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ABSTRACT

This paper examines journalistic role performance in coverage of the COVID-19 pandemic, based on a content analysis of newspaper, television, radio and online news in 37 countries.

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We test a set of hypotheses derived from two perspectives on the role of journalism in health crises. Mediatization theories assume that news media tend to sensationalize or to politicize health crises. A contrasting perspective holds that journalists shift toward more deferential and cooperative stances toward health and political authorities in a health crisis, attempting to mobilize the public to act according to the best science. Hypotheses derived from these perspectives are tested using the standard measures of journalistic roles developed by the Journalistic Role Performance Project. Results show that the deference/cooperation/consensus perspective is better supported, with media moving away from the Watchdog and Infotainment, and toward performance of the Service and Civic roles. We also explore differences in the pattern by country.

KEYWORDS

Journalism; journalistic roles; health news; health crisis communication; COVID-19; content analysis

The COVID-19 pandemic represents a global crisis of extraordinary scale, with profound impacts on people and institutions in every corner of the globe. In the first two years from its beginning at the end of 2019 official figures showed 5 million deaths worldwide, though demographic analyses suggest the true figure is 2–4 times higher (Adam 2022). The greatest global public health emergency in more than a century, the COVID pandemic has disrupted and transformed economic, social and political relations worldwide, with effects on human lives and on culture and society that will no doubt continue unfolding for decades.

The COVID pandemic is also a highly mediatized event. Journalistic coverage is massive in most of the world, and populations experience the pandemic as a public event to a significant extent through media representations, with potential profound implications both for individual's decisions about caring for their own health and for the wider impacts of the pandemic on culture and society. From the point of view of public health officials, the role of journalism and the media is critical. As Thomas Abraham, a WHO official at the time of the 2009 H1N1 influenza pandemic, put it,

a flu pandemic, or any infectious disease outbreak, very often you won't have any means of response except communication. Because if it's a new disease, there are no vaccines, no drugs, so all public health people can really do is communicate effectively . . . (quoted in Briggs and Hallin 2016, 133).

News media clearly played a key role in shaping the response of mass publics to public health recommendations, containment measures enacted by public officials, and the wider debates about social solidarity, civil liberties, personal responsibility and cultural meaning touched off by the pandemic. At the same time, the pandemic had substantial effects on journalism and the media, changing their working routines, increasing news consumption and audience engagement (Casero-Ripollés 2020; Nielsen et al. 2020; Van Aelst 2021), straining media economics and often worsening working conditions and changing relationships with other institutions.

What role did journalism actually play in informing audiences worldwide about the COVID pandemic? And how did this vary, depending on media systems, political conjunctures and the evolution of the pandemic in different societies? This paper takes advantage of a broad comparative content analysis of TV, radio, online and print news in 37 countries carried out by the second wave of the *Journalistic Role Performance* Project, whose sample

period happened to coincide with the first year of the COVID-19 pandemic, to shed light on these questions.

We focus particularly on a debate which runs through much of the literature on news coverage of public health crises between what we will call the “media hype/mediatization” and “deference to public health/sphere of consensus” perspectives. The former sees media’s role as mainly disruptive of public health communication, as journalists sensationalize public health threats and generate irrational fear, alarm and/or politicization. This perspective can be seen as related to the theory of mediatization, that stresses the commercial character of “media logic” and sees media logic as disrupting or displacing the logics of other social fields like politics or public health. A second perspective sees media as deferring to public health authorities as well as to political authorities during a health crisis.

Reporting Public Health Crises

Scholars have just begun to undertake research on the role of journalism and the media in the COVID-19 pandemic. In doing so, however, they build on a growing literature on journalistic practices and news coverage of epidemics and public health emergencies, which includes research on the AIDS epidemic, SARS, MERS, Avian Flu, “Mad Cow” disease and the 2009 H1N1 and 2014 Ebola epidemics. One important focus of this literature—and of public discussion about the role of journalism and the media in health crises—is the issue of sensationalism or “media hype.” Near the beginning of the 2009 H1N1 pandemic Jon Stewart satirized breathless television reports on *The Daily Show*, showing the animated maps television networks used to illustrate the spread of the virus and commenting, “six mild cases of the flu and you’re going to turn four million square miles bright red?” Two geographers, writing about the 2014 Ebola epidemic, write,

The volume, the speed, the breathlessness of the media coverage of Ebola in the United States, together with the often-times absurdity of the content of that coverage, has played a dramatic role in . . . shaping Americans’ (mis)conceptions of the threat of Ebola in the United States. . . (Finn and Palis 2015, 783).

Numerous works on news coverage of pandemics have echoed this theme over the years (Da Silva Madeiros and Massarani 2010; Dudo, Dahlstrom and Brossard 2007; Krishnatray and Gadekar 2014; Harding 2009). In the case of COVID-19, Wasserman et al. (2021) found a strong presence of “sensationalist” and “alarmist” narratives in South African newspapers, and Hase and Engelke (2021) observed frequent “fear-inducing” language in British newspapers. This argument connects with wider debates about the role of media in society, including the literature on mediatization, and we will take the “media hype” hypothesis as an entry point to formulate questions about journalistic performance in pandemic coverage, outlining two conflicting perspectives about how we might expect news media to act during a health crisis.

The mediatization perspective has by now developed a complex body of theory, which includes a number of competing interpretations. A central core of the mediatization perspective, however, has always been the idea that media institutions have become more autonomous and more central to social life in general, and that as they have, media logic or logics increasingly influence social discourse and practice (e.g., Mazzoleni and Schultz 1999). In many versions of mediatization theory media logic is understood as

primarily market-based, rooted in the imperative to build large audiences which provide revenue, prestige and power (Landerer 2013; Hjarvard 2013; see also Bourdieu 1996). This version of mediatization theory often considers media logic to be disruptive of the production of knowledge and opinion, and this view is echoed in the literature on sensationalism in coverage of public health emergencies.

There is also a second argument about pandemic news which can be related to mediatization theory, asserting that media tend to politicize health issues. This argument has been developed most fully by Marchetti (2010), who recounts the growing independence of health reporters in France and their increasing influence over the flow of health information, and illustrates this with the example of a tainted blood scandal which took place during the HIV epidemic, becoming highly politicized. Hart, Chinn, and Soroka (2020, 682), who examine politicization in COVID coverage, note that “biases in newsroom norms and the desire to draw audience attention to a story can lead to greater politicization of content.” The tendency for news media to politicize health issues thus could be related to the same commercial logic assumed to be manifested in sensationalism, but recent literature on mediatization recognizes that media logic is not singular, and the tendency to politicization could also be rooted in *professional* logics of journalism, including surveillance, norms of balance, and the desire to hold political leaders accountable.

