). Horvath and Lovasz (2020) also note the inherent links between biopolitics and race. They argue that, while biopolitics typically 'refrain from explicit oppression' (p. 146), by virtue of its very nature it categorizes people based on a range of different characteristics. This ultimately translates to a hierarchy of power based on state determined characteristics that organises the population by the perceived value of their life (2020).

Disproportionately high numbers of cases and deaths have been reported within the communities of people of colour (POC) in many western countries, particularly communities who identify as black (Chin-Hong, et al., 2020; Webber, 2020). Furthermore, Patel et al. (2020) found that lockdown policies enacted by the UK Government disproportionately disadvantaged those of low socio-economic status. Horvath and Lovasz (2020) argue that this is the result of the nature of biopolitics as it hierarchizes human life, inherently valuing some over others. Rose (2020) states that the pandemic has highlighted the inequality entrenched into western society and links it to the economy, citing the 'inequitable hierarchy of labor in late-stage capitalism' (p. 2). Horvath and Lovasz (2020) argued that economic factors contributed to decision-making surrounding states' policy responses to the pandemic.

Denisenko and Trikoz (2020) also link the insertion of technological advancements into the everyday with the inherent capitalist nature of biopolitics: 'the object of biotechnology is creation of values, profits and markets from biotic material and genetic information' (p. 2). They argue that a new interpretation of Foucault is emerging in which biopolitics is becoming increasingly focused on advancing biotechnologies and accruing biocapital (2020). Lemke (2011) describes biocapital as 'a special way of acquiring living nature (BIOS), literally the capitalization of life' (p. 464). The structure of society is such that 'the scientific production of knowledge can no longer be separated from the capitalist production of value' (Lemke, 2016, p. 5).

For Agamben (2020[b]), the use of this type of technology is the mechanism through which inappropriate, excessive, and dangerous levels of control are being exerted on the public by the state. Others have also expressed concern regarding the threat to human rights posed by these intrusive technologies. The data needed to enact measures to track movements and monitor compliance to social distancing breaches privacy; 'such large-scale incursion into privacy and data protection is unthinkable during times of normalcy' (Zwitter & Gstrein, 2020, p. 1). This aligns with Agamben's (2020[a]) argument that the state of exception granted for the pandemic has facilitated an infringement on human rights that would otherwise be considered unconscionable. In his original

work, Agamben (1998) argues that the danger of a state of exception is that it becomes the norm, in other words this level of state interference continues long after the threat of the pandemic is neutralised. In his comments on the pandemic, he argues that this is exactly what is taking place through lockdown restriction and technological integration (1998; 2020[b]).

Regarding COVID-19, Brown et al. (2020) and Phelan (2020) note the challenge to human rights posed by testing and vaccination. Within lockdown restrictions, all citizens' freedom of movement is restricted depending on the specific policy of that country. When testing becomes involved, it complicates the matter further because it allows divisions to be made and thus restricts certain individuals more than others based on the results of the test. This problem is exacerbated by vaccination programs as they grant certain individuals exemptions from restrictions based on their willingness to participate in a scheme that is intrusive to their body. These examples are indicative of the overreach of control inherent to biopolitics identified by Denisenko and Trikoz (2020); 'the state can fully regulate the life of citizens through legal procedures, legally control not only their social and political, but also their biological form of life' (p. 3). This study is not arguing that these schemes should not be implemented, however it recognises the potential associated implications.

Denisenko and Trikoz (2020) suggest that technology also poses a threat to human rights in another way. They argue that advancements in the field of biotechnology and their integration into social systems and infrastructures grant unreasonable power of control to states, specifically in relation to one's body. For them, 'the rapid development of genetic engineering, biotechnologies and neuro and physiological research leads to the expanding control of the state over the citizen's body, genomic self-identity, and the privacy of biological information about a person and his family' (p. 2). As technology advances, increasing amounts of data on individuals at a biological level is available to collect and store. Not only does this raise privacy issues, but it grants states the ability to extend the reach of biopower and exert more control over the population, thus threatening human rights on another front (Denisenko & Trikoz, 2020).

Within a biopolitical system, the basic biological processes of humanity are of concern to the Government precisely because of their direct consequences to the production of capital (Foucault, 1978). It is for this reason that the health and wellbeing of the population became a primary concern of the Government; a direct line can be drawn between the health of a population and its production efficiency (Horton, 2020). The COVID-19 pandemic occurred within a climate in which ever advancing biotechnologies have further increased the ability of those in power to infiltrate the population at a biological level. Therefore, these biotechnologies contribute to the extension of the scope of governmentality and biopower as statistical analysis of the population is the foundation of their production of knowledge around which governance is based.

In contrast to Agamben, who sees governments as corrupt entities incapable of acting outside of their own interest (2020[c]), Denisenko and Trikoz (2020) argue that legal avenues must be pursued to protect populations and human rights from the overreaching control of biopolitics. They suggest that 'in the context of protection from COVID-19, national legislation should apply international bioethics law and deliberative procedures to ensure the legitimacy of the law. Modern biopolitics needs to be proactive in lawmaking' (p. 6). This is an interesting position to take as it suggests that the solution can come from within the same framework as the problem; biopolitics works within the law to manage and control the population and they argue that it is the law that must be invoked to protect the population. This notion is countered by Agamben's (1998) argument that the very nature of the system within which western societies operate, specifically the existence of a clause for a state of exception, poses a threat to human rights.

This discussion and disagreement centres around a push and pull between the responsibility of the government to protect the population from public health risks and individuals' rights to freedom and autonomy. However, these two are not definitively or immutably in opposition; individual freedom and autonomy – the ability to choose how one lives one's life – is dependent on a foundation of law, regulation and organised systems, including protections around public health. For example, the

enforcement of a legal highway code ensures that road users can travel (mostly) safely and effectively, whereas a completely unregulated road or driving network would likely result in a much more dangerous environment in which arriving at a destination would be difficult. There are, however, limits to this; the public must be protected from potential political corruption and government self-interest – a reality which Agamben argues has already been realised. This study will explore the extent to which the mechanisms of control employed by the Government through the pandemic worked to protect the interests of the population and the Government.

Intentions of This Study

The pandemic has raised many concerns regarding the reach of government power within society. Much discussion has focused on the implementation of government restrictions and policies and their potential infringements on human rights and individual agency. This study instead focuses on implicit control, analysing the Government's discourse within the pandemic and understanding the findings within the framework of governmentality. It is these mechanisms that must be interrogated to gain insight into how government control is exerted at a deeper level within biopolitics and governmentality. A critical discourse analysis (CDA) was carried out on a sample of the Government's press conferences and official statements between March and December 2020. The findings of this are analysed in the main chapters of this article and contextualised within the framework of conduct of conduct in the conclusion.

Methodology

Theoretical Foundation of Critical Discourse Analysis

CDA was used for two reasons. Firstly, its roots in theory of discourse allow a consistent theoretical framework to be applied across both the methodology and analysis as Foucault's approach to discourse served as the foundation for this study's use of CDA. Furthermore, CDA analyses texts within the wider social, political, economic, and historical contexts of the society in which the research is situated. This produces findings that provide more insight into the wider power dynamics of society than is possible when analysing a text divorced from this context.

CDA is an umbrella term that encompasses a broad range of methodological approaches and 'provides theories and methods for the empirical study of the relations between discourse and social and cultural developments in different social domains' (Jørgensen & Phillips, 2002, p. 60). Its core premise

is that discourse is fundamental to the organisation, construction, and individual experience of society (Meyer, 2001). The study of discourse necessarily situates constructed meaning within the wider contexts of the text.

As Meyer (2001) explains, 'the notion of context is crucial for CDA, since this explicitly includes social-psychological, political and ideological components and thereby postulates an interdisciplinary procedure' (p. 15). Whilst there are numerous approaches that can be taken to CDA, the underlying principles of contextual analysis remain consistent. Breeze (2011) states:

The general structure used is the familiar three-level framework: Language operates on an ideational level (construction and representation of experience in the world), a relational level (enactment of social relations) and a textual level (production of texts). Language connects meanings with their spoken and written expressions. (p. 502)

This produces a more comprehensive reading of the analysed texts than would be achieved if signs were studied in isolation from their real-world contexts.

Extensive work has been done on both discourse and CDA methodology eliciting a wide range of approaches. This study will position Foucault's work as the central theory of discourse, thus aligning with the theoretical framework of the analysis. His work extends beyond any singular theory, integrating concepts to form a broad approach to understanding society.

For Foucault, discourses are central to the production and implementation of power. He describes them as 'practices that systematically form the objects of which they speak' (1989, p. 49). He proposes that knowledge is built in relation to what is already known, what is within the existing discourse of a topic. A new concept or piece of information is compared with other objects already within our field of knowledge and, through this process, meaning becomes attached to it. Foucault describes these 'discursive relations' as follows:

They are, in a sense, at the limit of discourse: they offer it objects of which it can speak, or rather (for this image of offering presupposes that objects are formed independently of discourse), they determine the group of relations that discourse must establish in order to speak of this or that object, in order to deal with them, name them, analyse them, classify them, explain them, etc. These relations characterize not the language (langue) used by discourse, nor the circumstances in which it is deployed, but discourse itself as a practice.

(1989, p. 50/51)

Meaning cannot exist outside of discourse as it would lack the foundation of knowledge around which it is anchored. Discourse, then, is simultaneously a constraint to production of knowledge, and the mechanism through which it can take place.

For Foucault, discourse is inextricably linked to power. Reflective of the relationship between discourse and knowledge, he describes a duality in the role of discourse in power. He states that it can be 'both an instrument and an effect of power, but also a hindrance, a stumbling block, a point of resistance and a starting point for an opposing strategy' (1978, p. 101). It 'transmits and produces power; it reinforces it, but also undermines it and exposes it, renders it fragile and makes it possible to thwart it' (1978, p. 101). Discourse is the means by which power is enacted, however it is also the means by which it can be undermined and distorted.

Similarly, structuralist thought is based around the notion that language is characterised by a 'system of differences' (Olssen, 2003, p. 190). De Saussure explained this in terms of what he called 'signs' (2011). A sign is comprised of a signifier and a signified – what he describes as the 'sound-image and the concept respectively' (p. 67). The combination of these two elements forms the sign; that which is understood by an individual when they process an external stimulus. Figure 2 shows de Saussure's (2011) visualisation of this concept:

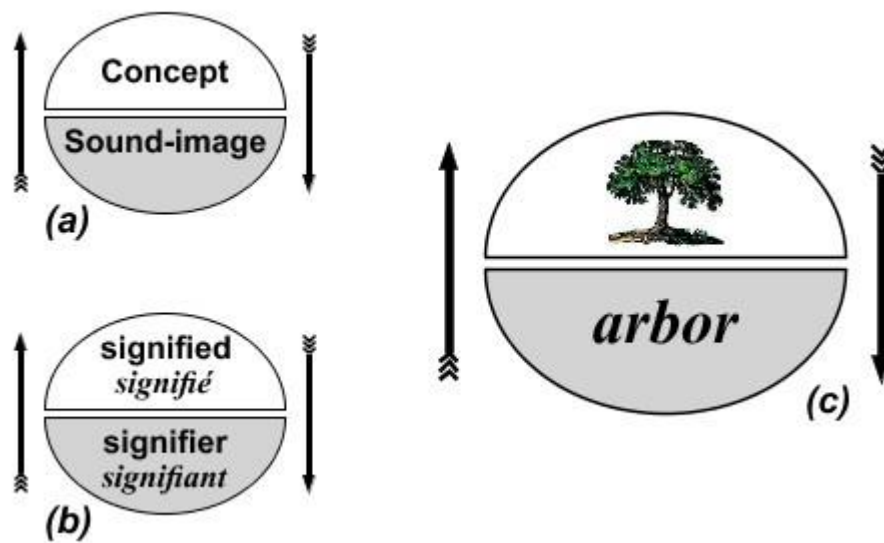


Figure 2: de Saussure's visualisation of the relation of the signifier, signified, and sign. (Saussure, 2011, p.67)

Foucault, however, did not adhere strictly to the notions of structuralism, his theories aligning more closely with those of post structuralism (Olssen, 2003). Post structuralists argued against the static, singular nature of structuralism's figuration of the sign in which language existed as a 'universal structure' (Olssen, 2003, p. 192). Instead, they proposed that a single signifier is associated with numerous potential signified meanings (Barthes, 1977). A sign, therefore, is dependent on the context within which the signifier is located, as well as the prior knowledge and experiences of the decoder. Thus, signs are both fundamental to informing an individual's understanding of the world and simultaneously dependent on an individual's established knowledge of signs to provide a contextual framework through which to understand future signs. The highly subjective and changeable nature of signs means that the understanding produced by a sound-image varies greatly and must be understood within the context of the wider discourse rather than merely as an independent entity. Therefore, knowledge is necessarily informed by historical and cultural context and cannot be divorced from this in either study or practice. This post structuralist figuration of the sign aligns with Foucault's concept of discursive relations. Despite this, Foucault's work deviated from traditional post-structuralism in its focus; while structuralism and post structuralism prioritise the signifier as the

source of production of knowledge, Foucault orients his work around how power affects signification (Olssen, 2003). Within this study, CDA was carried out using a post structuralist foundation of linguistic understanding whilst incorporating a Foucauldian approach to exploring the production of knowledge in relation to power.

Determining the Sample

Initially, two stages of pilot study were carried out, each with a different aim, and the second building upon what was learnt from the first. These were necessary to inform methodological decisions, identify potential methodological issues, and provide preliminary findings to inform the main project.

The purpose of the first pilot study was to gain insight into the various materials that were being considered for study in the main project. Through initial research, a preliminary list of potential materials was compiled. Most of these texts were identified from the timeline for the pandemic available on Wikipedia (2020). Included in this list were materials from numerous sources, such as televised news broadcasts and Government addresses, legal documents, open letters from official boards, and Government campaigns. Three materials were chosen for the pilot study, each from a different source to gain insight into both the methodological issues that may arise with different types of text, and the type of data that would likely be gained from each. The following were selected³:

1. Boris Johnson's televised national address announcing the first lockdown – 23rd March 2020
2. Open letter from the British Medical Journal to the Government regarding a potential second wave – 24th June 2020
3. Hands, Face, Space; Government advertising campaign – September 2020

Multiple issues arose through this process in relation to the sample for the main study. It was determined that the data produced from CDA of each material was too disparate to all be included in

³ See Appendix 2 for source information

this singular study. As CDA requires a detailed exploration of the wider contexts of each text, it was outside of the scope to include multiple types of material.

Accordingly, content produced by the British Medical Journal (BMJ), as well as by any third parties, was excluded from the sample moving forward. The open letter from the BMJ did not directly address the research questions posed as the questions are focused on Government discourses, and therefore a full or extensive analysis of materials outside of those produced by the UK Government is unnecessary. This applied to all third-party content. These texts, however, remained integral to the study as they provided the necessary wider context within which the discourses of the UK Government were analysed. The Government was therefore the sole source of materials included.

Throughout the pandemic the Government produced masses of content in numerous forms, therefore it could not all be analysed. Sample selection is a frequently criticised aspect of CDA methodology for two main reasons. Firstly, it is argued that CDA tends to use small samples to justify sweeping claims (Breeze, 2011). As a detailed and time-consuming method, it lends itself to using limited samples, however this is problematic when attempting to reach conclusions based on the findings. Small samples detract from the generalisability and validity of a study. Furthermore, CDA researchers are often criticised for selecting texts, or even certain excerpts of texts, that will produce data that supports their hypotheses (Breeze, 2011). Alternatively, it is suggested that specific elements of the texts are excluded if they do not concur with the researcher's existing preconceptions (Verschuere, 2001). Researcher bias in the sample selection reduces the reliability of the study. Therefore, parameters for defining the sample were required.

A systematic approach was taken to sample selection to reduce potential for researcher bias. Two phases of CDA were carried out in the main study, each with a different sample. For the first, the sample consisted of every official statement made by Boris Johnson within the time-period⁴. These were chosen because they were given frequently throughout the pandemic and were a primary source

⁴ See Appendix 3 for complete sample list and Appendix 4 for distribution by month and between sources.

of official announcements and updates regarding the pandemic. Official statements were given by Government officials other than Johnson, however for the initial sample only Johnson's were included. As head of the Government, his is the highest position of power therefore his discourse is important. This was done with the intention of later expansion of the sample based on what the findings indicated would be most salient. To ensure a big sample, unbiased by the researcher, every statement made by Johnson within the time-period of the study was included. The time-period set was 09.03.2020 – the date of the first announcement concerning COVID-19 made by Johnson, until 02.12.2020 – the date of the announcement that the vaccine had been approved for use in the UK. This end date was selected because, after the vaccine was approved, the discourse of the pandemic shifted, and the priorities of the Government became focused around the implementation of the vaccination program. It was therefore decided that the focus of this study would be primarily into the situation before this date.

