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# The culturalization of Disease

A cultural analysis of the discourse on civic mindedness, health inequity, and ethnicity during the COVID-19 pandemic in Denmark

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## Abstract

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This thesis analyses the media narratives of the COVID-19 pandemic and non-Western ethnic minorities in Denmark. Few months after the outbreak of the pandemic in Denmark, *Statens Serum Institut* (SSI), the national Danish agency for disease control and research, reported that persons with non-Western background were unproportionally affected by the disease. In the following media debate, there are two dominant narratives. On one hand, you have the actors who argue that non-Western ethnic minorities do not take responsibility for themselves and society, because they belong to a different culture or are simply not interested in integrating into the Danish society. On the other side stand those who point towards socioeconomic factors, such as housing and working conditions, or lack of appropriate information, as the reason for the high infection rate among people with non-Western background. I apply media content analysis and draw on Deborah Lupton’s conceptualization of illness as an individual responsibility to show how the different actors focus on guilt, accountability, responsibility, and blame, constructing the heroes and villains of the pandemic. While the media have brought forward the issue of ethnic health inequity in Denmark, they have also served as a platform for the actors who draw ethnic boundaries between the orderly and responsible Danes and the non-Western ethnic minorities who lack civic mindedness. These actors thus frame COVID-19 as an issue of integration instead of health inequity.

Keywords: ethnicity, minorities, culture, civic mindedness, health inequity, COVID-19

## Abstract

“The culturalization of Disease – A cultural analysis of the discourse on civic mindedness, health inequity, and ethnicity during the COVID-19 pandemic in Denmark”

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I dette speciale analyserer jeg de overordnede medienarrativer omkring COVID-19-pandemien og ikke-vestlige etniske minoriteter i Danmark. Få måneder efter pandemiens udbrud i Danmark påviste Statens Serum Institut, at borgere med ikke-vestlig baggrund er overrepræsenteret blandt de COVID-19-smittede. I sommeren 2020 kom der for alvor fokus på COVID-19 og etniske minoriteter efter et stort smitteudbrud blandt det somaliske mindretal i Århus. Det startede en debat, der fortsatte ind i 2021, om de bagvedliggende årsager til smitten. I specialet peger jeg på to dominerende narrativer i medierne: på den ene side står dem, der forbinder smitten blandt ikke-vestlige etniske minoriteter med mangel på samfundssind, hvilket igen anses at bero på minoritetsborgernes kultur eller mangel på vilje til at integrere sig i Danmark. Andre aktører påpeger socioøkonomiske faktorer, som bolig- og arbejdsvilkår eller mangel på tilstrækkelig information, som årsager til det højere incidenstal blandt borgere med ikke-vestlig baggrund. I specialet trækker jeg på Deborah Luptons konceptualisering af sygdom som et individuelt ansvar for at vise, hvordan de forskellige aktører fokuserer på skyld, skam og ansvar og dermed skaber et billede af pandemiens helte og skurke. Medierne har været med til at sætte fokus på problemet med etnisk ulighed i sundhed i Danmark, men har samtidig fungeret som en platform for de aktører, der opstiller modsætninger mellem de ansvarlige danskere og de etniske minoriteter, der mangler samfundssind, og dermed gør COVID-19-smitten blandt ikke-vestlige minoriteter til et spørgsmål om integration i stedet for ulighed i sundhed.

Nøgleord: etnicitet, minoriteter, kultur, samfundssind, ulighed i sundhed, COVID-19

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# 1. Introduction

## 1.1 Background

“If we take an objective look at the figures, we simply see too many people with non-Western background contracting COVID-19 [...] I see that some question whether it is fair to discuss this or pay attention to this fact. My answer is clearly: yes, it is. We obviously have to talk about it in a civilized way, but the figures must be known. It is the only way for the authorities to fight the disease. Of course, we must pay attention to the possible reasons. Some live together as big families in small apartments. Many people with ethnic minority background are frontline workers and thus more at risk [...] But we also have to ask whether this is really the whole explanation.” (Frederiksen 2020<sup>1</sup>)

These were the words of Danish Prime Minister, Mette Frederiksen, on a press conference on August 15, 2020. The press conference was held to address the increasing number of COVID-19 cases in Denmark and present new measures to combat the virus. But Frederiksen’s words about the infection rate and non-Western ethnic minorities also reflected a debate that had long been heating and really ignited in summer 2020, when Danish media reported that half of the COVID-19 patients in the city of Aarhus were from the Somali minority (Jørgensen, 2020).