Mediatization theory, in its fullest form, highlights the ways in which other social institutions are transformed by their interactions with media (not only journalism of course, but media and communication technology more generally). This study cannot examine the impact of mediatization on the practice of public health officials, political leaders and others. But it can examine key premises connected with the mediatization perspective about media practice during a health crisis.

Not all research on health crisis coverage has coincided in these findings of sensationalism or politicization rooted in media logics. Briggs and Hallin (2016) and Vasterman and Ruigrok (2013) found that while there were alarmist elements in coverage of the H1N1 pandemic, these reflected the media’s close adherence to the messaging of public health authorities, who sought to use media coverage to motivate containment practices in the mass public, and that these messages were balanced by assurances that health officials could manage the crisis. The work of medical sociologist Sanford Ungar (1998, 2008) is often cited in works about alarmist content news coverage of health crisis. Ungar does argue that message themes related to threat and alarm predominate in the early stages of an epidemic, though he does not attribute that message “package” particularly to the news media. He goes on to show that a “containment package” of more reassuring messaging begins to dominate in later stages, particularly when the pandemic threat becomes more proximate. Klemm, Das, and Hartmann (2016, 15; also Hilton and Hunt 2011) report some diversity of findings in a review of studies on H1N1, but that in general “the majority of studies found no evidence for media dramatization, but rather concluded that news reporting was factual and non-alarmist.” Hallin et al. (2020) also found that the level of politicization in H1N1 coverage was low, even in countries where political parallelism in the media is generally high. Brown, Yoo, and Johnson (2019, 815) found “substantially more neutral and panic-reducing” than alarmist coverage in newspapers during the Ebola epidemic. On COVID, while Hase and Engelke (2021) found extensive threat-related language in media, they also found strong focus on societal and individual measures of containment.

This second set of studies fits with the findings of Klemm, Das, and Hartmann (2019), based on interviews with Finnish and German journalists, that journalists' role conceptions shift during a health crisis toward mobilizing roles, focused on educating people about proper responses to the health threat, and from watchdog roles toward cooperation with authorities. This research suggests, in contrast with the mediatization perspective, that during a health crisis news media may act less autonomously, setting aside normal media logics and deferring to other social fields. It is compatible with literatures in sociology of medicine that stress the cultural authority of biomedicine, and, in a way that is parallel to the literature on mediatization, see biomedicine as exercising broad influence over other social fields (Clarke et al. 2003). During a health crisis, moreover, not only the role of biomedicine, but also the role of the state is expanded, and this perspective fits with the literature on the "rally round the flag effect" that has been described in crisis coverage more generally (Groeling and Baum 2008; Kritzinger et al. 2021). Health crisis journalism from this point of view would be "sphere of consensus" journalism, in the sense of Hallin (1986), moving away from the more typical focus on conflict.

Journalistic Role Performance and the COVID-19 Crisis

This paper tests a set of hypotheses derived from these contrasting perspectives on news coverage of health emergencies using data from the second wave of the Journalistic Role Performance (JRP) Project. The Journalistic Role Performance project (Mellado 2021; Mellado, Hellmueller, and Donsbach 2017) builds on the long tradition of research on professional roles in journalism, and shares with that tradition an understanding of roles as sets of normative expectations about the behavior of those who occupy specific positions within society. Most research on professional roles of journalism has focused on role *conceptions*, usually measured through surveys. Recognizing, however, that in actual practice the roles that journalists perform are affected by many constraints related to the structural and organization context in which they work and to particular situations of journalistic practice, the JRP project measures the performance of journalistic roles as it is manifested in the content of the news.

Building on previous research on journalistic roles, the JRP project operationalizes journalistic roles across three domains. The Journalistic Voice domain has to do with the presence of the journalist's voice in the news. Within this domain, content is coded for indicators of the Interventionist role, indicating an active role played by the journalist in interpreting and commenting on the news. The Interventionist role is conceived as contrasting with the Disseminator role, which, as a passive role, is not measured separately. A second domain has to do with the way in which journalists relate to the structure of power in society. Within the Power Relations domain, two roles are measured, the Watchdog role, which sees the journalist's role in terms of monitoring those in power and denouncing wrongdoing, and the Loyal-Facilitator Role, which sees the journalists' role as cooperating with social authorities and institutions as well as enhancing a sense of loyalty to them. The third domain has to do with the journalist's relation with the audience. Here three roles are measured, indicating approaches to journalism that address audience members as clients in need of advice—the Service role; as spectators—the Infotainment role; and as citizens, in need of voice and information related to civic participation—the Civic role. Except for the relationship between the interventionist and

Table 1. Indicators of Journalistic roles.**Interventionist**

Journalist's Point of View

Interpretation

Call for Action

Qualifying Adjectives

First Person

Watchdog

Information on Judicial or Administrative Processes

Doubting: Journalist's Evaluation

Doubting: Other

Criticism: Journalist's Evaluation

Criticism: Other

Uncovering: Journalist's Evaluation

Uncovering: Other

External Investigation

Investigative Reporting

Conflict with Groups in Power

Loyal-Facilitator

Defense/Support Activities

Defense/Support Policies

Positive Image of the Elite

Progress/Success

Comparison to Other Countries

Nationals' Triumphs

Promotion of the Country's Image

Patriotism

Service

Impact on Everyday Life

Tips and Advice (Grievances)

Tips and Advice (Individual Risks)

Consumer Information

Consumer Advice

Personal Assistance

Infotainment

Personalization

Private Life

Sensationalism

Emotions

Morbidity

Civic

Citizen Reactions

Citizen Demands

Credibility of Citizens

Local Impact

Social Community Impact

Educating on Duties and Rights

Citizen Questions

Information on Citizen Activities

Support of Citizen Movements

the disseminator roles, which are part of a one-dimensional structure, these roles are considered independent dimensions which can co-occur, interact and be combined in various ways within a single news story. Table 1 shows the individual indicators measured under each role.

The second wave gathered a broad sample of TV, radio, online and print news content across 37 countries during 2020. The study was designed before the COVID pandemic hit, and did not contain variables specifically tied to pandemic reporting. However, it permits us to compare general patterns of journalistic role performance in COVID coverage with the pattern found in news overall. If we translate the literatures on health crisis reporting

summarized above into the terms of these roles, we can generate a number of competing hypotheses about how pandemic coverage might be expected to be distinct. Each hypothesis will be tested by comparing COVID coverage with non-COVID coverage, reflecting the general pattern of news coverage in each media system.