The second phase of CDA was intended to build upon and further explore the findings of the first. As the initial sample solely included official statements that were pre-planned, the second phase focused on press conferences that presented more spontaneous discourse. The press conferences were considerably longer than the statements therefore fewer were able to be analysed. Three were selected upon which to carry out a detailed analysis. These were chosen based on the following criteria. From a complete list of all press conferences from within the time-period, all cases that included rule or advice changes were placed on a shortlist. From this, three were chosen that were equally spread out across the time-period as this was likely to be most representative of the discourse as it changed throughout. Alongside this, a wider sample was uploaded onto NVivo on which computer-based analytics could be carried out to give broader insight into the discourse. Two levels of sample meant that the functionality of NVivo could be utilised on a large, non-selective sample to give an overview that was not dependent on researcher interpretation while close CDA produced a richer analysis of the text. Consequently, the limitations of each method when used individually were compensated for by their combined use.

Methodological Questions of Critical Discourse Analysis

The first pilot study also provided insight into CDA methodology that was further investigated in the second. In the first, Fairclough's (1992) three-step method was used:

1. Textual Analysis – an initial reading of the encoded signs.
2. Discursive Practice – identify and situate the findings within the relevant discourses.
3. Socio-Political-Cultural Practice – discuss the impact or role of those discourses within a wider context and explore how the text is contributing to this.

The 3-step method was chosen as it is a more systematic approach to CDA. Having completed the first pilot study however, it was found to be restrictive and did not allow for the full complexities of discourse as described by Foucault. It resulted in an oversimplification of the relationship between discourse, power, and knowledge. Foucault's theory of discourse, as described above, is rooted in the idea that the three are interlinked and ultimately dependent on each other; they evolve together, both shaping and being shaped by one and other (Foucault, 1989). A rigid use of Fairclough's 3-step approach does not allow for this complex interaction, rather it reduces it to a linear relationship. In discussing a more nuanced approach to CDA, Meyer (2001) concurs with Foucault's understanding of discourse. She describes this as the hermeneutic circle: 'the meaning of one part can only be understood in the context of the whole, but that this in turn is only accessible from its component parts' (p. 16). Accordingly, the specifics of the CDA used moving forward reflected and allowed for the complexities of this circular relationship. The relaxing of this rigid 3-step approach meant the text was able to be visited and revisited throughout the process to gain a more nuanced insight.

In the second pilot study, the aim was to explore a different approach to CDA that was less rigid and allowed for the complexities of discourse and the hermeneutic circle. The sample was limited to only televised Government addresses as the focus was evolving the method, not exploring the sample as before:

1. Press Conference – 03.03.2020
2. Government Announcement (Johnson) – 23.03.2020
3. Government Announcement (Johnson) – 10.05.2020

To analyse these, a transcript was annotated as the video played, pausing and replaying as necessary to ensure completeness. Two types of annotation were made: 1-notes on specific language used; 2-highlighted text according to five categories. The notes (1) were concerned with the type of information included (or excluded), and how this information was communicated: the specific language used; the context within which the information was given; and the format of the information including any corresponding visual signifiers that may contribute to overall meaning. The five categories (2) were:

1. Pronouns – it was noted in the first pilot study that the pronouns used by Johnson to refer to different parties were inconsistent throughout his announcement. Subsequent preliminary research into the scholarship of pronoun usage indicated that they are often employed by politicians ‘to obtain the public support and to maintain the power of his administration’ (Dahnilsyah, 2017, p. 60). Pronouns, therefore, emerged as a potentially important linguistic mechanism through which meaning was being conveyed. They were included as a highlighted category because all need to be identified if patterns and trends are to be effectively examined.
2. Descriptors – The specific words used form the meaning of a text or concept in the mind of the decoder. Descriptive language is of note because it is actively working to construct a specific idea of the topic. Accordingly, any descriptive language was highlighted.
3. War – The first pilot study found that militarized language was prominent. Research has found that this type of discourse is often employed by politicians in a range of situations, typically to unify the public behind a common goal (Cohen, 2011; Flusberg, et al., 2018; Howe, 1988). Thus, any language relating to war or military action was highlighted.

4. Science – Foucault (2002) theorised that modern history could be classified into two stages – what he called epistemes – the Classic (17th-19th century) and the Modern (19th century onwards). Each had distinctly different assumptions and ways of interpreting knowledge that served as the basis for organising society. In the Modern episteme, science, empirical study, and objective truth are regarded as central tenets of knowledge. Furthermore, in the current study, the concept of science was prominent in the discourse of the pandemic. This must be examined to gain insight into how knowledge is being produced through discourse in these texts.
5. Slogans – Slogans are often central to political campaigns, be it an election campaign or an attempt to get the public behind a cause (Colla, 2013; Hodges, 2019). According to Dumintru (2009), they perform two main functions: ‘to inform and to persuade’ (p. 47). Throughout the pandemic there were multiple eras based around different slogans. The implementation and evolution of these is central to the discourse of the pandemic.

When adapting the specific CDA methodology used based on this pilot study, multiple considerations were addressed. Hammersley (1997) criticises the claim of CDA researchers that they can achieve any semblance of a broad overview of society. By nature, CDA approaches texts from the position of the researcher, this is what makes it a *critical* analysis. While this has been deemed evidence of the inherently flawed nature of CDA by some (Breeze, 2011; Hammersley, 1997; Lee & Otsuji, 2009), for others this is an integral part of CDA methodology through which important insight is gained into the workings of society (Van Dijk, 2001).

Foucault’s theory of discourse and knowledge suggests that there is no position of objectivity from which to study the world (Foucault, 1978). Rather, individual realities are constructed by the interaction of discourse, knowledge, and power. CDA is rooted in this premise. One way that CDA researchers manage the influence of personal bias is to explore and identify their own position before embarking upon analysis (Breeze, 2011). This, however, is not a simple task; as Breeze (2011) notes:

‘the heterogeneous nature of CDA’s intellectual inheritance sets a complex task for the researcher trying to trace exactly what the justification for a particular stance or interpretation might be’ (p. 488). The CDA researcher, then, must reach a negotiated position in which they attempt to extract themselves from their own reality to allow the linguistic mechanisms of the texts to emerge (rather than focusing only on those that confirm their pre-existing assumptions), whilst also understanding their own inevitable role as a subject that cannot comprehend meaning outside of discourse, and therefore cannot act as an objective witness to texts.

Steps were taken to address this. Before beginning the main phase of primary research, the researcher conducted a self-analysis and made a record of their self-perceived critical position. Following this, throughout the research process, a research diary was kept. Included was a detailed description of what was being done, as well as how and why. Any decisions were noted down along with supporting arguments for both sides, the justification, and an explanation of the final decision. This provided a framework of accountability for the researcher and acted as evidence for third parties examining the study. Mitigating and reporting researcher bias in this way renders the study more reliable.

A logistical issue that arose from both pilot studies was the inefficiency of the method of note taking. It was time-consuming and produced disorganised data. It was therefore difficult to identify patterns or trends, links between points, or understand the individual findings within the wider context of the whole sample. To address this problem, the computer software NVivo was incorporated into the methodology.

The Use of NVivo

NVivo is a qualitative data analysis software (QDAS) that allows the user to carry out various types of textual analysis on a wide range of texts. It has extensive features for analysis and manipulation of data to gain insights into texts that are not accessible using solely manual methods of analysis. It

facilitates analysis of large volumes of rich qualitative data enabling the researcher to organise many pieces of information and explore complex relationships across the dataset (Al Nahyan, et al., 2012).

Its usefulness for CDA has been debated by academics since its development. The primary concern is that it cannot function as an effective method of discursive analysis because it inherently decontextualises text fragments from the text as a whole. Fowler and Kress (1979) state that any method that examines text fragments constitutes 'the very antithesis' (1979, p. 198) to CDA. As discussed above, the context within which language is situated is central to the construction of meaning. Thus, analysis of fragments arguably cannot gain meaningful insight into discourse.

While it remains true that context is fundamental to CDA, Paulus et al. (2017) contend that decontextualization within QDAS is neither unavoidable nor inevitable. They describe NVivo as 'constantly evolving in response to researcher needs' (Paulus, et al., 2017, p. 43), arguing that how it is used determines its effectiveness in any given methodology. They point to Woods and Wickham's (2006) proposed three potential outcomes for the implications of QDAS in research, relating to the dominant force directing the study:

1. Method-behaviour dominance over software-behaviour: researcher decisions lead the study, and the research is enhanced by the ability to utilise QDAS to assist data collection and analysis.
2. Software-behaviour complements method-behaviour: QDAS gives researcher access to new techniques that enhance the quality of the research.
3. Software-behaviour dominance over method-behaviour: the functions of QDAS determine the scope and direction of the research.

This study prioritised the discourse and avoided fragmentation through which the wider context would be inaccessible and rendered irrelevant. To do this, NVivo's functions were used very purposefully and in a limited capacity in a manner designed to strike a balance between the issues discussed above. The primary feature used was the coding system that allows the user to organise

pieces of texts into 'nodes'. These nodes act as singular documents that contain within them everything coded as each given category. Figure 3 shows the NVivo project for this study. The yellow highlighted text indicates that it has been coded. Text can be coded into multiple nodes if necessary. Coding is done by highlighting a word or passage of text and dragging and dropping it into the relevant node. Node files can be opened and everything within it viewed in a single file.

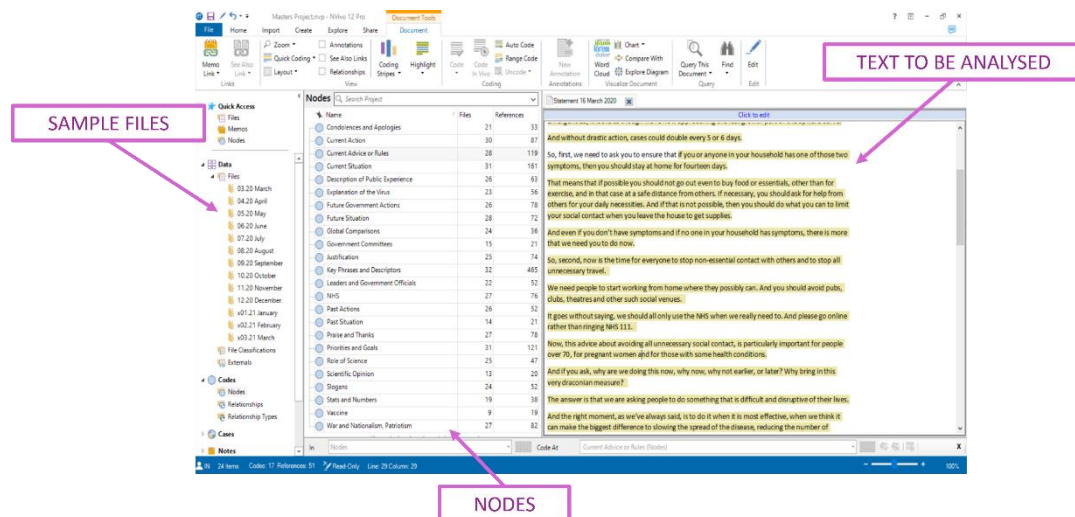


Figure 3: Screenshot of NVivo as it was used in this study.

NVivo has an automated coding function however, for this study, the coding was done manually by the researcher. Transcripts of the statements were copied into individual word documents, and subsequently uploaded to the NVivo project, organised by date and with the speaker in the title. The first stage of the analysis was to code the statements. The nodes were determined by the researcher in three ways.

1. An initial list of nodes was compiled based on the findings from the pilot studies.
2. Additional nodes were added to specifically address the research question – these were chosen based on information from the theoretical background.
3. The remaining nodes were added during the coding process – to mitigate bias, everything within the analysed documents was coded. New nodes were created in instances in which a word or phrase did not fall into an existing category.

The same categories were used in both rounds of CDA⁵.

Alongside the coding function, the text search query and word frequency query functions were employed. The text search query allows the user to search for every instance of a particular word or phrase across the entire sample or a specified selection of it. A word frequency query works in much the same way but calculates the frequency of every single word within the specified sample and formulates a list in descending order. Both allow the user to view the word within their sentence context or to be clicked on to view within their original file. These functions were used after the period of coding and initial analysis of the nodes to provide additional insight into language patterns and explore findings from a different perspective.

This study has attempted to incorporate Paulus et al.'s (2017) guidance on best practices for methodological reporting when using QDAS in CDA. QDAS is complex and its functions are extensive, it is imperative that a detailed account of its use is included in the methodology. CDA necessarily relies on the critical insight of the researcher, and thus is often seen to be biased (as discussed above). An advantage of QDAS is that it provides a structure around which to base the analysis. While this can lead to a sanitisation of the analysis, if implemented with purpose, it can result in a more transparent study as it places it within a structure that is visible and accessible to others. Within this study, it was primarily used as an organisation tool, with additional text search queries and word frequency queries used to further explore the findings of the initial analysis.

Critical Discourse Analysis in Practice

Once the selected texts had been coded, an initial analysis of the nodes was carried out. NVivo allows the user to easily transition between the coded text within the nodes and the text within its original context. Furthermore, it provides the option to view the coded text in the node file within its wider sentence. These features facilitate overall patterns to be identified through analysis of the node files,

⁵ See Appendix 5 for origins of each node.

without compromising access to the wider context. They allowed a balance to be struck between the ability to see an overview and work with a larger data set, whilst ensuring that the analysis remained rooted in the original context of the statements.

Analysis notes were made on a separate Word document on each node. Patterns or trends were identified, including any recurring language or framing. The analysis also focused on the type of word chosen, particularly in instances of descriptive language, the order of words and concepts, links made between points, and the framing of ideas and concepts. This process was replicated for both the first and second phase of CDA.

Chapter 1: The Role of Science

Across the world science has taken centre stage as governments, scientists, and the public all try to make sense of a viral pandemic the likes of which has never before struck modern society. The sciences are not independent institutions, but ones that exist within, and have intricate ties to, society, and specifically politics. The relationship between politics and the sciences was complicated even before the appearance of COVID-19 and this continued into the UK Government's discourse of the pandemic.

Stengers (2018) identifies a construction of a singular 'Science' that exists within society and denies the complexities of the sciences and their interactions with the world. This 'Science' works to distance itself from that which could penetrate the veil of objectivity in which it must remain ensconced to retain a position of power within the framework of discourse and knowledge (Stengers, 2018). This position of power afforded to 'Science', according to Foucault, is a product of the current episteme, the dominant system of knowledge in society, which is defined by the 'will to truth' (Foucault, 1981). This chapter will interrogate the construction and implementation of this singular 'Science' as it manifested in the Government's discourse of the pandemic. It will uncover the tensions that arise

between the Government's use of this narrative and complexities of the sciences as they interact with each other and society. To do so, it will draw on Foucault's theories of power, knowledge, and discourse and the production of truths. It will further utilise Stenger's conceptualisation and critique of a singular 'Science' to frame its analysis.

The prominence of science in the discourse was found in the pilot studies. Thus, it was a category that was specifically coded for when analysing the texts in NVivo. Two nodes were created – 'the role of science', and 'scientific opinion' – and further analysis was done through specific text search and word frequency queries, detailed in the text.

The Power of Truth

For Foucault, knowledge is inextricably intertwined with discourse and power; it is through discourse that knowledge is produced and reproduced, and power relations maintained or challenged. It is the space in which objects are formed, discussed, and understood. Foucault explains it as follows:

Knowledge is that of which one can speak in a discursive practice, and which is specified by that fact: the domain constituted by the different objects that will or will not acquire a scientific status...; knowledge is also the space in which the subject may take up a position and speak of the objects with which he deals in his discourse...; knowledge is also the field of coordination and subordination of statements in which concepts appear, and are defined, applied and transformed...; lastly, knowledge is defined by the possibilities of use and appropriation offered by discourse. (Foucault, 2002, p. 201)

The production of knowledge is inherently tied to systems of power. Power defines the boundaries of discourse, and thus the objects of which one can speak. Foucault explains: 'the exercise of power itself creates and causes to emerge new objects of knowledge and accumulates new bodies of information... The exercise of power perpetually creates knowledge and, conversely, knowledge constantly induces

effects of power.’ (Foucault, 1980, pp. 51-2). Power and knowledge do not function in a linear fashion, rather they interact in a continuous hermeneutic cycle, feeding into and shaping each other.

Foucault identifies different periods throughout history, each with different and distinct systems of knowledge called epistemes. These define the parameters of knowledge, shaping what is known and how it is known. Foucault argues that ‘In any given culture and at any given moment, there is always only one episteme that defines the conditions of possibility of all knowledge, whether expressed in a theory or silently invested in a practice.’ (2002, p. 183). While globalisation, increasingly multi-cultural societies, and the proliferation of expansive networks of communication challenge the notion of a singular, unified episteme, that which Foucault defines as the current episteme can be understood as dominant, if not solitary. An episteme is not a static, linear compilation of knowledge, but rather the conglomeration of complex interactions and relations between knowledges and the framework to produce new knowledge (Foucault, 2002; Mills, 2005).