As in many other countries around the world, ethnic minorities were in fact unequally affected by the disease. In May 2020, *Statens Serum Institut* (SSI), the national Danish agency for disease control and research, reported that while non-Western ethnic minorities account for approximately 9 percent of Denmark’s population, the same group represented 18 percent of the COVID-19 cases (SSI 2020, p. 3). In October 2020, this rate had increased to 25.7 percent of all cases registered since the beginning of the pandemic. Although majority Danes still made up the largest group of positive cases, the story about the Somali minority in Aarhus became a catalyst for a debate about the underlying reasons for the unproportionate spread of COVID-19 among non-Western minorities.

Right-wing politicians took the opportunity to blame ethnic minorities for not taking the virus seriously and lacking respect for the Danish society (Kjærsgaard in Svendsen, 2020; Vermund, 2020). Other actors pointed out factors like small apartments, the inability to work from home, and lack of translated information as the reason for the overrepresentation of non-Western COVID-19 patients (Karrebæk and Sørensen 2020; Ahmed et.al., 2020; Norlander

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<sup>1</sup> All translations from Danish are the author’s own.

2020; Nørredam and Krasnik 2020; *Ritzau* 2020; Sodemann in Jensen 2020; Veis and Johansen 2020; Nørredam in Kjær 2020; Ahmed et.al. 2020; Sodemann in Maach 2020).

In June 2020, the Danish Institute for Human Rights issued a report that, among other things, criticized the lack of translated and targeted COVID-19 information from the authorities to ethnic minorities (The Danish Institute for Human Rights, 2020). During the first months of lockdown, information about COVID-19 and the Danish regulations was instead translated and distributed by volunteers and NGOs, for instance The Danish Refugee Council (DRC), Denmark's largest refugee NGO, where I did an internship as part of my master's program in Applied Cultural Analysis.

My task for DRC was to conduct an ethnographic study to find out how the authorities could improve communication with persons with refugee- or immigrant background. For that purpose, I interviewed refugees and immigrants as well as other NGOs and volunteers, who had helped translate and spread information during the first months of the pandemic.

During my fieldwork, I realized that many of the participants with minority background had received quite a lot of information from more or less informal sources such as friends, family, local associations, NGOs, or foreign media. Many also expressed the need for information and gratefulness to those who provided it. However, some also felt that other needs were uncovered. A man with refugee background worried how much protective equipment, such as hand sanitizer and the mandatory face masks he could afford, as he only received limited social support from the Danish state. He also had problems paying for a Danish-Arabic translator when he had meetings with the authorities (personal communication, October 6, 2020). Translation services in health care were free until 2018 when the Danish parliament passed a law that only allowed free translators for people, who had been in Denmark for less than three years (*Bekendtgørelse om tolkebistand efter sundhedsloven*, 2018: 855).

Other actors, with minority- as well as majority background, problematized how certain ethnic minority groups attracted the media's attention, arguing that it caused stigmatization of ethnic minorities (personal communication, October 6, 2020; personal communication, September 8, 2020; personal communication, August 24, 2020; personal communication, September 21, 2020). An NGO staff member exclaimed during an interview:

“Nobody should be blamed in the media in any way. They [the authorities, ed.] say that there is no explanation why ethnic minorities get sick – of course there is an explanation! As for many other diseases, COVID-19 has a socioeconomic aspect. And just like there is inequity in health

in many other cases, there will be inequity in COVID-19 too. It is not about which ethnic group you belong to, it is a social problem. I really think it is problematic when the prime minister talks about ethnic minorities.” (Personal communication, September 8, 2020)

This interview was what really opened my eyes to the issue of health inequity, that is unequal exposure to health risks that are caused by unequal distribution of power and resources in society (Marmot 2007, p. 1159).