The mediatization/media hype/politicization literature suggests two hypotheses. The argument that commercial media logics drive sensationalized, alarmist coverage would suggest that the Infotainment role, which includes indicators related to personalization, emotion and dramatized reporting styles, should be higher for COVID stories:

H1: The relative presence of the Infotainment role will be higher for COVID stories compared with non-COVID stories.

The mediatization and politicization perspective suggests that the Interventionist role should be higher—as mediatization implies a more autonomous and active role of journalists—that the Watchdog role should be higher, and also probably the Civic role should be higher, assuming that journalists are likely to focus on protests and citizen reactions to the actions of authorities. Here, “authorities” includes both public health and political authorities:

H2: The relative presence of the Interventionist, Watchdog and Civic Roles will be higher for COVID stories compared with non-COVID stories.

The deference to biomedicine/rally-round-the flag/sphere of consensus perspective, on the other hand, could suggest a shift toward the Disseminator role, with the Interventionist and other roles, including particularly the Watchdog role, declining as journalists defer toward biomedical and public authorities. Active cooperation of this sort might also suggest that the Loyal role would be higher in health crisis coverage. There is some ambiguity, however, about what we should expect in relation to the Interventionist role based on this perspective. The arguments of Klemm, Das and Hartmann about the mobilizing role of journalism in a health crisis might suggest a more active journalistic voice, with journalists not merely deferring to, but actively cooperating with public health authorities. This would also fit with Hallin’s arguments about sphere of consensus reporting, in which journalists feel authorized to take a stand in defense of consensus values. With this qualification on the Interventionist role, we can propose the following hypotheses:

H3: The relative presence of the Interventionist role will be lower for COVID stories compared with non-COVID stories.

H4: The relative presence of the Watchdog role will be lower for COVID stories compared with non-COVID stories.

H5: The relative presence of the Loyal-Facilitator role will be higher for COVID stories compared with non-COVID stories.

There is, finally, one hypothesis that is compatible with both the mediatization and the deference/cooperation perspectives. The Service role is generally seen as reflecting a market-driven media logic, as media build audiences by providing practical advice to individual consumers. At the same time, however, the Service role would also fit with the dominant perspective of biomedicine, which stresses the responsibility of individuals to

assimilate scientific advice and to adjust their behavior accordingly. Thus we could propose the following hypothesis predicted by both perspectives:

H6: The relative presence of the Service role will be higher for COVID stories compared with non-COVID stories.

The hypotheses presented here are phrased in general terms. It is possible that COVID coverage differed substantially across countries. Cornia et al. (2016), in one of very few comparative studies of pandemic coverage, found that Swedish media coverage of the H1N1 pandemic was consensual and oriented toward public health officials, while British coverage followed the watchdog orientation, and Italian coverage was more partisan, differences which they attribute to the media system and its relation to the political system. Differences in government responses to the pandemic, in patterns of political difference over it, and in cultural responses also might affect the performance of journalistic roles. On the other hand, it is also possible, given the universal impact of the virus and the global character of science and public health, that intercountry differences might be diminished in pandemic coverage, as the results of another comparative study of H1N1 coverage (Hallin et al. 2020) suggest. We will therefore explore:

RQ1: to what extent did patterns of COVID coverage differ across national systems?

Methodology

We conducted a content analysis of COVID and non-COVID news stories produced during 2020 in a broad sample of newspapers, websites, radio, and TV news programs in 37 advanced, transitional, and non-democratic countries (see Appendix A), based on standardized operationalization of the six journalistic roles described above.

Sampling

The sample of countries resulted from an effort to recruit national teams across a wide range of geographical regions and types of media and political system. The final list of participating teams was affected by the practicalities of national teams obtaining support and following through with a demanding research project. National teams selected two to four news media outlets per platform. Given that the structure and format of media systems differ across countries, researchers were asked to ensure that the selected outlets represented the diversity of each country's media system as much as possible, in terms of target audience and format, for example, or political orientation, as relevant within particular system, as well as to include the high-audience outlets within each category. For the United States, for example, where local media are particularly important, the sample included both local and national newspapers, television broadcasters and radio stations. For Hungary, where political differences among media are strong, the sample reflected these political variations. The outlets selected are listed in Appendix B.

Using the constructed week method, a stratified-systematic sample of two weeks was selected for each media outlet in each country from 1 January to 31 December 2020. The same days were analyzed in all countries. All current news content was coded on those

days, excluding opinion articles, reviews, and stories not produced by the journalists of that news outlet—e.g., wire service stories. The sample included 148,474 stories, of which 47,528, or 32%, were COVID-related.

Measurements

We relied on the operationalization proposed by Mellado (2015) and validated in subsequent studies (Mellado 2021; Mellado and van Dalen 2017; Mellado, Hellmueller, and Donsbach 2017) to measure the performance of the six roles in the news. The original indicators, which were designed for the analysis of print media, were adjusted based on the special modalities of radio, television, and online media, including the audiovisual resources of these media platforms, such as sound manipulation, non-verbal expressions, video motion, image frames, and editing (Hallin and Mellado 2018). Each indicator was measured on a presence or absence basis. Based on the theoretical rationale of role performance literature (Mellado, Hellmueller, and Donsbach 2017), measures were treated as non-mutually exclusive.

Following the coding, confirmatory factor analyses (CFAs) were conducted for each role domain to assess the consistency of the scales (shown in Appendix C), and indicators not showing sufficient consistency with the scales for which they were intended were excluded from the indices. Based on the CFA results, the individual indicators comprising each dimension were combined to generate a final role score. For descriptive purposes, we calculated raw scores, which show on a scale from 0–1 the average proportion of indicators of each role coded as present per story. In multivariate analyses, factor scores were used to test for differences in role performance. To control for the potential overrepresentation and/or underrepresentation of specific types of media, and of particular countries the data were weighted to ensure that each platform—print, television, radio, online—and country had equal weight in the analysis.

The content analysis also included a variety of other measures; those employed in this analysis include the story topic (up to three coded per story), story type (distinguishing briefs from longer stories), location (domestic or international) and type of source cited (coded on a presence/absence basis for each source type). Coders were instructed to code as COVID-related all “stories that are driven and presented in the context of the COVID-19 pandemic, or are related to the impact of the pandemic on any topic.”

We also included measures of factors at the organizational level (media ownership type—private, state, public service or civic— and political orientation on a five point left-right scale) and societal level, the latter including, the Freedom House Global Freedom Index, the Transparency International Corruption Perceptions Index, and the Hofstede Individualism and Power Difference Indices which are used as controls in regression analysis.