For Foucault, the current episteme that emerged during the nineteenth century is characterised by a ‘will to truth’ (Foucault, 1981). For him, truth does not exist in an isolated, untouchable state, rather it is a product of power and exists within knowledge, shaping it, defining it, drawing power to it. It is produced by our social institutions: the education systems, the media, the juridical system, the medical system, and more (Foucault, 1981). Truths become incorporated into society’s knowledge through discursive mechanisms that Foucault calls ‘games of truth’ (Foucault, 1978). They are the set of practices through which truths are produced and perpetuated to become knowledge:

it seems to me that there are in societies (or at least in our societies) other places where truth is formed, where a certain number of games are defined – games through which one sees certain forms of subjectivity, certain object domains, certain types of knowledge come into being... (Foucault, 2020, p. 4)

They include and exclude, they prioritise and hide, and they exist within society's institutions and infrastructures, directing discourse and shaping knowledge. Through them, society comes to understand what is to be considered truth.

In exploring the formation and consequences of the production of truth, Foucault (1978) explores the notion of homosexuality as sin. Despite there being nothing inherently wrong with homosexuality, for generations in Western society it has been understood as being unequivocally sinful. This was produced and reproduced as truth by and through institutions of power. Its constructed sinful nature was rooted in religious ideology and reinforced by the dominant scientific practices at the time that legitimised this notion. Scientific information constructed homosexuality in an image that aligned with, and contributed to, the notion of sexuality as it was widely understood and framed. This was despite its inconsistency with a tangible reality of the nature of humanity divorced from the distortions of discourse, knowledge, and power (Sheard, 1998). It was also integrated into and reproduced by the legal system which, despite some progress, continues to criminalise homosexual practices and exclude non-heterosexual individuals from access to much of society (Cook, 2003; Gerger, 2014). While this is a brief overview of a very complex process, it highlights the roles of institutions in the production of truth, as well as the potential for science, within the current episteme, to give form to ideologies that are untethered to any objective fact or reality. Truth functions as a complex cycle, existing within and interacting with society and its institutions. They come to shape the discursive relations through which objects and ideologies are understood.

The will to truth describes the prioritisation of truth that defines how knowledge is organised within the current episteme. It is a set of practices that are inherently exclusionary; they function to establish distinctions between that which must be considered true and that which must be considered false. It pervades how an object is constructed and understood, the system of value assigned to information, and the boundaries of discourse (and therefore the boundaries of knowledge). As it functions based

on the construction of truths within society, it necessarily exists within the systems of power that define truth (Foucault, 1981). Foucault describes it as follows:

This will to truth, like other systems of exclusion, rests on an institutional support: it is both reinforced and renewed by whole strata of practices, such a pedagogy, of course; and the system of books, publishing, libraries; learned societies in the past and laboratories now. But it is also renewed, no doubt more profoundly, by the way in which knowledge is put to work, valorised, distributed, and in a sense attributed, in a society... Finally, I believe that this will to truth – leaning in this way on a support and an institutional distribution – tends to exert a sort of pressure and something like a power of constraint (I am still speaking of our own society) on other discourses. (Foucault, 1981, p. 55)

The pursuit of truths shapes the knowledge/power cycle. Knowledge, as it is shaped by the will to truth, is produced by power. Power defines truth by controlling discourse, the space in which knowledge exists. In turn, power relies upon knowledge to perpetuate the truths that legitimise it. This power manifests everywhere and pervades every corner of society (Foucault, 1978).

Biopolitics and governmentality function based on an application of these truths through governance. Knowledge of the population is oriented around statistical norms. Biopolitics and governmentality employ apparatuses of security to govern through the application of knowledge, in the form of normative curves, onto and into the population. Foucault describes a 'plotting of the normal and the abnormal, of different curves of normality, and the operation of normalization' (Foucault, 2007, p. 63). These 'curves of normality' define an individual's proximity to the acceptable. In contrast to the binary system of include/exclude based on constructed truths that underpinned disciplinary power, governmentality and biopolitics are oriented around a stratification, a hierarchisation, of society. Apparatuses of security within governmentality employ tactics to minimise unfavourable deviations from the norm. Proximity to this norm dictates an individual's place in the hierarchy of society (Foucault, 2004; Foucault, 2019). Instead of the system of punishment at the hands of the state that

characterises disciplinary power, governmentality employs tactics that shape society in such a way as to direct the population to a self-governance; to succeed in society a subject must adhere to that which has been deemed acceptable (Foucault, 2019).

The Knowledge of Science

For Foucault, the different epistemes also give rise to a shift in the approach taken to the sciences. He identifies the approach to the pursuit of knowledge in the modern age as problematic due to 'the endless birth and rebirth of a project to formalize the concrete and to constitute, in spite of everything, pure sciences' (Foucault, 2002, p. 270). The shift towards a 'pure science' in the modern age can be seen as engaging in the will to truth in so far as it is oriented around obtaining objective truths. The will to truth prioritises an empirical method and an objectivity that attempts to sanitise knowledge and reduce it to a bare existence divorced from the historical, social, and political contexts that give it meaning. This shift is reflected in the change in the system of authorship attribution regarding scientific knowledge that Foucault (1977) notes occurred through the seventeenth and eighteenth centuries. Where previously scientific knowledge was explicitly tied to its author, this shift brought about a dissolution of this system, resulting in a sphere of scientific knowledge that was disembodied from authorship. This engages with the notion of objectivity as, by discursively severing the tie between knowledge and author, the inherent implication of human involvement and therefore subjectivity, is hidden. This constructed objectivity in turn reinforces the superiority of the sciences and scientific method as the dominant system of knowledge production.

Stengers (2018) critiques the construction of the sciences as operating within a framework of objectivity. She argues that, enmeshed with this notion, is the framing of the sciences as a singular entity: 'Science'. This 'Science' works to divorce itself from the human driven processes of society, instead asserting itself as independent and objective, operating on a separate plane of existence from the subjectivity of humanity. This figuration of 'Science' obscures the complexities of the production of knowledge, the role of the sciences within this, and the sciences' unavoidable integration with the

external world. For Foucault (2002), there is no objective position from which to approach its undertaking, nor to understand and interpret findings. The sciences are necessarily embedded in historical practice (Kitcher, 2001). The sciences do not function as an independent institution and therefore cannot fulfil the role of independent authority of knowledge. Increasingly, there is a politicisation of science and a scientification of politics; science is becoming increasingly interwoven into politics and political decisions influence the direction and use of science and thus they operate in a cycle, continuously evolving together (Weingart, 1999). Furthermore, their practice has inexorable consequences for future society. The implementation of knowledge necessarily shapes society and its institutions, and alters the conception of the self and others, thus influencing behaviour. These changes function in a reproducing cycle as decisions and behaviour are influenced by the new knowledge which in turn reinforces this knowledge and further embeds it into society (Kitcher, 2001). This study will interrogate this cyclic relationship between the sciences and politics.

Regarding the enmeshment of science and the state, Stengers (2018) argues that this figuration of 'Science' is frequently employed by those in power. She frames this within her notion of 'cameral sciences' (p. 60) which she says are 'defined by their service to the State in its role as guardian of public order and prosperity' (p. 60). She proposes that these practices function as mechanisms of objectivation through which the interests of 'any institution having the power to relate consequences to perceptions' (p. 60) are given form. She suggests that, where an argument looks to justify or legitimise itself by drawing on the notion of an objective 'science that proves things' (p. 60), this is likely an indicator that 'one of the parties is up to no good' (p. 60). Essentially, for those in a position of power, science can act as a legitimising agent as it is used to give form to notions as determined by those in power. This aligns with Weingart's (1999) explanation of the role of science ('Science') in which it functions as a 'legitimizing authority' (p. 154) of knowledge. It is the notion of this singularity that allows the sciences to be ingrained with the legitimacy of objectivity.

Despite the entanglements of the sciences with society and discourse, Kitcher (2001) warns that a clear distinction must be made between the sciences as they exist within the discourse-power-knowledge complex, and as they interact with and produce results pertaining to a tangible reality outside that which is constructed by humanity⁶. They state, ‘we should not confuse the possibility of constructing representations with that of constructing the world.’ (2001, p. 51). This study will examine the construction of science within the Government’s discourse whilst explicitly acknowledging that this is not definitive of the entirety of the role of the sciences in the pandemic.

Analysis

Simple Science?

Science played a key role in the Government’s discourse throughout the pandemic. From the outset and throughout they positioned science as the primary basis for their decisions. This was consistently found across the entire time-period included in the sample. A text search query found that the word ‘*science*’ (and variations) appeared one-hundred-and-ninety-nine times across the entire sample. Furthermore, forty-eight references were entered into the ‘Role of Science’ node for the Prime Minister (PM) statements alone⁷. It was found that science was consistently relied upon to justify decisions, positioned as central to the Government’s approach to handling the pandemic, and constructed as a monolithic, objective entity. Furthermore, the Government used the narrative that they were ‘*following the science*’ (23rd April 2020) as evidence of their doing a good job.

Below are examples of how the role of science was constructed:

‘*guided by the science*’ (22nd March 2020, and others)

‘*follow the best scientific advice*’ (18th March 2020, and others)

⁶ Unless subscribing to the assertions of the 1999 Keanu Reeves hit *The Matrix*

⁷ See Appendix 6 for parameters of each node.

'if and only if the numbers support it' (10th May 2020)

'We are going to be driven by the science, the data and public health.' (10th May 2020)

'At all times we are informed by the data and evidence, about the spread of the virus and the impact of the measures taken so far.' (28th May 2020)

The Government constructed and subsequently utilised an oversimplified figuration of science. An additional text search query found that, out of the one-hundred-and-ninety-nine appearances of 'science', one-hundred-and-twenty-eight were preceded by 'the'. This was consistent with this study's finding that, within the Government's discourse, the notion of science was constructed as a simplistic and singular voice shedding light on issues.

The construction of '*the science*' aligned with Stengers' (2018) 'Science'. It is an oversimplification that ignores the complexities of the sciences and the scientific community on multiple levels. Its implementation relied on the objectivity of a singular 'Science' to legitimise their construction of, and response to, the pandemic. Therefore, it was in their interest to reinforce this conceptualisation of science. Within their discourse, the narrative of '*the science*' became a reproducing cycle, simultaneously being constructed by the discourse and legitimising it.

Integral to the sciences and their process of production of knowledge are the scientific communities. It is within these communities that results are discussed and debated and through which interpretations and theories are moulded and interrogated (Kitcher, 2001; Stevens, 2020). The Government's primary source of scientific information and guidance through the pandemic was SAGE – the Scientific Advisory Group for Emergencies. Thus, within the Government's construction of a singular science, SAGE functioned as the voice of '*the science*'. Throughout the pandemic, they occupied a complex and contested space in the discourse. According to Horton (2021), a 'crisis in the science of COVID-19' (p. 29) occurred as it became impossibly intertwined with politics and differing opinions resulted in a splintering of the scientific communities. As a result, the public and the media

began to turn on '*the science*'. He argues that, in the UK, one of the catalysts for this was the creation of iSAGE, an independent scientific advisory group chaired by Sir David King, who had previously been the Government's chief scientific advisor. This move occurred due to SAGE becoming 'impossibly compromised' (Horton, p. 105) in its entanglements with the Government. While controversial, this action did produce results as the official SAGE published the names of its members on the day of iSAGE's first meeting after resisting mounting pressure to do so for months (Horton, 2020).

This crisis was the consequence of the Government's persistent construction of '*the science*'. It does not reflect the sciences as they exist within society. Despite the Government's narrative, the sciences continued to function in their inherently complex manner, with disagreements, errors, and intricate ties to society, including politics. Thus, the very premise of '*the science*' creates a tension with reality as the presentation of '*the science*' does not reflect the processes that are actually at work. The consequences of this tension manifested in myriad ways, including the apparent 'crisis of the science' (p. 29).

It can also be observed in the lead ups to the two lockdowns in March 2020 and November 2020. Despite '*the science*' being positioned at the forefront of the discourse through March 2020, and assurances that the Government were being led by scientific evidence, there is significant evidence from scientists indicating that the Government failed to follow advice. The UK Government were slow to implement lockdown measures and slow to comprehend the significance of the risk posed by COVID-19 (bmj, 2020; Reuters, 2020). This was not due to a lack of scientific evidence to the contrary. Horton (2021) states 'The evidence shows that governments could reasonably have been expected to know the risks posed by this new virus. They could reasonably have been expected to implement precautions to have diminished those risks.' (p. 140/1). Regarding the lead up to the second lockdown, the Government defied the advice of SAGE – their own advisory committee (Wise, 2020). In October 2020, SAGE documents were released detailing a list of recommendations made to the Government

on 21st September 2020, including the implementation of circuit breaker lockdowns to disrupt the spread of COVID-19. The Government ignored all but one of the suggested measures (Wise, 2020).

In both instances, the Government's conceptualisation of '*the science*' existed in a tension with both the complexities of the sciences as communities and as a process, as well as with the intricacies of the political use of 'Science'. Regarding the former, their reliance on '*the science*' as a singular voice rendered their narrative inherently vulnerable to the discussion, debate, and disagreement that form an integral part of the production of scientific knowledge. Their narrative was undermined by any dissent or uncertainty in two potential ways because they had constructed a narrative in which there was only one answer and one voice. Firstly, it threatened the notion that '*the science*' existed as it exposed it as a space of debate. Alternatively, it contested '*the science*' which the Government were following. If science produces answers in a linear, objective manner, then evidence presented to the Government must be understood to be fact. In which case, the Government's failure to enact policies that adhered to this advice exposed the relationship between '*the science*' and politics as more complicated than was being constructed.

Despite these tensions that threatened to undermine Government discourse, the notion of '*the science*' persisted throughout the Government's discourse. Early in the pandemic, in the weeks leading up to the UK's first lockdown on 23rd March 2020, a prominent theme in the press conferences and statements was that actions had to be done at the '*right time*'. Furthermore, as can be seen in the last quote, this idea of the '*right time*' was often coupled with an emphasis that they were '*following the science*':

'the steps that we could take at the right time' 3rd March 2020

'the right measures at the right time' 16th March 2020

'those things, again, need to be done at the right time, in the right way, at the right stage of the outbreak' 16th March 2020

'to do the right thing at the right time and to follow the best scientific advice' 18th March 2020

This notion of a *'right time'* is rooted in *'the science'* as it proposes the existence of a singular answer that must be understood as fact. Specifically, it engages in a 'perfect solution ('nirvana') fallacy' (Lee, et al., 2020, p. 46). Lee et al. (2020) argue that the Government fell into the trap of wanting to wait until clear, absolute answers were available, when actually 'applying lots of measures that are likely to 'help a bit' is better than seeking a perfect solution that 'helps a lot'.' (Lee, et al., 2020, p. 46). An example of this is the late initial lockdown discussed earlier. Despite early advice and indications that the implementation of certain restrictions could mitigate the potential damage of COVID-19, the UK Government waited until they received data in mid-March 2020 on numbers of cases in the UK before they began to do so. When they arrived, these numbers were significantly higher than had been expected, indicating a much worse situation. This put the NHS at a much greater risk of being overwhelmed as cases were more prevalent than had been prepared for. Furthermore, the delay allowed time for the virus to spread further. The decision to wait until they had received all the data, rather than acting on the side of caution, implementing restrictions immediately and easing off as and when data indicated it was safer, resulted in a worse outcome (Freedman, 2020).

The discourse of the pandemic constructed and relied on a notion of *'the science'* that reflects Stengers' (2018) 'Science'. This representation attempts to render *'the science'* an independent and singular entity existing alongside society but without becoming intertwined with the complexities within it. This construction was in tension with the reality of the sciences in practice and these tensions manifested throughout the discourse. Despite this, this figuration of *'the science'* was used persistently.

Do We Really Have the Answers?

R Number

A recurring and specific element of the discourse of '*the science*' was the R number, used as a measure of the pandemic and as justification for decisions. The Government define it as follows: 'the average number of secondary infections produced by a single infected person.' (Government, 2021). It was found that the R number was discursively positioned as central to the Government's pandemic rationale. Frequently, it was called upon both to define the current situation, and to provide a benchmark or justification for decisions. A subsequent text search query found that the R number was referenced three-hundred-and-eighty-two times across the entire sample.

The R number falls within the umbrella of data driven, statistical science. There is a commonly held belief that numbers do not lie, that they do not leave room for human interference in the way that other forms of data do. This notion exists within the context of the assumed objectivity of 'Science' therefore it is positioned as a superior system of knowledge in society. Numbers, however, do lie. Varying methods of calculation, differing interpretations, and method of presentation can all alter the meaning or impact of data (Cohen, 1938; Gardenier & Resnik, 2002).

According to some from the scientific community, the Government's use of the R number was problematic in multiple ways (Adam, 2020; Horton, 2021; Mahase, 2020). Horton (2021) states: 'The R number is not a reliable means for judging viral spread, which may come as a surprise given the obsessive reporting of R by the Government and their scientific advisors.' (p. 107/8). He goes on to explain that the R number is inappropriate as a measure for COVID-19 because of the nature of this specific virus. COVID-19 often gives rise to superspreaders: single individuals who pass on the virus to significant numbers of people in one event, a phenomenon he refers to as overdispersion. As a result, the R number, which represents the average number of people an infected individual passes the virus on to, does not accurately reflect the spreading patterns of COVID-19 (Horton, 2021). Furthermore, it has been described as an 'imprecise estimate that rests on assumptions' and a 'lagging indicator'

because, without frequent mass testing, the R cannot be effectively measured (Adam, 2020). An article from the BMJ (British Medical Journal) also noted issues with it as a primary indicator for COVID-19, calling it a 'blunt monitoring tool' (Mahase, 2020). While scientists agree that it can be a useful metric for understanding viruses, it is commonly used in conjunction with other measures to contribute to a fuller picture of what is going on (Adam, 2020).

The Government's use of the R number engaged with the wider construct of '*the science*' by prioritising its supposed nature as a definitive and uncontested metric. It functioned as an agent of '*the science*' as it was positioned to act as a legitimising authority within Government discourse. Its capacity to do so was rooted in the construction of '*the science*' as a singular, objective entity as it is this construction that positions '*the science*' as an authority outside of the bounds of human interference. As with the general discourse of '*the science*', this resulted in tensions as the realities of the sciences as they operate within society manifested in ways that did not always align with that which was presented within the Government's discourse.

Modelling (The Scientific Kind)

Models were another prominent feature of the narrative of '*the science*' and were relied upon as certainties and treated as absolutes. Much of the Government's discourse, including that of the '*right time*', was based on the use of scientific modelling to produce predictions. For example:

'we'll need to have presented ministers with a menu which will be looked at scientifically modelled out what is the combination of things that can pull down the peak' (3rd March 2020).

This statement epitomises the problems with the Government's approach to modelling. The use of the word '*menu*' here trivialises the process of modelling and reinforces the notion that a perfect solution can and will be found. Models are a useful and important aspect of scientific advice, however their use within political discourse frequently disassociates them from the context of their creation (Kreps & Kriner, 2020). As Kreps and Kriner (2020) explain, 'Scientists understand the uncertainties embedded in models, but because of the direct public health stakes, the models took center stage in

public discourse, with political elites and the media communicating complex and uncertain science to a lay audience.’ (p. 1). Models inherently contain uncertainties: they are subject to the quality of the inputted data; they are based on variables that are determined by those who build them; they are necessarily oversimplifications of reality; and their results must be interpreted by humans (Schulman, 2021; Wang & Flessa, 2020). The unprecedented nature of the COVID-19 pandemic limited the scope of modelling as there was less data upon which to build them (Sridhar & Majumder, 2020). It has been argued that models were relied upon too heavily and that this caused mistakes to be made in the UK’s approach to the pandemic (Sridhar & Majumder, 2020).

Modelling was used to assert explicit Government control and power. The presentation of its results within the framework of ‘*the science*’ implies that they are a known and definitive calculation of the potential outcomes. The notion that the Government have access to this definitive information constructs them to be in control of the situation; they have knowledge of all possibilities and are acting accordingly. Therefore, models function as a legitimising authority within the Government’s discourse, specifically working to strengthen the Government’s position of control, both over the virus and over the public.

Words Matter

A tension exists within the Government’s discourse when it is considered in its entirety as, while the reliance upon ‘*the science*’ and its objectivity to legitimise is a central aspect, the Government seemingly contradicts itself at times. Specifically, there is an imprecision of language that creates a discord with the construction of science as foundational to the Government’s rationale.

Pandemic or Epidemic?

An example of this is their use of the words ‘*pandemic*’ and ‘*epidemic*’. These terms, while similar, have distinct meanings: epidemic refers to a localised outbreak, whereas pandemic refers to a disease with exponential growth that has breached international borders and is affecting multiple populations

(Health, 2021).

A pandemic cuts across international boundaries, as opposed to regional epidemics. This wide geographical reach is what makes pandemics lead to large-scale social disruption, economic loss, and general hardship.

It's important to note that a once-declared epidemic can progress into pandemic status. While an epidemic is large, it is also generally contained or expected in its spread, while a pandemic is international and out of control. (Health, 2021)

The World Health Organisation (WHO) declared COVID-19 as a pandemic on 11th March 2020 (WHO, 2021). Despite this, the UK Government continued to use the term: a text search query found that '*epidemic*' was used one-hundred-and-sixty-eight times across the entire sample after the 11th March 2020, including forty-one times in March, sixty-three in April, and fifty-seven in May. In comparison, the term '*pandemic*' was used one-hundred-and-ninety times across the entire sample.

The Government's use of the term '*epidemic*' is inconsistent with the advice from WHO. This inaccuracy undermines their proclamations that they were '*following the science*'. Their narrative revolved around the importance of '*the science*' in guiding their policy, and yet they did not follow the lead of WHO, the leading authority in this area. This is indicative of a performativity in their discursive positioning and use of '*the science*' that did not necessarily extend to their actions.

The Five Tests

The second example of imprecise language is the linguistic construction of the five tests proposed by Johnson in April 2020 to determine whether lockdown restrictions should be lifted. Whilst they were framed as a clear and definitive way to determine the correct course of action, the language used was often vague and could not be considered objective.

The tests were as follows (28th May 2020):

1. *Our first test is to protect the NHS's ability to cope, so that we are confident that we are able to provide sufficient critical care and specialist treatment right across the UK.*
2. *Our second test is to see a sustained and consistent fall in the daily death rates from COVID-19 so we are confident that we have moved beyond the peak.*
3. *Our third test is to receive reliable information, reliable data from SAGE showing that the rate of infection - the number of people catching Covid - is decreasing to manageable levels across the board.*
4. *Our fourth test is that we must be confident that the range of operational challenges, including on testing capacity and Personal Protective Equipment, are in hand, with supply able to meet future demand.*
5. *Our fifth and final test is that we must be confident that any adjustments to the current measures will not risk a second peak of infections that overwhelms the NHS.*

Tests 1,2,4,&5 all require that the Government be '*confident*'. This, again, relies on an oversimplified '*the science*' expecting it to be able to produce definitive answers against which to determine confidence. Test 5 further invokes this conceptualisation of '*the science*' as it relies on models.

Furthermore, the language used to define these tests is subjective and they position themselves as the determinants. Solely test 3 specifically mentions the incorporation of any scientific expertise, the rest are built around the '*we*' of the Government. The explicit mention of the use of scientific advice in test 3 makes its absence in the rest starker. The beginning of this chapter detailed the extent to which the Government drew power from their use of science and distanced themselves from responsibility from their decisions. These tests seemingly do the opposite as they centre themselves as decision-makers in what are constructed as subjective decisions.

Other language within these tests further contributes to the lack of clarity: '*ability to cope*' (test 1); '*sustained and consistent*' (test 2). Along with this use of '*confident*', these do not provide any information regarding the specific requirements of these tests. The consequence of this is that these

tests can be met or not met almost entirely at the discretion of the Government. For example, a '*sustained and consistent*' fall could be a decrease of as little as one per day. While it is unlikely this is what they meant by the statement, without any sort of indication of numerical value of a goal it is impossible to determine. Thus, these tests give the illusion of rational decision-making whilst ensuring that the Government retain the scope to make decisions without being confined to '*the science*'.

This lack of specificity in language contrasts with their reliance on '*the science*' and the R number which draw power from the associated objectivity that is absent in the wording of these tests. This contradiction indicates that the Government's use of the narrative of science is performative and targeted at controlling the perceptions of the public. Despite relying on the legitimising authority of science through much of the discourse, when it would seemingly restrict them, they change the language.

Conclusion

The Government's discourse throughout the pandemic was reliant upon a narrative of science that was inherently problematic. It oversimplified science by constructing it as '*the science*', overlooking the complexities of the relationship between science and politics, adhering to a perfect solution fallacy, and hinging its justifications on modelling and the R number without accounting for their limitations. This narrative drew on the legitimising authority of science afforded to it by its associations with objectivity and pursuit of truth that are deemed superior within the current episteme characterised by the will to truth.

The prominence of '*the science*' and its constructed objectivity also works to distance the Government from responsibility for their actions and decisions. It does so by disassociating them from the decision-making process; if decisions are based on an objective model produced by '*the science*' then the Government cannot be accused of making a mistake in judgement because they were simply doing what '*the science*' told them; '*following the science*'. Therefore, this served as a layer of protection for

the Government's position of power as it worked to disrupt the chain of accountability and direct it away from the Government, thus shielding them from responsibility for negative outcomes which could undermine their position of power or control.

Furthermore, this narrative of '*the science*' enabled the Government to provide certainties such as the R number and predictions. A presentation of certainty further protects the Government's power; research has found that it is a tactic commonly used by politicians to gain public trust and keep power (Kreps & Kriner, 2020). The fallibilities and limitations of science are often overlooked when it becomes integrated into policy decisions (Spencer, 2010). As Spencer (2010) explains, 'People start to misuse scientific research results as an excuse to facilitate social or political changes that they wanted to see happen anyway. I guess this is just human nature, even for scientists.' (p. 37). Regarding COVID-19, much of the science was newly established and new information was being presented frequently. Thus, their narrative of '*the science*' was integral to maintaining their position of power and authority.

Despite the importance of this narrative, there were points of tension as the Government's discourse strayed from objectivity at times and contradicted the notion that they were '*following the science*'. Evidence that advice from the scientific community was ignored, imprecise use of the terms pandemic and epidemic that conflict with statements from WHO, and the subjective language used to define the parameters of the five tests are all examples of this contradiction. They indicate a performative element to the Government's use of science; '*the science*' functioned, at least in part, as a means through which to bring power to their discourse and therefore more effectively manage the population.

Chapter 2: The Role of the Government

The role of the Government within the pandemic was complicated. The virus exists outside of the reach of power, thus it cannot be controlled through mechanisms of power. This creates a problem because, within the biopolitical system of the UK, the Government have assumed responsibility for the welfare of the population, but they are attempting to protect the population against an entity over which they do not have definitive authority through traditional avenues of power. The constructed attribution of responsibility within the Government discourse variously positioned the Government, '*the science*', and the virus itself as having authority within the situation. This chapter explores the discursive constructions of the virus, the Government, and '*the science*', and the products of their interactions. It also examines the mechanisms through which the Government have attempted to protect both the system of power and their position within it.

Excessive Biopower?

The power dynamics at play between the Government and the virus are such that the virus poses a threat to the system of power itself upon which the state relies to maintain control. Foucault explored

the manifestation of sovereignty and biopower through the extreme examples of nuclear weaponry and a viral pandemic. He explains that the nuclear bomb represents the ultimate sovereign power that is in excess of biopower; not only does it have the power to kill individuals (as is the foundation of sovereign power), but it has 'the power to kill life itself' (Foucault, 2004, p. 253). Conversely, a viral pandemic is the extreme manifestation of an excess of biopower over sovereign power. Foucault describes it as follows:

this excess of biopower appears when it becomes technologically and politically possible for man not only to manage life but to make it proliferate, to create living matter, to build the monster, and, ultimately, to build viruses that cannot be controlled and that are universally destructive (p. 254).

He expressed that the ability of states to bring about a pandemic would represent a gross excess of biopower that 'will put it beyond all human sovereignty' (p. 254).

Regarding the COVID-19 pandemic, there was no shortage of conspiracy theories, including that it was manufactured in a lab in Wuhan as an agent of biological warfare, and that it was caused by 5G (Hartman, et al., 2021; Nie, 2020). Agamben also argued that the virus was intentionally manufactured (Agamben, 2020[c]; Stephens, 2020). While these claims have been denied by the scientific community (Nie, 2020), Szendy (Humanities, 2020) argues that these conspiracy theories do not need to be accurate for the virus to be considered man-made. According to him, this virus is the result of thousands of years of development into modern society; the pandemic is the result of the power relations and biopolitics that govern the world (Humanities, 2020). So, while it may not have been an intentional creation, human decisions have created the necessary conditions.

Some argue that human agency intervened in the creation of the pandemic as the potential consequences of decisions were known. Scientists have been warning for years of the potential for a deadly pandemic due to huge populations and frequent and widespread global movement making mass transmission possible (Enserink, 2004; Lederberg, 1998). Hence, while it may not have been

directly engineered by humans, it is a consequence of the organisation of society and the choices of states.

Exercise CYGNUS was a pandemic simulation project that took place in 2016 and examined the UK's response. While it uncovered a great many problem areas and indicated the likelihood of a high death count, the necessary changes were not made (Horton, 2021; Scally, et al., 2020). Horton (2021) states: 'Was Johnson aware of Exercise CYGNUS with its clear conclusion in 2016 that the UK was most definitely not well prepared? If he was, he lied to the public. If he was not, then he is surely guilty of misconduct in public office.' (p. 92).

Analysis

Who is Actually in Charge Here?

Despite the extensive discourse working to construct the narrative that the Government were '*following the science*', their discourse also worked to assert their authority within the situation. The term '*control the virus*' was central to the Government's discourse of the pandemic: across the sampled materials from May 2020 it was used forty-seven times⁸ and a further twenty-four⁹ in June 2020 (in which '*control*' was also the eighth most frequently used word). It was positioned as a primary goal and was part of one of the main slogans – *Stay Alert, Control the Virus, Save Lives* (introduced 10th May 2020).

The notion that the virus can be controlled by the state is contested. According to Horvath and Lovasz (2020), COVID-19 threatens the power of the state due to its ability to bring about death; it can indiscriminately and unpredictably 'make die' and this makes it 'inaccessible to power' (p. 150), a sentiment echoed by Villadsen (2021) and Horton (2021). Once it has come into being, it exists outside

⁸ It appeared forty-seven times and in twenty-seven cases out of the total forty-four cases from May 2020 included in the sample.

⁹ It appeared twenty-four times and in thirteen cases out of the twenty-one cases from June 2020 included in the sample.

of any systems of power or governance and thus is not subject to state control. They argue, its existence has dealt a 'fatal blow' (p. 149) to the idea that the state is impermeable to external invasions. Foucault further argues that the ultimate excess of biopower is in the ability to create a viral pandemic that cannot be controlled. It is this, he states, that will put it 'beyond all human sovereignty' (Foucault, 2004, p. 254). It must be noted, however, that the virus is not an all-powerful entity with unlimited scope to destroy; it is not impenetrable. It is a biological agent that requires a specific set of conditions to thrive and is vulnerable to biological interventions such as a vaccine. The specific threat it poses to the position of power of the Government is that it can be controlled neither through mechanisms of governmentality, disciplinary power, or sovereign power. This exposes the vulnerabilities and limitations of power.

The Government's construction of themselves in a position of power over the virus is therefore dependent on the notion of '*the science*'. Rather than acting as an authority, which the narrative of '*following the science*' would initially imply, '*the science*' functions as the weapon with which the Government will control the virus. Its construction as '*the science*' is necessary for this interaction between the two as it is this which gives '*the science*' the power and authority to function in this way. The power of '*the science*', then, does not undermine the authority of the Government, but exists underneath it as its foundation.

The Government's ability to protect itself is also reliant upon its protection of the population. The shift to biopolitics and apparatuses of security have rendered it responsible for public health. Its ability to do so as perceived by the population therefore legitimise it in its role. If it is seen to be incapable of (or unwilling to) carry out this duty then its ability to retain order and control are undermined; if it is not acting in someone's interest then they are less inclined to buy into its rules, implicit or explicit.

'Sorry'

The framing of apologies engaged with the virus specifically as an agent outside of the reach of power. In the PM statements, the word '*sorry*' was said seven times. Of these, three were followed by the

word '*but*' (9th September; 28th May; 31st July 2020). This undermines the apology by displacing the responsibility that Johnson is supposedly accepting, onto a third party or an excuse.

An apology, in its simplest definition, conveys that the speaker is assuming responsibility for an action or actions and that they regret the consequences. Commonly, apologies are complex and entrenched in social intricacies, and thus can be used and manipulated in myriad ways. This is particularly true of apologies from those in power, including politicians who often use them to improve their public image and gain (or regain) support (Benoit, 1995). Furthermore, Weiner's (2006) attribution theory argues that audiences are more judgemental when they believe the individual was in control or that which they are apologising for appears to be typical behaviour. Conversely, they are more forgiving when they believe that a bad consequence was not the intention of the individual or did not reflect their true character: 'stronger attributions of responsibility produce anger, while weaker attributions of responsibility can lead to sympathy' (Bentley, et al., 2018, p. 139). The use of '*but*' weakens the apology by introducing an external factor that intends to elicit sympathy and a more forgiving reception. It disassociates him from ultimate responsibility by providing an explanation for why it was inevitable and unavoidable, and therefore he cannot be held accountable for it.

Of the four remaining apologies, one was for missing briefings due to his contracting COVID-19, and three were regarding the implementation of '*tough*' (26th November 2020) restrictions. None are an apology for a mistake. In each, the initial action is not being presented as wrong, rather an apology is being made for the consequences of these actions. This was done within a framework of inevitability in which these consequences were out of his hands. These apologies conveyed sympathy more than apology and did not assume responsibility for the suffering. He utilised apologies to gain the social capital associated with them whilst also attempting to maintain a position of power.