Data Collection

Coding was conducted by native speakers in each country. National teams received extensive training to ensure a good understanding of the codebook containing operational definitions for each variable. Based on Krippendorff's alpha, the final global intercoder reliability was .79. Intercoder reliability across roles ranged from .76 to .86, while the

Table 2. Comparison of means, journalistic roles in COVID and non-COVID stories.

	Non-COVID Mean (SD)	COVID Mean (SD)	F (df = 1)	Sig.	Eta
Interventionist	.175 (.217)	.176 (.220)	0.0	ns	.000
Watchdog	.057 (.116)	.043 (.093)	560.5	<.001	.061
Loyal/Facilitator	.036 (.106)	.030 (.091)	137.9	<.001	.030
Service	.047 (.123)	.092 (.163)	3626.2	<.001	.154
Infotainment	.111 (.193)	.078 (.161)	1092.4	<.001	.085
Civic	.047 (.112)	.067 (.120)	1030.3	<.001	.083

Notes: Means are proportion of stories in which each indicator within each role is coded as present. N = 148,415.

variation across countries ranged from .72 to .91. Krippendorff (2011) recommends that an acceptable level of α should be preferably .80 but no less than .667, also noting (9) that “the more coders are employed and the more pairable values they collectively generate, the more one can trust the computed reliability.” Our study, besides employing many coders, relies on multiple indicators of the most important constructs, further increasing confidence in reliability. More detailed information on the JRP methodology can be found on the JRP website at <https://www.journalisticperformance.org/>.

Results

Table 2 shows the global presence of the six roles in the sample, comparing COVID stories with the general news coverage represented by the rest of the sample. The roles which differ the most from general news to pandemic reporting are those associated with the Audience Approaches domain. The pandemic, therefore, seems to affect the media’s relationships with their audience more, or more consistently across countries, than their relationship with political power or the degree of journalistic voice. The differences between COVID stories and news in general are not high, but this is to be expected. Our study covers all genres and news topics—general news, sports, arts, business—so the stories are diverse, and given the broad impact of the pandemic on social life, COVID-related coverage was featured across all of these. The variation within the categories of COVID and non-COVID coverage is therefore far larger than the variation between them. Hypotheses are tested using the analysis of variance presented in Table 2. We also conducted OLS regression analyses (Appendix D) to test whether these results held with controls for other factors that affect role performance—including the story topic, which has the greatest impact, geographic orientation, media platform, ownership type, and system-level factors. In general, the effects of COVID-relatedness remain unchanged by these controls, with slight exceptions explained below.

Based on the idea that media sensationalize health crises, H1 predicts that the Infotainment role should be higher for COVID coverage. This hypothesis is not supported by our data (Table 2), as the Infotainment role is significantly *lower* in COVID coverage ($p < .001$; $\eta^2 = .091$). Figure 1 shows results for the five indicators that compose the Infotainment

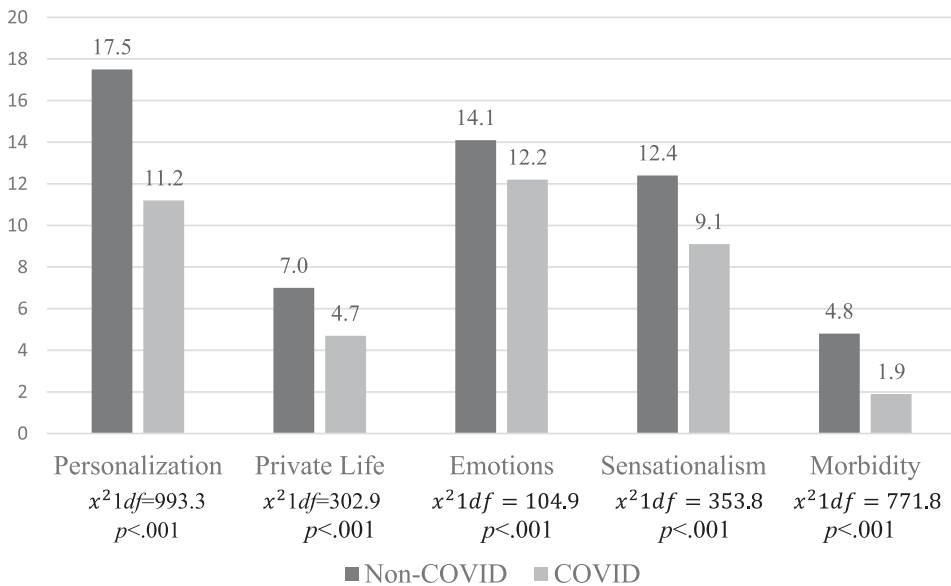


Figure 1. Infotainment indicators for COVID and non-COVID stories, % of Stories in which indicator is coded as present (N = 148,415).

role, including details on the chi square tests used to compare COVID and non-COVID stories. On every indicator, COVID stories are lower than general news, with a significance level of $p < .001$. “Personalization” was present in 17.5% of non-COVID stories, for example, and 11.2% of COVID stories; for morbidity, which has to do with graphic depictions of death, illness and injury, the difference was 4.8% vs 1.9%. This is a strong finding, and an interesting one, as in pandemic coverage it is easily possible to imagine a high level of “personalization,” “sensationalism,” reference to “emotions,” “private life,” or “morbidity.”

H2, based on the idea that media tend to politicize health crisis, predicts that the Interventionist, Watchdog and Civic roles would be higher for COVID stories. This hypothesis also does not find strong support in our results (Table 2). The presence of the Interventionist role is not significantly different between COVID and non-COVID stories ($\eta^2 = .002$). The Watchdog role, the most direct measure of politicization in our study, is significantly *lower* for COVID stories ($p < .001$; $\eta^2 = .063$), contrary to H2. The Civic role on the other hand, is significantly *higher* ($p < .001$, $\eta^2 = .083$). Still, if we look at the individual indicators that compose the Civic role, we find that the presence of Civic reporting styles seems to provide weak support for the politicization hypothesis. Figure 2 shows the Civic role indicators with the largest increases for COVID stories. These include “local impact” ($p < .001$) and “social community impact” ($p < .001$) — which has to do with the impact of the pandemic on particular groups, such as older people, children, essential workers, ethnic minorities—, and “educating on duties and rights,” (6.2% for COVID stories vs 2.5% for non-COVID stories, $p < .001$) which includes stories on social distancing rules, availability of economic relief, etc. These stories address ordinary people, or refer to them, as citizens and as members of communities, but don’t give them voice, focus on collective action, or necessarily involve controversy. “Citizen reactions” (p