Although it occurred outside of the scope of the sample, it is worth noting that Johnson made a public apology on 26th January 2021 (Guardian, 2021). In it, he offered his condolences for those who had lost loved ones and apologised for all the lives lost. Despite being presented as a formal apology, it

employed the same discursive tactics to distance Johnson from direct responsibility for the consequences and to garner public sympathy. He begins by apologising, stating that he takes responsibility for all of the decisions made by the Government, however he then immediately undermines this sentiment by assuring the audience that the Government have done everything they could, to the best of their ability throughout. In doing so, he positions their effort centrally in the discourse, thus undermining the significance of any mistakes that have been made. This pattern was also found in the sample, for example:

'everyone responsible for tackling these problems whether in Government or the NHS, or Public Health England, local authorities, we are throwing everything at it, heart and soul, night and day, to get it right' 'a huge amount of work has been going on that plan' (30th April 2020)

This was part of a wider pattern in which the discourse was personalised, centring the speaker. For example, the word *'want'* appeared one-thousand-one-hundred-and-thirty-six times across the entire sample and it was the second most used word in March. The term *want* inherently centres the speaker rather than the public because it is concerned with personal desire, it is necessarily subjective and about the specific wishes of the speaker.

Furthermore, these apologies appealed to a narrative of constructed inevitability that engaged with the virus's agency to act outside of the reach of power. They constructed these consequences as out of their hands, apologising that the public had to go through them rather than apologising for actions that may have caused them.

The UK vs. World

The use of global comparisons further contributed to the narrative of inevitability. Through analysis of the 'global comparisons' node, it was found that other countries were positioned in relation to the UK either in alignment, to justify decisions made by the UK Government, or as an opposition, to juxtapose the situation in the UK and make it look better. The use of global comparisons employed

the narrative of inevitability to distance the Government from unpopular decisions or negative consequences.

The following are examples from the sample of instances in which the notion of a universal experience was appealed to:

'in line with the approach being taken by other countries' (24th May 2020)

'it is consistent with the approach that has been taken by many other countries in Europe' (10th June 2020)

'every country in the world is struggling with this' (12th October 2020)

'the same approach that is now being followed by some of the countries that are the most successful in their fights against the virus' (22nd October 2020)

Where the existence of similar restrictions or consequences was employed to justify actions taken or situations in the UK, the unique and specific set of conditions within each country or community are erased. It constructs the pandemic as a singular experience, thus implying that the virus has certain effects which are universal. While there may be some aspects of the virus that supersede cultural variation, the nuances of this were found to not be incorporating into the use of global comparisons. This universalising divorces the situation from specific causes that could be attributed to the Government directly; if these things are happening everywhere then they must be an inevitable consequence of the pandemic.

The other prominent (although less so) use of global comparisons found was their implementation to juxtapose the UK and make it look better. These functioned to protect and reassert the position of power of the UK Government. The following are a few examples:

'world beating system' (10th May 2020)

'that's more than any other country in Europe, and more per head than other European countries like Germany and Spain' (9th September 2020)

'largest testing capacity in Europe' (5th November)

'that puts us towards the front of the international pack on a per capita basis' (9th November 2020)

'when coronavirus spread around the world, first from Wuhan and then from northern Italy' (3rd June 2020)

In addition to statements regarding the achievements of the UK, there were notable instances in which specific attention was paid to countries that were in a supposedly worse position than the UK.

These comments work to 'other' (Said, 1978) foreign countries by emphasising the distinctions between countries within a framework of 'us' and 'them'¹⁰. This is furthered by the specific attention on Wuhan, the city from which the virus originated, and Italy, a country that suffered particularly high numbers of cases and deaths and was one of the earliest to reach the stage of crisis (Grasselli, et al., 2020). Drawing attention to examples that are framed as failures works to juxtapose against the UK, making it look better. It functions as a reference point for failure that constructs a discursive boundary around it and positions the UK as firmly outside of this. Therefore, an 'us' and 'them' narrative functions to improve the perception of the UK Government within the context of the pandemic.

This narrative engages with a wider discourse of constructing an 'us' and 'them' that was further reinforced by the actions of the Government. While attempting to usher in a hard Brexit, Johnson and the UK Government turned down three offers from the EU to join 'schemes for the procurement of ventilators and personal protective equipment' (Lucas, 2021, p. 4). The implementation of the vaccine program is outside of the scope of this study, however it is also worth noting that vaccine nationalism was also prevalent. In July 2020, the UK rejected another offer to join an EU scheme, in this case for vaccines. Instead, the UK paid significantly higher than the EU for independent contracts, ensuring

¹⁰ See [The Collective War](#) for an exploration of the construction of a notion of 'Britishness'.

that they were better supplied than other countries. This was then used as evidence of British superiority, reasserting the 'us' and 'them' narrative (Lucas, 2021).

Furthermore, this narrative works to reaffirm national borders and to 'other' (Said, 1978) foreign countries. This was the case with the discourse surrounding Wuhan, China. Of the eight times Wuhan was referenced across the sample, six functioned as explicit reminders that this was where the virus originated. While this is not a high number of references, they occurred within the context of an orientalism and Sinophobia that existed long before the pandemic but penetrated mainstream discourse in an explicit way in direct response to the pandemic (Roberto, et al., 2020; Zhang & Xu, 2020). This tactic is not new; anti-Chinese sentiment positioned China as the scapegoat for the foot-and-mouth outbreak in the UK in 2001 and anti-African ideology was invoked in response to the 2013-2016 Ebola outbreak (Ng, 2020). Regarding the COVID-19 pandemic, research has found that it led to an increase in hate crimes towards Chinese people in London (Gray & Hansen, 2020). The narrative of orientalism and Sinophobia both internally and externally to Government discourse worked to construct an image of China as the figurative villain responsible for the pandemic, thus removing responsibility from the Government.

Despite the frequent and various global comparisons made within the sample, direct comparisons are not as informative as the discourse positioned them to be. There are two main reasons for this: 1 – varying socio-political-economic contexts mean that the manifestation of the pandemic and the effectiveness of policies is not necessarily transferrable; and 2 – differences in recording and reporting of data meant that even a numerical comparison of cases and deaths was not effective. Despite this, the global nature of the virus meant that looking outside of the UK for advice and guidance and learning from the successes and failures of others to inform decisions was a potentially useful avenue.

Analysis of the PM statements indicated that the comparisons had a predominantly Eurocentric focus. Subsequent text search queries found that the terms '*Europe*' (forty-three), '*France*' (thirty-nine), '*Germany*' (fifty-six), and '*Italy*' (forty-four) were referenced the most frequently of any countries or

continents. On one hand this makes sense as the UK shares many similarities with these places that make comparisons more relevant than they otherwise would be. On the other, the countries listed were all suffering similarly high numbers of cases and deaths (Lemey, et al., 2021; Nørgaard, et al., 2021). Thus, the decisions made by the leaders of these places do not qualify as suitable to be used as justification for the implementation of the same or similar measures in the UK, as it was found they were. In contrast, New Zealand, widely considered as having had one of the best policy responses to the pandemic (Cousins, 2020; McGuire, et al., 2020), did not appear once across the entire sample. New Zealand employed a policy of strict and immediate action (Horton, 2021) that contrasted the UK Government's narrative in which harsher measures should not be implemented immediately due to the potential economic consequences.

Of the countries that the Government were found to use as a comparison, South Korea was the only one to have appeared a significant number of times (sixteen) that was also considered to have had a particularly effective response to the pandemic (Austermann, et al., 2020; Chen, et al., 2021; Mellish, et al., 2020). These discursive comparisons focused almost exclusively on testing and track and trace, both integral parts of the South Korean policy approach that made it successful. The Government's positioning of them is therefore well-founded.

Overall, the range of countries was limited and, except South Korea, oriented around countries whose situation did not appear to be significantly better than that of the UK. They also did not centre successful countries in their comparisons; even the use of South Korea was significantly less than that of France, Italy, Germany, and Spain. This indicates that global comparisons were used as a discursive tactic to legitimise decisions and improve perceptions of the situation in the UK.

Despite global comparisons having the potential to further general understanding of the virus and help inform policy decision, the way the Government employed them within the discourse functioned as more of a discursive tool. They engaged with othering discourse, worked to distance the

Government from responsibility for the situation, and frequently did not reflect the best interest of the public.

Conclusion

The virus posed a threat to the Government's position of power by exposing the limitations of power itself. Despite this, they persisted with a narrative of '*control the virus*'. '*The science*' was positioned as the means by which they would exert this control. It functioned as a buffer between the Government and the threat posed to the legitimacy of their power. In its capacity as the weapon to fight the virus, it was '*the science*' that was directly implicated by instances of inability to control the virus. Consequences that cannot be mitigated or eradicated expose the limitations of '*the science*', rather than of the Government. The construction of '*the science*' as a singular entity that resides on a separate plane of existence to the Government is fundamental to this separation of responsibility. A conceptualisation of science that is understood to be enmeshed in politics would not function as an effective buffer because the Government's enmeshment would necessarily result in their being implicated in instances of lack of control.

This framework also allows the Government to protect their position of power by invoking a narrative of inevitability regarding the virus. This narrative relied on the construction of the virus as an entity with agency outside of the reach of power as this rendered it capable of being held responsible for consequences and thus distancing the Government from them. Both the Government's apologies and their global comparisons relied on and contributed to this narrative of inevitability. The buffer of '*the science*' protected the Government from the implications of this whilst this construction of inevitability further protected the Government's position of power by distancing them from responsibility for the pandemic. The use of global comparisons also worked to further distance the Government from responsibility by engaging with the narrative of orientalism and Sinophobia that surrounded the pandemic in much of the western world (Ng, 2020; Pizarro, et al., 2020; Tessler, et al., 2020).

Shielding itself from perceptions of inability or unwillingness to protect public health is necessary for the Government to retain its position of power. As the shift to biopolitics and apparatuses of security have rendered it responsible for public health, if seen to be failing to fulfil this role then its ability to retain order and control could be undermined; if it is not acting in the public's interest then they are less inclined to buy into its rules, implicit or explicit.

Chapter 3: The Role of the People

The protection of the population through public health interventions is a prerequisite for maximising the production capabilities of a society; a healthy society is more economically productive.

A democratic system, as in the UK, purports to represent the will of the people and, accordingly, act in their interest (Held, 2006). This expectation underpinned a rationale of governance throughout the pandemic in which policies and measures were imposed on the people, in the name of the people. It is the supposed rationale for the Government's authority and was constructed as such during the pandemic. Within a biopolitical system, however, the rationale of governance is rooted in the economy and the people are managed as part of the economics of production. Apparatuses of security are employed to protect the population through public health interventions to maximise the production capabilities of a society; a healthy society is more economically productive.

The distinction between the health and wellbeing of the individual and that of society as a whole is important, however. While it is economically productive to support the health and wellbeing of the population, the same does not apply at the level of the individual. Within this system, the individual is expendable because they are replaceable. It is this distinction between the population and the individual that creates a system to which systemic inequality is both inherent and necessary. This chapter explores how the biopolitical prioritisation of the economy manifested in the pandemic. Specifically, it will investigate how the function of the population as a force of production translated into discursive construction of the people, and the accompanying Government actions.

Biopolitics, Capitalism, and Neoliberalism

Biopolitics, for Foucault, is inextricably linked to neoliberalism and its orientation around the economy. Neoliberalism is based on the freedom of individuals and works to integrate this with a capitalist economy (McGregor, 2001). It has three core principles: 'individualism, free market via

privatization and deregulation, and decentralization' (McGregor, 2001, p. 82). This freedom, or supposed freedom, far from inhibiting the power of the state, is necessary within the framework of governmentality and biopolitics. It is this perceived freedom which facilitates conduct of conduct. This method of governance shapes society without relying on explicit rules, therefore it requires compliance from the population and a perception of free will otherwise its mechanisms of control would be exposed, thus undermining their presence as implicit.

Within a neoliberal system, governmentality is directed towards the expansion of the economy. Biopolitical governance integrates the bodies of the population into the foundations of the economy as the driving force of production. The management of the population is directed towards maximising the efficiency of this system, thus the bodies of the population are the focus of governance as health and wellbeing has a direct implication for the economy (Foucault, 2004; Foucault, 2008; Newheiser, 2016; Peters, 2007). Foucault explains:

This biopower was without question an indispensable element in the development of capitalism: the latter would not have been possible without the controlled insertion of bodies into the machinery of production and the adjustment of the phenomena of population to economic processes. (1978, p. 141).

This governance is based on the normative curves and statistics through which the population is understood and defined. Within these, the population is organised into a stratified hierarchy, with value placed on bodies based on their proximity to the norm and that which is desirable to the state. The health of the individual becomes reframed as their capacity to contribute to the workforce. The welfare of the individual is not the primary concern within a biopolitical system. Decisions made within this framework will inevitably have consequences for the lived experiences of the individuals and will disproportionately affect those who are from socially oppressed groups, i.e. those who are afforded less value.

A system based on population data necessarily homogenises. Within biopolitics, a biological rationale functions to legitimise these classifications. Hierarchy within this system is not only inevitable, but it is necessary as it maintains control over the population by determining the value placed on an individual body (Foucault, 1978). According to Foucault, biopolitical mechanisms ‘acted as factors of segregation and social hierarchization’ (Foucault, 1978, p. 141). This hierarchy functions as a mechanism of control as it stratifies the normal and the abnormal, the acceptable and the unacceptable. This serves as the basis for conduct of conduct. The Government are not implementing explicit rules, rather shaping the landscape of society to direct behaviour towards the desirable.

Analysis

The Binary

This biopolitical focus on the economy manifested in the discourse as a tension between health and the economy. It was found that the Government constructed a binary opposition between the two; if one were to be protected, then the other would suffer. This binary served as the basis for numerous policies throughout the pandemic. Furthermore, in other contexts the discourse was frequently oriented around the economy, even when discussing things not directly related. A text search query found that the word ‘*economy*’ appeared two-hundred-and-thirty-four times across the entire sample. Rishi Sunak, the Chancellor of the Exchequer, was also a prominent figure throughout.

The discursive positioning of health and the economy in binary opposition constructed the notion that the protection of one is necessarily and unavoidably detrimental to the other. Bigo et al. (2021) describe this binary as follows:

The discourse of a balance between protecting health, on the one hand, and risking an economic recession, on the other, has been based on the argument that the protection of individuals has to be balanced against the protection of the nation. The idea is effectively that the virus’ impact on the vulnerable is terrible but has to be weighed up against the global

economic competitiveness of a country and the importance of being among the first to escape a crisis characterised by the cessation or diminution of some essential activities. (p. 473).

Undoubtedly, the potential for economic devastation was a very real concern, not just in the UK but globally. However, evidence indicates that this construction of a binary is an oversimplification. Research has found that countries that better managed the pandemic and implemented stricter measures earlier suffered less damage to their economies and stricter immediate lockdowns were less detrimental to the economy because the virus was contained quicker thus allowing regular business to resume earlier (Paes-Sousa, et al., 2020). While it is inevitable that the health and economy of a country are intertwined, particularly when existing within a biopolitical system, the strict binary that was created does not encompass the nuance and complexity of this relationship. Paes-Sousa et al. (2020) explain:

The solutions to addressing the COVID-19 pandemic are complex and multifaceted requiring careful and informed policy decisions to balance economic, social, and health priorities. We do not doubt that economic recessions will have profound health consequences, but distilling arguments into simple trade-offs is unhelpful. (p. 1635)

While differences in the social, economic, and political climates between countries make it difficult to draw clear or definitive conclusions across national boundaries, the outcomes in other countries indicate that the construction of a binary was an oversimplification.

The examples of the lead ups to the two lockdowns explored in Chapter 1 regarding the use of '*the science*' will be revisited here to further analyse the implementation of the binary and its function within the discourse.

During the first in March 2020, the Government justified their reluctance to implement restrictions by stating that doing so too early would cause unnecessary damage:

'We must not do things which have no or limited medical benefit, nor things which could turn out to be counterproductive.' (9th March 2020)

'We want to ensure that this period of shielding, this period of maximum protection coincides with the peak of the disease' (16th March 2020)

This narrative was also linked to that of the *'right time'*, discussed earlier.

This justification was re-employed in October 2020; the number of cases was rapidly rising and members of the scientific community were calling for a second round of lockdown restrictions (Gurdasani, et al., 2020). The Government again built their justification for decisions around this healthcare vs. economy binary:

'And because it is far, far better to keep business going now rather than to let those jobs go forever in a new national lockdown.' (22nd October 2020)

In Chapter 1 it was demonstrated that the Government's narrative of *'follow the science'* functioned to distance the Government from the responsibility for decisions. The notion of *'the science'* also underpins this conception of the health vs. economy binary. It relies on the idea that models can produce clear answers.