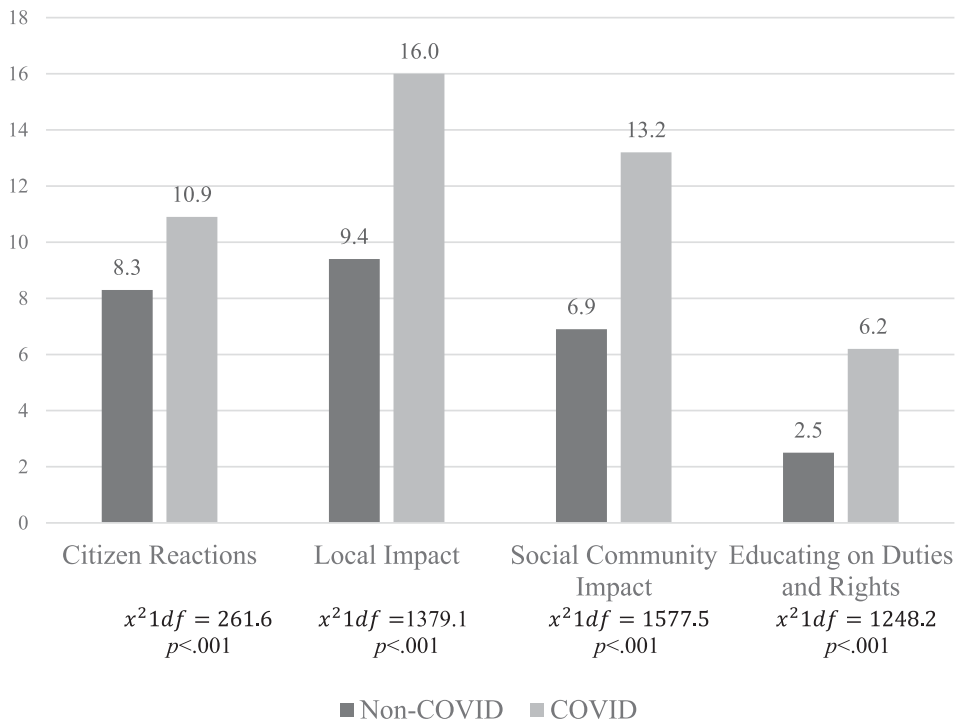


Figure 2. Civic role indicators with largest COVID differences— % of stories in which indicator is coded as present (N = 148,415).

< .001) does involve giving citizens voice. But if we turn to other indicators that involve active voice of citizens, shown in [Figure 3](#), we see some tendency to give citizens voice, but lower levels for COVID stories on indicators involving protest and collective action—“information on citizen activities” ($p < .001$) and “support of citizen movements” ($p < .001$).

Turning to hypotheses rooted in the deference/cooperation/consensus perspective, H3 predicts that the Interventionist role will be lower for COVID stories, though as noted in the introduction, there is some ambiguity in the literature about this prediction, as journalists might be expected not merely to defer but to cooperate actively in educating and rallying the public to support public health measures. The overall results ([Table 2](#)) show no significant difference in interventionism, and a closer look at individual indicators ([Figure 4](#)) suggests a complicated pattern. COVID stories are a bit lower for “journalist point of view”—that is, opinion, the indicator that would most closely fit the politicization hypothesis ($p < .001$)—and for “qualifying adjectives,” ($p < .001$) which can reflect either opinionated or dramatic writing. They are a bit higher for “interpretation” ($p < .001$)—which would be consistent with an educator role, for “call to action,” ($p < .001$) clearly a mobilizing role, though not as common overall as other journalistic roles, and for “first person” ($p < .001$). There does thus seem to be some tendency for pandemic coverage to be restrained and relatively “straight,” with many stories that report on scientific developments, policy decisions, and everyday life events without a lot of dramatization, investigation or opinion, but also a tendency for active voice as interpreter and rallier.

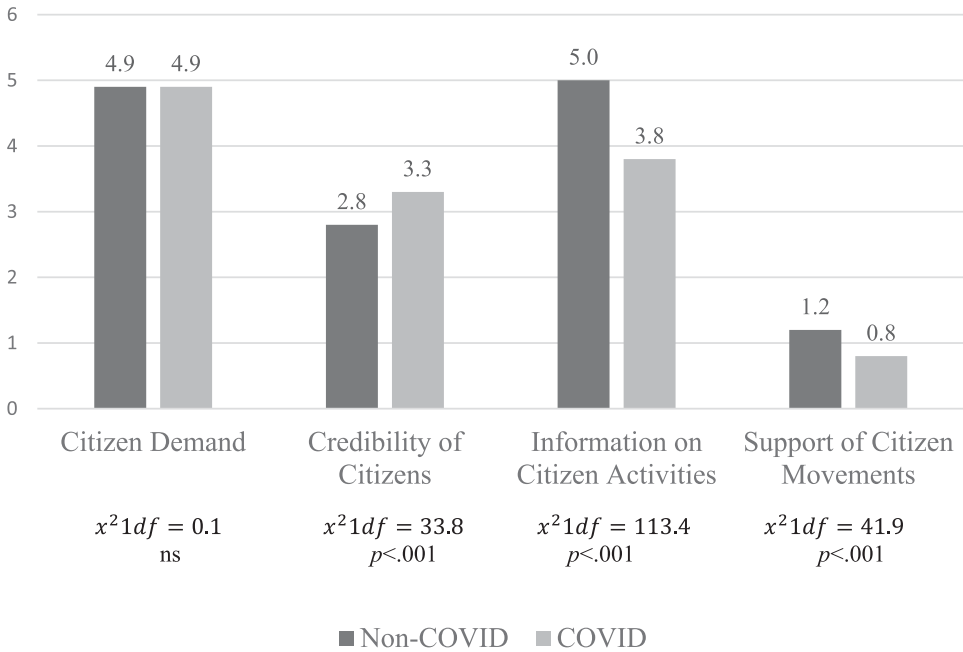


Figure 3. Civic role indicators—active citizen voice and collective action % of stories in which indicator is coded as present (N = 148,415).