This binary, like the apologies and global comparisons, also relied on a narrative of inevitability. It discursively limits the range of options understood to be available to the Government in handling the pandemic and pre-constructs the potential outcomes. Measures that prioritise protecting the health of the population have already been framed to the public as having detrimental consequences for the economy, and vice versa. The public are primed to expect these consequences; they are constructed as inevitabilities. Therefore, when the economy started to crash, or when case and death numbers once again started to increase, it could be explained as a natural consequence of the protection of health or the economy, rather than due to any poor decision-making on the part of the Government. These inevitabilities work to protect the Government from being in a position of responsibility while

'the science' protects it from the implied limitations presented by inevitabilities that cannot be controlled.

This binary narrative is also symptomatic of the tension between the inherently economic motivations of biopolitics and the expectation on the Government to act in the interest of the public, specifically the most vulnerable. Within a biopolitical system, bodies that are less able to contribute to the wheels of production are of less value. The population has value insofar as it can produce profit. Thus, those who are particularly vulnerable to COVID-19 are not considered as valuable as others within this system. Furthermore, the underlying economic motivations of this mode of governance lead to decisions to be made that prioritise the protection of the economy at the expense of those who are not able to contribute as extensively. These are people, however, whom the Government are supposedly also protecting and working for. This tension then manifests in the discourse as they attempt to discursively prioritise both health and the economy while, according to biopolitical ideology, health is expendable in the pursuit of the protection and expansion of the economy.

The Value of Bodies

The hierarchy inherent to biopolitics and its economic underpinnings intersected with this constructed binary and manifested in the pandemic on the bodies of the population. The context within which the pandemic occurred is a society in which systems of oppression are pervasive, systemic, and institutionalised (Davis, 2011). They have been both exacerbated by the pandemic and reflected in its effects. Horton (2021) describes the COVID-19 outbreak not as a pandemic, but as a 'syndemic' (p. 16). He explains this as 'a synthesis of pandemics' (p. 16), stating 'the aggregation of these connecting conditions – viral infection and chronic non communicable diseases – on backgrounds of social and economic disparity is worsening the adverse effects of each separate illness' (p. 16). Systemic inequality is compounded by the COVID-19 pandemic. This section will explore the manifestation of biopower on the bodies of POC and the elderly during the pandemic.

Racism

While this topic requires an entire dedicated study of its own, and it should be noted that too few references were made directly to race within the sample for any conclusions to be drawn from this CDA, the manifestation of racism in the pandemic is relevant to understanding the mechanisms of power at work through the pandemic.

POC experienced disproportionately high death rates from COVID-19 (Horton, 2021; Nassif-Pires, et al., 2020; Patel, et al., 2020). Furthermore, the first eleven healthcare workers to die from COVID-19 in the UK were all POC (Kirby, 2020). This disparity is the manifestation of a complex systemic racism that, within a biopolitical system, is embedded into every level of society (Bowman, 2020). The pervasive and persistent nature of racism was evident when, despite being amidst a global pandemic, huge racial protests occurred across the western world in response to the murder of George Floyd at the hands of the police in the US (Bowman, 2020; Sotiris, 2020). The force with which both the state (the UK and US governments, as well as others) and racist groups of civilians attempted to shut down these protest is further indicative of the pervasive nature of racial oppression as well as the state's inclination to maintain it (Gilmore, 2021; Joseph-Salisbury, et al., 2020; Reny & Newman, 2021). The disproportionate effects of the pandemic on POC were not caused by a racist virus, or any biological factor, they are the manifestation of a longstanding systemic racism that is inherent to the biopolitical system (Bowman, 2020).

Foucault argues that biopower is the root of racism, as it 'inscribes it in the mechanisms of the state' (2004, p. 254). He contends that biopower is reliant upon the categorization and classification of the population based on real or perceived biological characteristics. Therefore, racism is part of its very foundation. He asserts that 'the modern State can scarcely function without becoming involved with racism at some point, within certain limits and subject to certain conditions' (Foucault, 2004, p. 254). Horvath and Lovasz (2020) also note the inherent links between biopolitics and race. They argue that, while biopolitics typically 'refrain from explicit oppression' (p. 146), it, by virtue of its very nature,

categorizes people based on a range of different characteristics. This ultimately translates to a hierarchy of power based on state determined characteristics that organises the population by the perceived value of their life (Horvath & Lovasz, 2020). Those who are lower down on this hierarchy are ultimately at greater risk from events such as the pandemic as the institutions and systems of society are not organised in such a way as to afford them the protections given to those in positions of power.

Care Homes and the Elderly

Those living in care homes were one of the worst affected groups during the pandemic as the virus ran rampant through these institutions (Daly, 2020). The virus was found to be particularly dangerous to individuals with underlying health conditions, and notably so for older individuals (Levin, et al., 2020). Unlike in relation to race, there was a biological explanation for high death rates within this demographic. This study, however, argues that it was exacerbated by systemic inequality in which the elderly were treated as having less value than others.

Throughout the pandemic, numbers and statistics have been central to the discourse. They have been the measure of progress, the platform for global comparison, and the justification for Government decisions. Despite this, and despite the high numbers of cases and deaths from within care homes, the data on care homes was not reported on by the Government for the first few months of the pandemic. It was not until the end of April 2020 that an attempt was made to rectify this (Booth, 2020).

Statistics of cases and deaths were regularly reported at the start of addresses and conferences, discursively positioning them as informative and important measures. Furthermore, they were presented as definitive and were used accordingly, frequently functioning as justification for decisions. Failure to include a section of the population meant that decisions were being justified based on incomplete data. It is indicative of a lack of value assigned to the lives of the elderly, specifically those in care. They were symbolically excluded from the population insofar as it was relevant to the

pandemic. This reflects the system of normative curves upon which biopolitics is based in which one's proximity to the norm determines the value they are afforded in society. The systems, infrastructures, and institutions of society are built around the centre, with the intention of shaping society to move it towards this. Therefore, those who exist further away from the centre are not significant to the state. The deaths in care homes, while statistically significant in relation to the overall numbers when divorced from the context of society, were not included in a figure that was nonetheless treated as complete because they were outside that which was considered the primary population. Biopolitics necessarily orients around the centre, and this is inherently dangerous to those who do not exist in close proximity to it.

Furthermore, regarding the deaths of the elderly demographic, there was a tension between the Government's actions and their discourse, which relied on a narrative of vulnerability. The notion of vulnerability was frequently referenced throughout the discourse. A text search query found that the term '*vulnerable*' (and its stemmed words) appeared two-hundred-and-eighty-six times across the entire sample. The elderly were positioned as the most vulnerable and juxtaposed against the invulnerable young:

'In care homes, what we have is a large number of people of the most vulnerable age for this virus. This is a virus which is particularly a virus of people who are older, and particularly a virus which causes severe disease and death in a minority, but an increasing minority as you go up in age, and in those who have coexisting medical problems. And many people in care homes of course, and nursing homes in particular have coexisting medical problems. So they are a very vulnerable group.' (22nd April 2020)

'Because the huge exponential growth in the number of patients – by no means all of them elderly, by the way – would mean that doctors and nurses would be forced to choose which patients to treat' (31st October 2020)

As stated earlier, this concept of vulnerability was rooted in a real biological difference (Levin, et al., 2020). Furthermore, individuals in care homes are a particularly vulnerable demographic as they live

in clustered groups with many other vulnerable individuals, they lack the autonomy of the general population, and are often subject to the decisions of others. It was known from the beginning of the outbreak that those in care homes were at a higher risk than the general population (the Government were first questioned about it in the sample on 3rd March 2020). Despite this, the measures put in place to protect those in care homes were inadequate and ineffective. Rajan et al. (2020) found that:

Although social care policies in England have aligned with those advised by the World Health Organization, they were arguably delayed and were not implemented effectively. Testing had taken place in 70% of care homes surveyed but only 36% of residents had been tested, of whom 16% were positive. Managers were unable to effectively implement isolation policies and reported that workforce and funding support did not always reach them. Guidance changed frequently and was conflicting and could not always be implemented, for example when personal protection equipment was extremely expensive and difficult to source. (p. 185)

Furthermore, elderly patients were discharged from hospitals and relocated to care homes to free up bed space in anticipation of a huge spike in demand as the number of COVID cases increased.

According to a Reuters investigation:

the Government's focus on shielding hospitals, to prevent emergency wards from being overwhelmed, left care home residents and staff exposed to COVID-19. To free up hospital beds, patients were discharged into homes for the elderly and vulnerable, often without being tested for the coronavirus that causes the disease. (McNeill & MacAskill, 2020)

Not only did this potentially put the lives of those who were being moved from hospital at risk as they would not be accessing the same level of healthcare services, but it endangered those already in the care homes as the new patients were coming from hospitals and could have been bringing in the virus. While many patients from all age groups were discharged in preparation for the pandemic, this action disproportionately affected the elderly.

The problems for care homes occurred within the context of a systematic dismantling of the sanctity of the care home system, and healthcare in general, at the hands of neoliberalist ideology (McGregor, 2001). The inherent tendency of neoliberalism towards unregulated markets and a shift away from the welfare state works to minimize Government interference in markets, including that of healthcare. The economic motivations of neoliberalism ultimately pose a threat to the quality and accessibility of healthcare as the function and priority shifts towards the economic and away from the health and wellbeing of the population (Labonte, 1998; McDaniel & Chappell, 1999; McGregor, 2001). In the context of the pandemic, Mellish et al. (2020) argue that neoliberal policies resulted in the UK healthcare system's lack of preparedness. Furthermore, Daly (2020) argued that the Government purposefully removed themselves from the responsibility for the management of care homes as 'its policies towards the care sector and care homes would be less important and politically damaging than those for the NHS' (p. 985). The Government's policies prior to, and during the pandemic were inextricably rooted in a neoliberalist ideology and were thus oriented around the economy. Therefore, while they discursively centred vulnerability, their actions centred the economy.

This vulnerability was discursively equated to inevitability. The deaths of the elderly were treated as expected. They were tied into the general discourse of inevitability in which the Government distanced themselves from responsibility for the consequences of the pandemic. Specifically in relation to the elderly and care homes, the repetition of the significance of vulnerability served as an explanation for the high numbers of deaths within these demographics without implicating policy failures or inadequacies in the healthcare or care home sectors in general.

Within neoliberal biopolitics, healthcare and care home policy is left to the free market, and thus decisions are oriented around the economy, often to the detriment of the quality or accessibility of care (McGregor, 2001). Furthermore, those who exist further away from the centre of the normative curves around which biopolitical governance is oriented are more vulnerable to the negative consequences of this, as was evidenced in the disproportionate deaths of POC. Regarding those in

care homes, the effect of this compounded with a legitimate biological vulnerability to result in extremely high numbers of deaths in these institutions. This vulnerability was framed within the narrative of inevitability thus working to protect the Government from responsibility for these deaths by positioning them as inevitable consequences of the virus that were outside of their control.

The Collective War

Despite this manifestation of inequality, it was found that the discourse frequently drew on narratives that promoted collectivist ideologies. Collectivism is oriented around the good of the group whereas individualism promotes the good of the individual. The UK traditionally operates within an individualistic framework, therefore the collectivist narratives prominent during the pandemic were a deviation from the norm (Marginson, 2020). Biopolitics and collectivism do not traditionally align in their ideologies as biopolitics is inextricably tied to capitalism and neoliberalism, both inherently individualistic (Lynch & Kalaitzake, 2020).

Exploration of the text through word frequency queries highlighted a centring of the collective. It was found that, across the entire sample, the word *'people'* was the single most common word. This remained the case when analysed monthly and when broken down to either only statements or press conferences. Furthermore, collectivist ideology was found to be invoked frequently, and in two primary capacities: it was repeatedly stated that everyone (i.e., the public) shared responsibility in eradicating the virus. This was supported by the accompanying narrative that the public should be following the rules to protect the community – people other than themselves. For example:

'and even if you think you are personally invulnerable, there are plenty of people you can infect and whose lives will then be put at risk' (22nd March 2020).

Furthermore, a text search query was carried out on the entire dataset in NVivo, searching for the words *'responsibility'* and *'responsible'*. It was found that the Government specifically referenced the public's responsibility in dealing with the pandemic sixteen times using either word (eleven for the

former and five the latter). The word '*duty*' also appeared twenty times. These direct references were further supplemented by additional statements that did not use these words specifically, such as the one included above.

A collectivist narrative was also furthered by the Government's use of pronouns. '*We*' was frequently used to emphasize a sense of shared experience, of togetherness. Phrases such as '*we grieve*' and '*we mourn*' were used often. Specifically, through a text search query it was found that '*we grieve*' appeared seven times and '*we mourn*' fifteen.

Integrated into and expanding on this narrative of collectivism was a prevalence of war language and signifiers, a feature also noted by Horton (2021):

Politicians often deployed war-like language...War metaphors carry huge emotional force. They are widely understood by the public. Words of war convey a sense of threat, urgency and risk. They suggest a battle with an evil enemy. The stakes are high. Sacrifices will have to be made. But war metaphors carry their own risks... (p. 60)

It was noted in the first pilot study that war signifiers were a prominent feature of the discourse. Therefore, during the main CDA, a specific node for war and conflict was created¹¹. This node functioned as a central hub through which to access the wider context of how and when this narrative had been employed. To further explore the node, a word frequency search was carried out on the war node created for the PM statements¹². Subsequently, a text search query was carried out across the entire sample on the two most commonly used words within the war node to identify any trends or patterns in this narrative. The word frequency query on the war node found that the two most frequently used words were '*fight*' and '*together*', each appearing nineteen times. When analysed

11 Language related to fighting, violence, or confrontation were initially those coded. Later, this was expanded to include patriotic language according to the findings of Benziman (Benziman, 2020).

12 Word frequency queries were not carried out on the nodes from the press conferences analysed as their samples were too small for any significant numerical results to be obtained.

across the entire sample it was found that the frequency of the word '*together*' was consistently higher than that of '*fight*'.

The primary context within which war language was employed was inciting togetherness. Specifically, this was centred around a collective suffering and a uniting against a common enemy. The narrative of collective suffering in this context was oriented around the lockdown restrictions and the lack of access to normality rather than targeted towards the suffering of those who had lost loved ones¹³. Furthermore, notions of Britishness were prominent and commonalities as a nation emphasised.

Findings by Benziman (2020) concur with the finding that war language was a prominent feature of the discourse of the COVID-19 pandemic¹⁴. They identified key different 'themes' within this:

1. Describing it as a war
2. We have a plan¹⁵
3. Patriotism: Isolated we stand, uniting together from a distance
4. Supporting our troops, medical teams as heroes
5. Between the global and the local – everyone is fighting together but we are doing a better job

Examples of each of these were found in the sample of this study and contributed to the narrative in a complex and inter-related way.

By 'describing it as a war', the parameters and expectations of behaviour and consequences were established within this framework. A key expectation associated with war, and thus by proxy this pandemic, is the inevitability of casualties (Milla, et al., 2019; Rouhana & Bar-Tal, 1998). This is another example in which inevitability underpins the discourse and functions to distance the Government from

¹³ The loss of loved ones was variously mentioned however not in this context.

¹⁴ Their study specifically focused on Boris Johnson and Donald Trump in March 2020 so cannot be generalised to the entirety of the sample used in this study.

¹⁵ While examples of it were found in the samples, the 'we have a plan' theme will not be discussed here as it is not relevant to the narrative of collectivism.

the consequences of the pandemic and their actions within it. A constructed expectation that casualties are an inevitability conveys that these deaths were always going to happen, no matter what the Government did or did not do.

By using war and conflict signifiers to construct an expectation of inevitable casualties, the Government distracted from the inequality that manifested in the effects of the pandemic on different groups, including POC and the elderly. In contrast, deaths of, or potential consequences for, those who are afforded more value within society, particularly young people in this instance, were given more importance and treated as noteworthy. The inevitability of casualties was specifically applied to those whose bodies were not valued. When understood in conjunction with the hierarchisation of value placed on bodies and their subsequent differential experiences of the pandemic, the expectation of casualties worked to deindividualize deaths. This served to distract from the systemic and institutional inequalities that were exacerbated by the pandemic and resulted in disproportionately high numbers of deaths amongst certain groups within society. War disproportionately affects groups who are otherwise oppressed as these groups are afforded the least protections (Bircan, et al., 2017) and this was replicated during the pandemic (Chen & Wang, 2021; Nassif-Pires, et al., 2020; Patel, et al., 2020). Given the problematic nature of war in relation to inequality, it was a dangerous precedent to set, and one that was fulfilled.

‘Patriotism’ and ‘between the global and the local’ both draw on the concept of the nation. The consequences of this regarding the role of the Government were discussed in the previous chapter. The focus on the nation also has implications for the constructed role of the people; it promotes a narrative of togetherness and of a shared responsibility. It does this by constructing a feeling of community by emphasising national boundaries and positioning ‘us’ as better than ‘them’. Throughout the sample there are references to Britishness and certain characteristics are assigned to the public by virtue of their Britishness:

‘the response of the British public to disasters and emergencies is extraordinary’ (3rd March 2020)

'freedom-loving instincts of the British people' (21st March 2020)

'the perseverance of the British public' (27th April 2020)

A text search query found that the word *'British'* appeared two-hundred-and-fifty-two times, indicating the frequency with which they invoked imagery of the nation. In conjunction with the wider narrative of collectivism, this works to construct the nation as the community that the public was being implored to act in the best interest of.