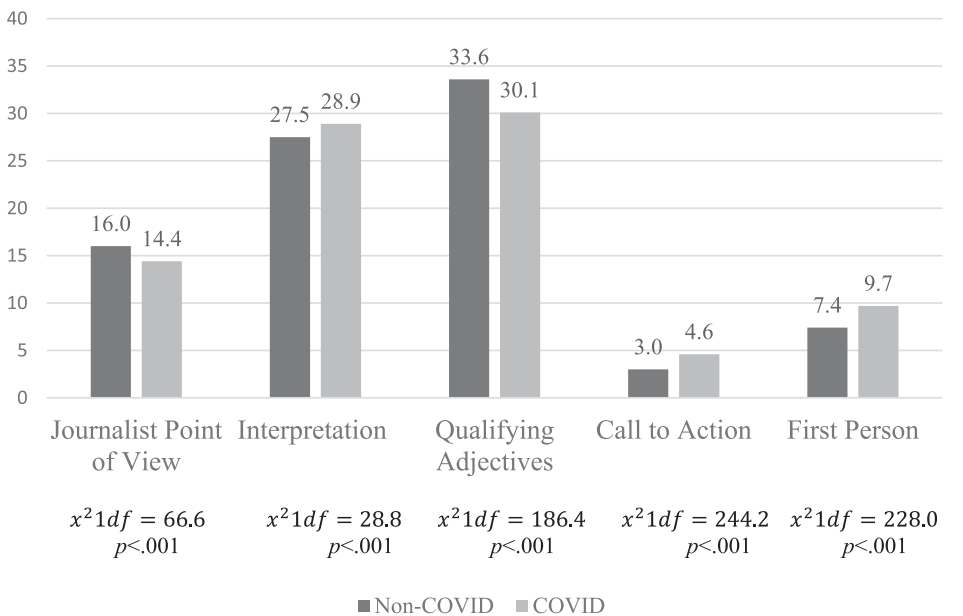


Figure 4. Interventionist role indicators—% of stories in which indicator is coded as present (N = 148,415).

H4 predicts that pandemic coverage will be lower on the Watchdog role, as journalists cooperate with or defer to authorities. This hypothesis is supported, as shown in Table 2. Again, there is complexity in the result if we look at individual indicators (not shown in the figures, but using the same chi square analysis presented for those indicators). “Doubting” and “criticism” of government and political figures by the journalists are slightly higher in pandemic reporting (3.7 vs 3.4% for doubting; 2.9 vs 2.8% for criticism, $p < .001$). All others, including those focusing on investigative journalism and on reporting of political debate are lower; criticism of government by non-journalists, for example, falls from 11.7–11.2% ($p < .001$).

H5 predicts that the Loyal-facilitator role will be higher for COVID stories. This hypothesis is not highly supported: performance of the Loyal-Facilitator role is overall lower for COVID stories ($p < .001$, $\eta^2 = .023$) although the size of the effect is extremely small. One of the indicators that composes the role—“defense and support of government activities” (2.8 vs 2.6%, n.s.)¹ is slightly higher for COVID stories and two are significantly higher, “defense, support of government policies” (2.4 vs 2.1%, $p < .001$) and “comparison with other countries” (1.8 vs 1.2%, $p < .001$). Other indicators, like “positive image of elite” ($p < .001$), or “progress/success” ($p < .001$) are lower.

Finally, H6, the one hypothesis that follows from both the mediatization and deference perspectives, predicts that COVID coverage will be higher on the Service role. This hypothesis is supported ($p < .001$; $\eta^2 = .147$). Indeed, the strongest difference in journalistic performance in COVID reporting is the higher prevalence of the Service role. Figure 5 shows the three indicators that account for this difference. There are large differences in journalistic focus on “impact on everyday life” (21.3% for COVID vs 7.7% for non-COVID stories, $p < .001$), and “tips and advice on individual risks” ($p < .001$), which includes the many stories giving the standard advice to wear masks,

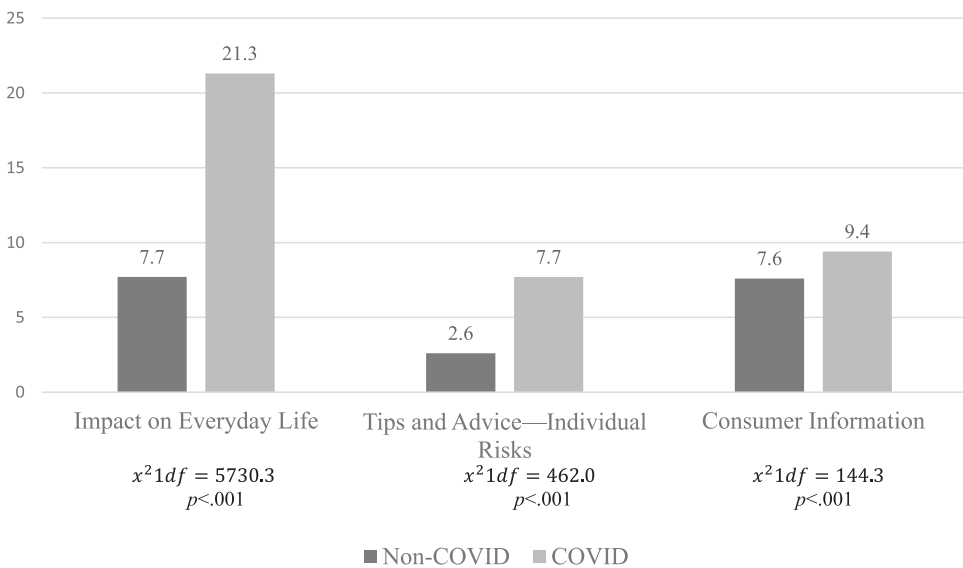


Figure 5. Selected service role indicators, % of stories in which indicator is coded as present (N = 148,415).

practice social distancing or test before traveling, but also stories on how to manage economic consequences of the pandemic, or how to respond to stress affecting children. Finally, COVID stories often give “consumer information” ($p < .001$) about what kinds of masks to buy and where to get them, for example, what stores are open, or products that can help pass leisure time.

Variation in the Pattern

How consistent is this pattern across news outlets and societies? Is COVID coverage essentially similar across countries, media types and other dimensions? In general, the pattern described above is quite consistent. It prevails with little change over time, across the months of our sample, across differences of media ownership—commercial, public service, state—and across media platforms—print, television, radio and online. For media platform, the only deviation from the pattern is that the Interventionist role is higher for COVID stories in television and radio, and lower for print and online ($p < .001$; $\eta = .107$). In broadcasting it is higher specifically on “interpretation,” “call to action,” and “first person.”

RQ 1 poses the question whether patterns of difference between pandemic news and typical journalism in each country differ substantially by media system, or are common across the globe. The general pattern is for the most part consistent across countries (full results are in Appendix E), and suggests the conclusion that the effects of the pandemic on journalism were more similar than different across systems. Every country shows a substantially higher level of the Service role in COVID coverage. On the Watchdog role, only Hungary and Taiwan have higher scores for COVID stories. On the Infotainment role, COVID stories are lower than news in general for all but three countries, which have very slight increases.

On other roles there is a bit more variation, and clearly there are stories to be told about distinct patterns of response to the pandemic—though the variations we found for the most part did not suggest clear explanations in terms of standard system-level factors like press freedom, stringency of government responses to the pandemic and the like. On Interventionism—not surprisingly given the variation we have already explored in relation to that role, the countries are about equally divided, with COVID stories higher on Interventionism in 19 countries, and lower in 18. Most differences are small, but there are some countries that have substantially higher or lower Interventionism in COVID reporting. The countries showing these differences are diverse: The UK, Poland, Kuwait and Venezuela are considerably higher in Interventionism for COVID stories while Ethiopia, Italy and Paraguay are lower.

On the Civic role, eight countries diverge from the pattern of higher scores on COVID coverage. Here there is more consistency in the characteristics of the countries that diverge (Cuba, Ethiopia, Hungary, Lebanon, Qatar, Rwanda, Serbia and the United Arab Emirates): all are below the mean on performance of the Civic role in general. Thus, the pandemic seems to strengthen what is already characteristic of journalism in these countries. Finally, on the Loyal-facilitator role, 10 countries show higher levels in COVID coverage. Here, as with Interventionism, these countries are diverse. Variation on the Loyal role, however, is strongly influenced by system-level factors like press freedom, so when there are increases in this role associated with pandemic

coverage they occur from very different baseline levels, e.g., .016 to .018 for Canada, .053 to .083 for Qatar.

Discussion

The picture described is complex, not surprisingly given the huge range of pandemic coverage and the wide range of pandemic contexts and of media systems covered by our study. In general, however, the deference/cooperation/consensus perspective is supported by our data more than the media hype/mediatization perspective. The common assumption that journalism and the media, driven by commercial logic, tend to sensationalize health crises should be manifest in an elevated level of the Infotainment role. Instead, we find that the Infotainment role is consistently lower in pandemic coverage than in general news. It is not absent and no doubt there are important stories to tell about how journalists use personalization, dramatization and references to emotion in pandemic coverage, and how they affect public responses to the crisis. But our data suggest that the pandemic produced a shift toward “straighter,” rather than toward more dramatized, personalized news. This shift is interesting, given the nature of the pandemic, which caused many people to lose friends and loved ones, disrupted people’s lives and caused great suffering and anxiety for millions. It is easy to imagine pandemic coverage, even by very responsible journalists, scoring high on indicators like “personalization,” “emotion” and “morbidity.” Why, then, do we see a shift in pandemic coverage away from these aspects of journalistic role performance? One explanation may have to do with the strong focus of news during the crisis on elite sources and responses—on policy decisions and expert assessments. It may also be that news organizations were deliberately avoiding coverage that might be seen as generating alarm and panic, consistent with the deference/cooperation perspective. It is also possible that the practical reality of journalist’s practice during the pandemic limited their ability to have the first-hand access to ordinary people that would facilitate more narrative and personalized reporting, or the kinds of images that would permit more graphic representations. In the United States, for example, journalists complained of lack of access to hospitals, a situation that, according to some accounts, was intensified by changes in government policies on patient privacy (Alsop 2020).

A second hypothesis related to mediatization theory holds that media would tend to politicize a health crisis, driven, again, by commercial logic and the audience appeal of conflict-related news, by the professional culture of journalism and its emphasis on public policy and the political game, or by political alignments of media. Here we find mixed results in our role performance indicators, but in general, weak support for this hypothesis. The Interventionist role is not higher for COVID stories in the overall sample, although there is considerable variation among countries. The Civic role is higher—we will return to the Civic role below—but not primarily on indicators that might suggest a focus on “contentious politics” in Tilly and Tarrow’s (2015) terms. And COVID stories are generally lower on the Watchdog role, the most direct measure of politicization in our study. Besides the possibility that journalists voluntarily shifted away from the watchdog role in the context of the health crisis, the performance of that role may have been affected by restrictions on journalists imposed by political authorities as well as by changes in journalistic routines forced by containment measures, including the

difficulty of interacting with political authorities (Saptorini, Zhao, and Jackson 2021). A global survey of journalists from 125 countries showed that half of the respondents reported restrictions to their pandemic reporting: from denial of access to government representatives or official sources, to exclusion from press conferences, to lack of accreditations or permits or formal rejection of information requests (Posetti, Bell, and Brown 2020, 17; see also Marquez-Ramírez 2021). Given the important role of the state in the pandemic and the many missteps and omissions committed by political and health authorities in managing it, the question can certainly be raised whether the media adequately performed their monitoring function.

The concept of politicization is complex, and our role performance indicators measure it only imperfectly. Some of the literature operationalizes politicization in terms of the frequency with which media mention political actors compared with biomedical actors (Hart, Chinn, and Soroka 2020). Our study included a measure of the kinds of sources cited in each news story, which provides an approximation to that kind of measure of politicization, and indeed, 49.5% of COVID-related stories cited State and Political Party sources, significantly higher than general news, where 37.1% of stories cited political sources, and much higher than the percentage of stories—20.7%—citing Health sources. Other studies on COVID coverage have found a similarly high level of political sources (Mellado et al. 2021). This is a narrow definition of politicization, however, and it is not clear that it should be interpreted as a media-driven phenomenon. Given its scale, the COVID pandemic produced a strongly enhanced role of the state almost everywhere, as governments stepped in to enforce containment measures, provide public health infrastructure, take measures to address economic consequences; and political leaders often eclipsed scientists and health professionals as the key decisionmakers and communicators (Greer et al. 2021). The focus on political actors and sources reflects this reality, and fits as much with the hypothesis that media would defer to authorities in a crisis, as it does a hypothesis of media-driven politicization.

Hart, Chinn, and Soroka (2020) also include a measure of polarization in COVID coverage, which they conceptualize in terms of partisan differences in discourse about the pandemic reflected in news coverage. Assessing politicization in this sense would require different kinds of measures than those included in our study, focused specifically on the framing of the pandemic and perhaps more tailored to particular political contexts. The indicators measured for the Watchdog Role which focus on reporting of political debate do, however, suggest that a strong focus on partisan divisions was not typical of COVID news around the world. Litvinenko, Borissova, and Smoliarova (2022), looking at the Russian case, define politicization in terms of political intervention into the production and flow of information and the presentation of the pandemic by journalists, and this again would require other kinds of research, in this case interview-based research.