There then arises a tension between this concept of the nation as the community to be protected and a true collectivism. The construction of borders around the target community is inherently exclusionary. Prioritising those who are considered British necessarily means that those deemed to be outside of this are not afforded the same protections. This is an inevitably problematic premise when operating within a society with entrenched racism, as the UK is. There are barriers constructed by institutions, social interactions, and historical contexts that render certain individuals residing within the borders of the UK as outsiders and therefore this narrative is inherently dangerous to them as they are not afforded protection within it.

Finally, the notion of 'supporting the troops' was another prominent feature of the Government's discourse. From the repeated thanking of the *'frontline workers'*, to the Clap for Carers campaign, the NHS rainbows displayed in windows nationwide, and the blue badges of honour awarded to the critical care workers, the Government repeatedly discursively praised those working through the pandemic. While many across the nation rallied behind these efforts with full vigour, these campaigns also came under significant fire for their performativity (Woods & Skeggs, 2020). Horton (2021) stated that 'the Government's injunction to celebrate carers was tinged with hypocrisy' (p. 135). This was at least in part due to the extensive cuts and lack of financial support that the NHS have experienced over the past ten years under the Conservative Government (Horton, 2021; Pollock, et al., 2011; Speed, 2016; Woods & Skeggs, 2020).

The implications of the war imagery and the discord between the discursive support and the actions of the Government render the Government's 'support' a problematic and potentially dangerous narrative. The healthcare industry (notably NHS workers and care workers) was repeatedly described by the Government as the '*frontline*'; a text search query across the entire sample found that the word itself appeared one-hundred-and-eighteen times in total. Further analysis on the wider linguistic context of these references found that it was exclusively used to describe the health and social care sector and was such a prominent feature of the discourse that the word '*frontline*' came to be used in place of 'health and social care sector' or any equivalent. In addition to the inevitability of death, this narrative constructed a very specific idea of the role of healthcare workers in the pandemic. They were positioned as the soldiers fighting in the war against COVID-19.

No war, however, is complete without its heroes, and the praise and thanks afforded to the healthcare workers built a narrative of the heroism around the '*frontline workers*'. It reframes the inevitability of the deaths of some '*frontline workers*' and uses it to celebrate the sacrifice of these heroes. A discourse analysis carried out by Mohammed et al. (2021) on the nurse as hero narrative¹⁶ found that it positioned them as a 'necessary sacrifice' as well as perpetuating pre-existing power dynamics that disempower the nurses to seek out or achieve better working conditions. This draws on the narrative of inevitability as it is understood that some number of soldiers will inevitably be lost but that their sacrifice is for the good of the rest of us, thus they are constructed as heroes.

Mohammed et al. (2021) came to three key conclusions regarding the implications of the nurse as hero narrative. Firstly, in alignment with the previous point, they argue that this narrative normalises the risk taken by nurses. Secondly, they state that it functions as a mechanism of disciplinary power over the public by acting as an 'archetype for how the public should think and behave in COVID-19' (p. 2). Rather than an act of discipline, this can also be understood as a mechanism of governmentality.

¹⁶ While this study is specifically about nurses, here its conclusions will be used as a framework to discuss the implications regarding healthcare workers in general.

The healthcare worker is discursively positioned as the model for how one should behave, thus they are used to define the parameters of behaviour for which people will be rewarded, the reward being that they continue to be recognised as a valuable subject within society. This is not an example of disciplinary power in which behaviour is controlled by the presence of a threat of tangible punishment, rather it works to control behaviour by defining the parameters of desirable (and non-desirable) behaviour and relies on compliance from the population to work.

Finally, they argue that this narrative 'is a tool for politicians, leaders, and decision-makers to publicly demonstrate their support for nurses while concealing the preservation and extension of existing power relations' (p. 2). This can be seen in the dichotomy between the words and actions of the Government. The shortage of personal protective equipment (PPE) in the healthcare industry, and the subsequent handling of this problem, is an example of this. In the first few months of the pandemic, there was a nationwide, and a worldwide, shortage of PPE (Burki, 2020; Park, et al., 2020; Shrivastava & Shrivastava, 2020). PPE is necessary for healthcare workers to protect themselves against the virus as best they can whilst working in very close proximity to it. Healthcare workers were unable to access adequate supplies to work safely, and thus were required to continue working whilst using inadequate equipment or re-using equipment more than is recommended (Hoernke, et al., 2021). Sourcing PPE was framed as a logistical challenge. The Government, on multiple occasions, listed the numbers of PPE items they had sourced and provided. They did not acknowledge responsibility for the shortages, nor did they give attention to the increased danger for frontline workers.

Furthermore, the Government's actions to rectify the problem were indicative of a disregard for the welfare of those working these jobs. An investigation by Transparency International UK found possible corruptions in the allocation of contracts, including those for PPE, by the Government during the pandemic. They found two primary issues with the contracts: 1; they were 'high-risk' and 2; there was a lack of official reporting of these contracts (Transparency International UK, 2021). According to them, 'critical safeguards designed to prevent corruption were suspended without adequate

justification’ and ‘the way the UK Government handled bids for supplying personal protective equipment (PPE) and other COVID-19 response contracts appears partisan and systemically biased in favour of those with political access’ (Transparency International UK, 2021). They also highlight the procurement of PPE as an area of particular concern; ‘Twenty-four PPE contracts worth £1.6 billion were awarded to those with known political connections to Conservative Party.’ (Transparency International UK, 2021). The Government awarded contracts to companies based on political affiliations and many of them had no experience manufacturing the necessary products. This decision benefited those making it and was detrimental to those on the ‘*frontline*’ as these companies were inexperienced in the field. They were untested in their ability to consistently and efficiently provide PPE that would meet health and safety standards.

This is an example of Government decision-making that prioritised economic gain over the people – lack of PPE is dangerous to everyone, not just healthcare workers, as it means that the virus is likely to be spread to more people. It is indicative of a low value placed on the bodies of healthcare workers by the Government in the pandemic. The decision to award contracts to inappropriate companies based on political affiliation was a financially motivated one. It was rooted in individualistic ideology as they prioritised individual profit and power over the health and safety of the population. In this action, the bodies of healthcare workers, the soldiers of this fight (as well as indirectly many others), were sacrificed in the pursuit of economic gain.

Both this study and Mohammed et al. (2021) found that healthcare workers, in being held up as heroes, were positioned as bodies to be inevitably sacrificed in the fight against COVID-19. This reveals the collectivism narrative to be hollow; the public are being asked to modify their behaviour for the purpose of protecting others, particularly the NHS, and yet the Government’s own actions do not align with this sentiment. This narrative was utilised by the Government to construct a certain image of the pandemic, rather than an ideology upon which their rationale for decision-making was based. This study argues that war language was a form of collectivist ideology. Fundamental to this discourse was

the underlying notion of the nation, together, 'us' vs. the '*invisible killer*' (16th March 2020 and more). By emphasizing the role that everyone played in the pandemic, and making it something that was being faced by the collective, responsibility for the outcome was dispersed amongst everyone rather than being focused on the Government.

Conclusion

Inequality is a necessary feature of biopolitical capitalism and neoliberalism and manifested throughout the pandemic. Those who are afforded less value within this system are inherently more vulnerable to crisis. The Government constructed a narrative in which the health of the population was positioned in opposition to that of the economy. The tension between health and the economy extended beyond the explicit narrative. It manifested in the discord between the Government's proclamations to protect the people, supported by a narrative of collectivism, and the narrative in which casualties were constructed as an inevitability, supported by Government actions that failed to protect vulnerable and marginalised groups as well as the healthcare workers who were positioned as the soldiers of the war. It engaged with the tactic of inevitability and functioned to distance the Government from the responsibility for deaths during COVID-19. The war narrative through which collectivist ideology was employed not only contributed to this notion of inevitable casualties, but it was inherently exclusive due to its roots in nationalism that define an 'us' and 'them' and in which those considered outside of Britishness are positioned as 'them'. This also worked in conjunction with the use of global comparisons explored in the previous chapter.

Conclusion

While the roles of science, the Government, and the people, and the discursive practices constructing each, could have been explored individually in relation to governmentality, to do so would be to fail to encapsulate the complexities and depth of how conduct of conduct functions as a mechanism of control. This form of governance is not concerned with any singular power struggle or discursive construction, rather it is the totality of these, the cumulation, that shapes the landscape of society. Governmentality functions by existing in, and managing, every aspect of society to subtly elicit self-governance. Therefore, the findings and analyses of this study must too be understood as a wider system, one that will be addressed in this conclusion. The discourse in its entirety functioned as a cohesive system and was integral to the Government's strategy of control over the population. It worked together to construct a specific image of the pandemic, and within it the role of '*the science*', the Government, and the people.

'*The science*' was the foundation of the Government's approach. Its constructed objectivity allowed it to function as a legitimising authority to the Government's discourse, working to render it as truth. This is essential to governmentality as truths are the foundation of conduct of conduct; they direct

self-governance. Therefore, their use of '*the science*' allowed the Government to construct a reality in such a manner as to control the population without reverting to explicitly authoritarian methods. Furthermore, it was discursively positioned as the weapon with which the virus would be fought. This protected the Government by acting as a buffer between them and the virus. As a biological agent, COVID-19 has agency outside of the bounds of power. While it is not all-powerful, its very existence exposes the limitations of power and thus threatens the legitimacy of Government control. The Government's narrative of '*control the virus*' worked to combat this. The construction of '*the science*' was fundamental to their ability to do so as it legitimised the notion that there was a means by which the Government's power could be exerted on the virus. Furthermore, it protected the Government from the threat to its legitimacy posed by the virus as, in instances when the virus could not be controlled, it was the limitations of '*the science*' that were exposed, not those of the Government.

This maintenance of their position of power is essential to their ability to exert control over the population within the framework of governmentality. Conduct of conduct requires public compliance; that the population be willing participants in their own governance (Foucault, 2019). Instances in which the Government are perceived to not be in control expose the Government's fallibility, and thus can undermine the public's confidence in them, potentially leading to a disillusioned, disobedient, or rebellious population. Therefore, the Government's use of '*the science*' as a buffer between themselves and the virus was necessary for governance within the framework of governmentality. The perceived legitimacy of the Government and its position of power is essential for conduct of conduct.

With this protection, the Government was able to implement a narrative of inevitability without reinforcing the virus's power over it, as it instead implicated '*the science*'. This narrative was employed on numerous occasions throughout the discourse. It repackaged the agency of the virus from something with potentially damaging implications for their position of power, into a narrative that distanced them from responsibility within the pandemic. The constructed binary between health and the economy rendered the simultaneous protection of both impossible. Furthermore, the emphasis

on the vulnerability of the elderly and the war signifiers constructed expectations of death and suffering that were presented as consequences over which the Government did not have agency.

These inevitabilities also worked to influence public expectations. They shaped the discursive landscape of the pandemic, thus attempting to direct the public's behaviour. In rendering the protection of both impossible, the health vs. economy binary constructed an expectation that one would always be suffering. This attempted to shape how the public understood the situation. High death rates could be attributed to a decision to protect the economy, and problems with the economy could be perceived as an inevitable consequence of measures to protect the health of the population. They were consequences for which the Government could not be held responsible, despite them being two primary duties of government. Therefore, inevitabilities were able to be employed to discursively distance the Government from real or perceived fallibility, thus further protecting their position of power.

Self-governance was also induced through narratives that acted on, and directed, the landscape of society. The dispersal of responsibility through the collectivist narrative worked to induce an understanding that the behaviour of each individual affects everyone. This encourages intra-community surveillance (Foucault, 1977). Through this, the Government can exert control over the population regardless of physical presence. There is an underlying feeling of being watched and a community expectation that exerts control and directs behaviour. The narrative of collectivism and shared responsibility appeals to this mechanism of control, crystallising it and bringing it to the fore.

The phrasing and use of apologies and personalisation further contributes to this as it engage with the emotions of humanity. Johnson did not apologise for making mistakes, rather he apologised for the situation – a situation that had already been constructed as out of his control, an inevitable consequence of the virus. According to Weiner's (2006) attribution theory, this discourse attempts to garner sympathy from the public. The public are more likely to be forgiving of mistakes if they are drawn into the humanity of the speaker. This attempts to further ensure compliance when they are

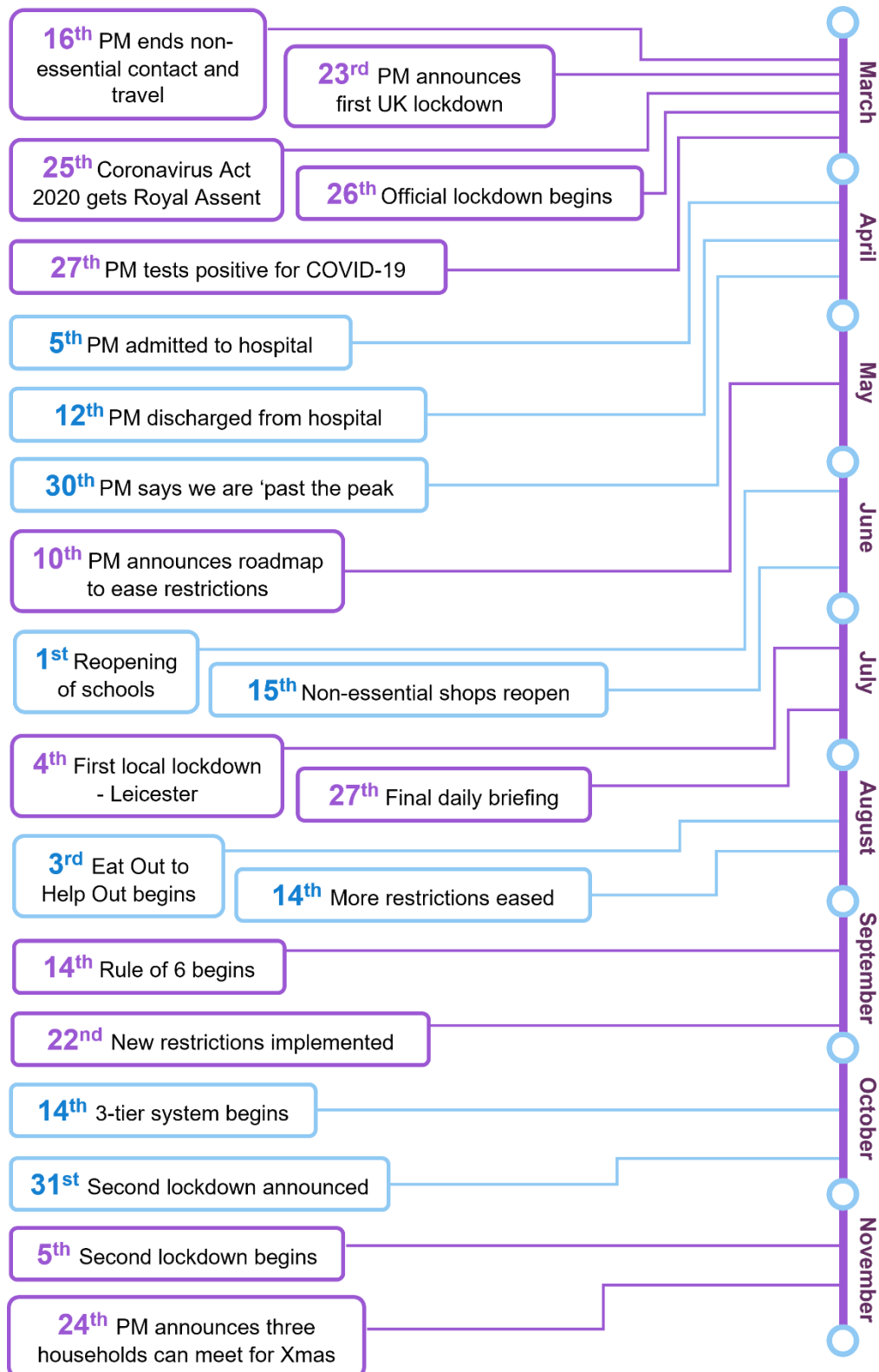
confronted with apparent Government mistakes.

The Government's use of certainties – dependent on their narrative of '*the science*' – shaped the landscape by discursively limiting the range of options available. If information is understood to be fact, with no scope for interpretation or differing opinions, then there exists a much more contained relationship between that information and the behaviour it elicits. Without this flexibility, the public's options become limited to agreement or disagreement. Within the framework of '*the science*', disagreement is not constructed to be a legitimate position. Therefore, to dissent is to position oneself outside of the norm. To do so would be to compromise one's position within the hierarchies of society that exist within the normative curves around which biopolitics operates. Here arises the pressure on individuals existing in a system that is operating around the population. One's proximity to the norm defines one's value within society. Those who exist in the margins are not afforded the protections or status of those who are able to embody these norms. As such, individuals are directed to self-govern towards the desirable norm of the population.