A second perspective predicts that media would shift toward a more deferential, cooperative, consensual approach. Klemm, Das, and Hartmann (2019, 1232) argue that in a health crisis journalists tend to see themselves as social mobilizers, educating people to protect their own health and to act in socially responsible ways. A “shift from a watchdog to a more cooperative role appears logical,” they argue, “as journalists’ goals are more naturally aligned with the goals of health authorities than in the reporting of other issues.” They also note that journalists feel dependent on health authorities given their own lack of expert knowledge. This perspective gets more support in our data than the media

hype/mediatization perspective. The Interventionist role remains unchanged, with journalists frequently playing the Disseminator role. Within the audience approach domain, there is a shift away from an orientation toward the audience as a spectator—the Infotainment role—to an orientation toward the audience as client and citizen—the Service and Civic roles—which would seem consistent with the idea of journalists as educators and social mobilizers. In the power relations domain, there is a clear decline in the Watchdog role in most countries. The Loyal role is not higher in most, though it is slightly higher on indicators related to supporting activities and policies of the government. Also, the Loyal role often appears in our sample in culture, sports and entertainment coverage, in the form of a positive image of elites from these social fields; and the absence in COVID coverage of these kinds of stories may skew the Loyal role lower. In any case the ratio between the two power relations dimensions clearly shifts away from the Watchdog role.

In the journalistic voice domain, the picture is mixed, but there is a shift away from opinion—“journalist point of view”—and the use of “qualifying adjectives” and toward “interpretation,” “call to action”—both consistent with the educator and social mobilizer roles—and “first person.”

The largest difference in role performance associated with COVID coverage is the high level of the Service role, which is consistent with both the mediatization and cooperation perspectives. Service journalism is widely seen as characteristic of market-driven media, and could reflect a drive by news organizations to use the pandemic to maximize audiences. But the Service role is also consistent with the educator and social mobilizer role articulated by the journalists interviewed by Klemm, Das, and Hartmann (2019) as a norm for health crisis coverage, as it is a primary goal of health authorities to convince individuals to regulate their behavior in ways that will protect their health and that of the community.

The most distinctive journalistic role found in pandemic coverage across the world is that of addressing the impact of the pandemic on the everyday lives of ordinary people and providing them with information and advice on how to cope with that impact (Mellado et al. 2021). As Eide and Knight (1999) argue, service journalism is a complex journalistic practice, with roots in both the market and the public sphere, in neoliberal governmentality and in popular activism (see also Briggs & Hallin [2016] on the complexity of the “patient-consumer model” in health news). Some of the service content in pandemic coverage is no doubt trivial, consumerist, and individualizing in problematic ways. Gates (2022) for example, analyzes the way the finance industry used “the language of corporate compassion while placing the onus on individuals to take responsibility for their finances and emotions” in their pandemic messaging. This kind of personal finance advice was part of the service content in our sample, at least in certain countries. Nevertheless, providing audiences with expert advice on how to handle the risk of contagion or the myriad other threats to their well-being that resulted from the pandemic is by any standard a legitimate part of the journalist’s role in such a crisis.

In the audience approach domain both the Service and Civic roles increased in COVID coverage, at the expense of the Infotainment role. This illustrates the argument of Mellado and van Dalen (2017) that addressing audiences as consumers and as citizens is not mutually exclusive. The Civic role indicators that are higher for COVID stories are closely parallel to the Service role indicators that are higher. “Impact on everyday life,”

for example, a Service role indicator, shows the greatest increase for COVID stories of any indicator in the study, while the two Civic role indicators, “local impact” and “social community impact”—parallel measures, but ones that treat ordinary people as members of communities rather than as individuals—also have particularly large increases. “Educating on duties and rights,” meanwhile, is closely parallel to “tips and advice—individual risks,” as a form of “news you can use,” but addressing people as both citizens and consumers, in line with the argument of Li (2023) on the Civic role as a part of “solutions journalism” initiatives during the pandemic. Some indicators related to citizen *voice* rather than education of citizens, such as “citizen reactions” and “citizen demand,” are also higher for COVID stories, though not those associated with protest and controversy (a focus which would also be manifested in our Watchdog role). This simultaneous shift to the Service and Civic roles seems consistent with the educator and social mobilizer role described by Klemm, Das, and Hartmann (2019), with journalists addressing the audience simultaneously as individuals and as members of a community to advise them about the nature of a threat that is presented as both individual and shared.

Conclusion

In this paper we have explored the ways in which journalistic role performance differed between pandemic news and general news coverage across 37 countries during the first year of the pandemic. The largest differences between COVID and non-COVID coverage were seen in the Audience Approach domain, where journalists moved away from the Infotainment role and were closer to the performance of the Service and Civic roles, addressing audiences as clients and as citizens more than as spectators. In the Power Relations domain, journalists shifted away from the Watchdog role. Regarding the Journalistic Voice domain, a complex picture emerges with regard to the Interventionist role, with considerable variation across countries, and shifts among different aspects of journalistic voice, with less opinion, for example, and more interpretation and call for action. We have considered these changes in relation two broad perspectives on the role of journalism and the media in the coverage of health crises: the media hype/mediatization perspective, which sees media as sensationalizing and politicizing health threats, and the deference/cooperation/consensus perspective, which sees media as cooperating with authorities during a public health emergency and as playing the role of educator and mobilizer.

In general, the deference/cooperation/consensus perspective is better supported by the results, with media moving away from the Watchdog and Infotainment roles, disseminating information about health policies and serving to help individuals and communities to cope with the impact of the pandemic on their lives. This result does not necessarily undercut mediatization theory, in general. We have focused here in specific claims related to mediatization theory in the literature on pandemic news. The results would seem, though to lend support to more recent articulations of mediatization theory that move away from “linear” claims about media logics displacing logics of other social fields (Ampuja, Koivisto, and Väliverronen 2014), and suggesting a more complex interactions between mediatization and other social processes. The pattern described here is relatively consistent globally, but there are some significant differences among countries, which are worthy of more detailed study. There is also considerable diversity of COVID coverage within any given country, and there are no doubt many important

dimensions of the framing of the COVID pandemic and the specific forms the performance of these roles takes within different news organizations and societies around the world that would require more contextualized research to uncover.

Note

1. The indicator covers the activities of various elite actors, but it is specifically defense/support of government actors that is higher in COVID coverage.









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