The capitalist underpinnings of governmentality and biopolitics build these hierarchies around the economy, rendering bodies valuable insofar as they can contribute to it. The population, particularly those on the '*frontline*', were enlisted as soldiers, fighting the virus. Furthermore, the protection of bodies of less value within this system was positioned against that of the economy, their deaths constructed as an inevitable consequence of the necessary measures to ensure a continued strong economy. The discourse simultaneously worked to shape society within the pandemic to direct the population towards the protection of the economy, whilst retaining their own position of power and legitimacy. '*The science*' legitimised the Government's discourse, working to encourage compliance, whilst also shielding the Government from the implications of positioning the population as the soldiers protecting the economy. In doing so, the mechanisms of control examined in this article exceeded that which could be considered in the interest of the population, instead working in the interest of the Government. In the push and pull between the responsibility of the Government to

protect the population from public health risks and individual's rights to freedom and autonomy, the Government have prioritised protecting their position of power.

Appendix 1: Coronavirus Timeline UK



Appendix 2: Pilot Study Samples

Pilot Study 1

- Boris Johnson's televised national address announcing the first lockdown – 23rd March 2020
Available: <https://www.youtube.com/watch?v=vJycNmK7KPk> [accessed 02/12/20]
- Open letter from the British Medical Journal to the Government regarding a potential second wave – 24th June 2020
Available: https://www.bmj.com/content/369/bmj.m2514?ijkey=be2cb6d04c80228296c9a692ae2caa129fbc9860&keytype=tf_ipsecsha [accessed 04/12/20]
- Hands, Face, Space; Government advertising campaign – September 2020
Available: <https://www.youtube.com/watch?v=5IGqADEyxxw> [accessed 04/12/20]

Pilot Study 2

- Government Press Conference (3rd March 2020)
Available: <https://www.youtube.com/watch?v=zdvEQb8jUXw&t=1654s> [accessed 20/01/21]
- PM Statement – (23rd March 2020)

This was also included in the first pilot study. For this it was re-analysed using the new methodological parameters. Source as cited above.
- PM Statement – (10th May 2020)

Available: <https://www.youtube.com/watch?v=P8HC5sOHzus> [accessed 24/01/21]

Appendix 3: Main Sample Source List

PM Statements and Other Statements available: <https://www.gov.uk/coronavirus>

Web addresses provided for Press Conferences

PM Statements	
<i>9 March 2020 – 16 June 2020</i>	<i>29 June 2020 – 2 December 2020</i>
Prime Minister's statement on coronavirus (COVID-19): 9 March 2020	Prime Minister's statement on coronavirus (COVID-19): 29 June 2020
Prime Minister's statement on coronavirus (COVID-19): 12 March 2020	Prime Minister's statement on coronavirus (COVID-19): 3 July 2020
Prime Minister's statement on coronavirus (COVID-19): 16 March 2020	Prime Minister's statement on coronavirus (COVID-19): 31 July 2020
Prime Minister's statement on coronavirus (COVID-19): 18 March 2020	Prime Minister's statement on coronavirus (COVID-19): 9 September 2020
Prime Minister's statement on coronavirus (COVID-19): 22 March 2020	Prime Minister's statement on coronavirus (COVID-19): 22 September 2020
Prime Minister's statement on coronavirus (COVID-19): 23 March 2020	Prime Minister's statement on coronavirus (COVID-19): 30 September
Prime Minister's statement on coronavirus (COVID-19): 25 March 2020	Prime Minister's statement on coronavirus (COVID-19): 12 October 2020
Prime Minister's statement on coronavirus (COVID-19): 30 April 2020	Prime Minister's statement on coronavirus (COVID-19): 16 October 2020
Prime Minister's statement on coronavirus (COVID-19): 10 May 2020	Prime Minister's statement on coronavirus (COVID-19): 20 October 2020
Prime Minister's statement on coronavirus (COVID-19): 11 May 2020	Prime Minister's statement on coronavirus (COVID-19): 22 October 2020
Prime Minister's statement on coronavirus (COVID-19): 24 May 2020	Prime Minister's statement on coronavirus (COVID-19): 31 October
Prime Minister's statement on coronavirus (COVID-19): 25 May 2020	Prime Minister's statement on coronavirus (COVID-19): 5 November 2020
Prime Minister's statement on coronavirus (COVID-19): 28 May 2020	Prime Minister's statement on coronavirus (COVID-19): 9 November 2020
Prime Minister's statement on coronavirus (COVID-19): 3 June 2020	Prime Minister's statement on coronavirus (COVID-19): 23 November 2020
Prime Minister's statement on coronavirus (COVID-19): 10 June 2020	Prime Minister's statement on coronavirus (COVID-19): 26 November 2020
Prime Minister's statement on coronavirus (COVID-19): 16 June 2020	Prime Minister's statement on coronavirus (COVID-19): 2 December

Other Statements

16 March 2020 – 17 April 2020	18 April 2020 – 13 May 2020
Controlling the spread of COVID-19: Health Secretary's statement to Parliament – 16 th March 2020	Foreign Secretary's statement on coronavirus (COVID-19): 16 April 2020
Chancellor of the Duchy of Lancaster statement on coronavirus (COVID-19): 27 March 2020	Communities Secretary's statement on coronavirus (COVID-19): 18 April 2020
Business Secretary's statement on coronavirus (COVID-19): 28 March 2020	Chancellor's statement on coronavirus (COVID-19): 20 April 2020
Communities Secretary's statement on coronavirus (COVID-19): 29 March 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 21 April 2020
Foreign Secretary's statement on coronavirus (COVID-19): 30 March 2020	Foreign Secretary's statement on coronavirus (COVID-19): 22 April 2020
Chancellor of the Duchy of Lancaster's statement on coronavirus (COVID-19): 31 March 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 23 April 2020
Business Secretary's statement on coronavirus (COVID-19): 1 April 2020	Transport Secretary's statement on coronavirus (COVID-19): 24 April 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 2 April 2020	Home Secretary's statement on coronavirus (COVID-19): 25 April 2020
Chancellor of the Duchy of Lancaster statement on coronavirus (COVID-19): 4 April 2020	Environment Secretary's statement on coronavirus (COVID-19): 26 April 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 5 April 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 27 April 2020
Foreign Secretary's statement on coronavirus (COVID-19): 6 April 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 28 April 2020
Foreign Secretary's statement on coronavirus (COVID-19): 7 April 2020	Foreign Secretary's statement on coronavirus (COVID-19): 29 April 2020
Foreign Secretary's statement on coronavirus (COVID-19): 9 April 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 1 May 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 10 April 2020	Chancellor of the Duchy of Lancaster's statement on coronavirus (COVID-19): 3 May 2020
Home Secretary's statement on domestic abuse and coronavirus (COVID-19): 11 April 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 4 May 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 12 April 2020	Foreign Secretary's statement on coronavirus (COVID-19): 5 May 2020
Foreign Secretary's statement on coronavirus (COVID-19): 13 April 2020	Communities Secretary's statement on coronavirus (COVID-19): 6 May 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 15 April 2020	Transport Secretary's statement on coronavirus (COVID-19): 9 May 2020

Other Statements

12 May 2020 – 31 May 2020	1 June 2020 – 30 November 2020
Business Secretary's statement on coronavirus (COVID-19): 12 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 1 June 2020
Housing Secretary's statement on coronavirus (COVID-19): 13 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 2 June 2020
Transport Secretary's statement on coronavirus (COVID-19): 14 May 2020	Transport Secretary's statement on coronavirus (COVID-19): 4 June 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 15 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 5 June 2020
Education Secretary's statement on coronavirus (COVID-19): 16 May	Health and Social Care Secretary's statement on coronavirus (COVID-19): 8 June 2020
Business Secretary's statement on coronavirus (COVID-19): 17 May 2020	Business Secretary's statement on coronavirus (COVID-19): 9 June 2020
Foreign Secretary's statement on coronavirus (COVID-19): 18 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 11 June 2020
Environment Secretary's statement on coronavirus (COVID-19): 19 May 2020	Transport Secretary's statement on coronavirus (COVID-19): 12 June 2020
Digital, Culture, Media and Sport Secretary's statement on coronavirus (COVID-19): 20 May 2020	Foreign Secretary's statement on coronavirus (COVID-19): 15 June 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 21 May 2020	Digital, Culture, Media and Sport Secretary's statement on coronavirus (COVID-19): 17 June 2020
Home Secretary's statement on coronavirus (COVID-19): 22 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 18 June 2020
Transport Secretary's statement on coronavirus (COVID-19): 23 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 22 June 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 26 May 2020	Digital, Culture, Media and Sport Secretary's statement on coronavirus (COVID-19): 9 July 2020
Health and Social Care Secretary's statement on coronavirus (COVID-19): 27 May 2020	Business Secretary's statement on coronavirus (COVID-19): 12 November 2020
Digital, Culture, Media and Sport Secretary's statement on coronavirus (COVID-19): 30 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 16 November 2020
Communities Secretary's statement on coronavirus (COVID-19): 31 May 2020	Health and Social Care Secretary's statement on coronavirus (COVID-19): 30 November 2020
Dame Louise Casey's statement on coronavirus (COVID-19): 31 May 2020	

Press Conferences

<i>Date</i>	<i>Available</i>
3 rd March 2020	https://www.youtube.com/watch?v=zdvEQb8jUXw&t=1654s
16 th March 2020	https://www.youtube.com/watch?v=Eauc67Ba-8k
18 th March 2020	https://www.youtube.com/watch?v=bQ9Y1y9MyVk
22 nd March 2020	https://www.youtube.com/watch?v=Qzxy58z4EY
25 th March 2020	https://www.youtube.com/watch?v=3Kjc7R1yGMc&t=1s
29 th March 2020	https://www.youtube.com/watch?v=UtlDpg5UTPE
1 st April 2020	https://www.youtube.com/watch?v=t5y4jlrDCdM
3 rd April 2020	https://www.youtube.com/watch?v=XGlg9E1xfls
5 th April 2020	https://www.youtube.com/watch?v=olwmWhiohlE
6 th April 2020	https://www.youtube.com/watch?v=l-XVkvloWQY
7 th April 2020	https://www.youtube.com/watch?v=vOqBiQp2_Q
8 th April 2020	https://www.youtube.com/watch?v=fAYoHd7wdsU
9 th April 2020	https://www.youtube.com/watch?v=18QhurjfnYs
10 th April 2020	https://www.youtube.com/watch?v=B6Lb4Ud7D50
11 th April 2020	https://www.youtube.com/watch?v=Vu_sRXqemxg
12 th April 2020	https://www.youtube.com/watch?v=L4Kjbw8i8BQ

Press Conferences

<i>Date</i>	<i>Available</i>
14 th April 2020	https://www.youtube.com/watch?v=ANYGCXpU9hM
16 th April 2020	https://www.youtube.com/watch?v=DFB9JKJDjmQ&t=122s
20 th April 2020	https://www.youtube.com/watch?v=M44Zo4FR2es
21 st April 2020	https://www.youtube.com/watch?v=yMjCih8GqLg
22 nd April 2020	https://www.youtube.com/watch?v=UWchvWGVZqc
23 rd April 2020	https://www.youtube.com/watch?v=d3ielwP4FKg&t=33s
27 th April 2020	https://www.youtube.com/watch?v=JCi87m622oE
28 th April 2020	https://www.youtube.com/watch?v=Tccer6BFKDw&t=423s
29 th April 2020	https://www.youtube.com/watch?v=69O-vVjErwQ
1 st May 2020	https://www.youtube.com/watch?v=JJY3AxpDG-0
4 th May 2020	https://www.youtube.com/watch?v=4CJQYD5qCNk
5 th May 2020	https://www.youtube.com/watch?v=oQkw-46dwas
6 th May 2020	https://www.youtube.com/watch?v=IPpuB99PGbc
7 th May 2020	https://www.youtube.com/watch?v=feyWmKcRqPc
8 th May 2020	https://www.youtube.com/watch?v=Y03jlb3bHxo
11 th May 2020	https://www.youtube.com/watch?v=a1cHvKxYA4
14 th May 2020	https://www.youtube.com/watch?v=ETcVpT16M1A
15 th May 2020	https://www.youtube.com/watch?v=vM-2DsyzsYQI

Press Conferences

<i>Date</i>	<i>Available</i>
18 th May 2020	https://www.youtube.com/watch?v=2VBq-obTRFY
19 th May 2020	https://www.youtube.com/watch?v=GyQWgvyBgDY
20 th May 2020	https://www.youtube.com/watch?v=99ERlmW9OU
21 st May 2020	https://www.youtube.com/watch?v=WE6aDXWUy7s
22 nd May 2020	https://www.youtube.com/watch?v=3fbsciR8As8
25 th May 2020	https://www.youtube.com/watch?v=qBPY1lG2lQg
28 th May 2020	https://www.youtube.com/watch?v=WblfO5bKwWY
3 rd June 2020	https://www.youtube.com/watch?v=zq8tXmwzpE4
8 th June 2020	https://www.youtube.com/watch?v=y1CowfQklqU
16 th June 2020	https://www.youtube.com/watch?v=x9gdDvZW3v0
19 th June 2020	https://www.youtube.com/watch?v=SF21GEfAg8c
22 nd June 2020	https://www.youtube.com/watch?v=H6exZAFaxO0
9 th July 2020	https://www.youtube.com/watch?v=-NV9e76l4iQ
31 st July 2020	https://www.youtube.com/watch?v=wV8IRh5VcvQ
12 th October 2020	https://www.youtube.com/watch?v=KXF5N36mQhg
20 th October 2020	https://www.youtube.com/watch?v=Y0_XmqUSN2c
9 th November 2020	https://www.youtube.com/watch?v=KBJEqnpQ1DE
26 th November 2020	https://www.youtube.com/watch?v=OHfC5BG8f6w

Appendix 4: Sample Distribution

Month	Prime Minister's Official Statements	Official Statements by Other Government Representatives	Press Conferences by PM and Others	Total
March	7	6	7	20
April	1	25	19	45
May	5	23	16	44
June	4	12	5	21
July	2	1	2	5
August	0	0	0	0
September	3	0	0	3
October	5	0	2	7
November	4	3	2	9

Appendix 5: Node Origins

Based on Pilot Study	To Address Research Question	Added During Coding
Explanation of the Virus	Government Committees	Condolences and Apologies
Global Comparisons	Justification	Current Action
NHS	Key Phrases and Descriptors	Current Advice or Rules
Slogans	Leaders and Government Officials	Current Situation
Stats and Numbers	Priorities and Goals	Description of Public Experience
War and Nationalism, Patriotism	The Role of Science	Future Government Actions
-	Scientific Opinion	Future Situation
-	-	Past Actions
-	-	Past Situation
-	-	Praise and Thanks
-	-	Vaccine

Appendix 6: Node Parameters

Node	Parameters
Condolences and Apologies	Any instance of the words 'sorry' or 'apologise' (or any variation). Also any statement in which remorse was conveyed.
Current Action	An action the government were carrying out at the time in relation to the pandemic.
Current Advice or Rules	Any mention of advice or rules regarding the pandemic.
Current Situation	Any description of the current situation.
Description of Public Experience	Any statement which described the situation as it was being experienced by the public (not just the individual speaking).
Explanation of the Virus	Any statement or descriptor of what the virus is or how it works.
Future Government Actions	Any mention of actions which are intended to be carried out but have not yet been.
Future Situation	Any prediction of the situation in the future.
Global Comparisons	Any mention of a country other than the UK (including Wales, Scotland, Northern Ireland, and England) or any continent.
Government Committees	Any mention of an official government committee.
Justification	Any statement justifying an action or decision by the government.
Key Phrases and Descriptors	This node was not used as it was deemed to be too vague and subjective. It was made defunct shortly after the beginning the main project.

Node	Parameters
Leaders and Government Officials	Any mention of a leader (including heads of committees and boards) or a government official.
NHS	Any mention of the NHS.
Past Actions	Any action that had been carried out by the government before the time of speaking.
Past Situation	Any description of the situation before the time of speaking.
Praise and Thanks	Any instance of the word 'thank' (or any variation). Also any statement in which gratitude was conveyed.
Priorities and Goals	Any statement describing any aim of the government.
Role of Science	Any statement describing how science is being used or is contributing to dealing with the pandemic.
Scientific Opinion	Any statement of scientific opinion, whether it be directly from a scientist or the use of one by a non-scientist.
Slogans	Any use of the government's slogans as they were at the time of speaking.
Stats and Numbers	Any reference to statistics of the pandemic.
Vaccine	Any mention of the word 'vaccine' (or any variation).
War and Nationalism, Patriotism	Any statements using war or Britishness signifiers, including violent or battlefield imagery and appeals to traits held by the public on account of their Britishness.

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