Looking at my own internship task and the measures taken by the Danish Health Authority – translation information material about COVID-19 and publishing it in different formats such as text and videos – it seemed to me that the focus was still mainly on securing information for ethnic minorities, which puzzled me since the socioeconomic aspect of the issue was not solvable through translation and cultural mediation. And although The Danish Public Health Association (DSFS) issued a report addressing the problem of ethnic health inequity in Denmark in September 2020, different actors kept discussing in the media whether the socioeconomic factors spread the disease or if non-Western ethnic minorities simply lacked *samfundssind* – a term that can be loosely translated to “civic mindedness” or “community spirit” and was frequently used, by the prime minister as well as the Danish population, as the solution to the pandemic and an essential part of Danish culture (Villadsen 2021, p. 245).

The call for civic mindedness was effective. The Danish population generally abided by the official covid-19 restrictions, and civic mindedness became a sort of motivation to deal with the social deprivations during the first months of lockdown (ibid.). However, framing civic mindedness as something “essentially Danish”, also risks excluding non-native inhabitants of Denmark and constructing the spread of infection as a matter of individual behavior rather than socioeconomic determinants of health.

The debate about civic mindedness and minorities’ culture made me interested in the way non-Western ethnic minorities were portrayed and constructed, predominantly by the majority, and how we (the majority) perceive disease, culture, and responsibility in Denmark. For this thesis, I therefore decided to focus on the media narratives on minorities and COVID-19, instead of the data I collected during my fieldwork, also due to ethical concerns which I will discuss in Chapter 4. As an employee of DRC and activist within the field of migration, I find it important to consider how we talk about minorities and COVID-19 to avoid further stigmatization or ignorance of the socioeconomic factors that contribute to an increased disease risk among some minority groups. I will elaborate and reflect on my own positionality in the ethics section.

I am writing this thesis in the summer of 2021, almost one and a half year after the first COVID-19 cases were reported in Denmark, and approximately one year after the debate on ethnic minorities and COVID-19 really took off. But as COVID-19 is still an ongoing issue and my thesis addresses a problem extending beyond the pandemic, I believe it can still contribute with relevant inputs to how we talk about disease, and reflections on how terms like culture and ethnicity are used during times of crisis.

## 1.2 Research aim and questions

The thesis identifies the dominant media narratives about COVID-19 and ethnic minorities in Denmark and shows how the concepts ethnicity, culture, and civic mindedness can be defined, used, and misused. Specifically, I ask:

- How are the concepts culture, ethnicity, and civic mindedness operationalized by different actors?
- How are the socioeconomic structures presented and by whom?
- Where do the different actors place the responsibility for COVID-19 high infection rates among non-Western minorities in Denmark?

The purpose of the thesis is not to give a final answer to whether culture or health inequity has most impact on the number of COVID-19 cases. I neither intend to argue that culture plays no role in the reception of health information or attitude towards disease. Culture does influence peoples' attitudes towards dangers such as pandemics and their coping mechanisms (Lupton 2013, p. 61). The main contribution of the thesis is that it turns the cultural lens towards representants of the majority. I show how the dominant narratives of ethnic minorities and COVID-19 shed light on certain problems and solutions but leave out others, and how culture and ethnicity in some cases are used to explain issues that are in fact socioeconomic – the issues become “culturalized” as Schierup (1993, p. 15) puts it. This thesis takes an intersectional approach, arguing that culture and ethnicity should always be viewed in connection with other factors such as class, level of education, gender, etc. (Anthias & Yuval-Davies 1992, p. 3).

Although it is contested to what extent media influence or are influenced *by* the public discourse, I find the topic relevant because the media are a way for people to orient and educate themselves on their surroundings, and it is established that documents are part of shaping the reality for the readers (Asdal 2015, p. 74). I therefore find it relevant to look into the media narratives to see how the authors construct and represent non-Western ethnic minorities and how this in turn depicts the majority Danes.

### 1.3 Terminology

Terminology regarding ethnic minorities, refugees, and migrants is often used inconsistently. In this subchapter, I therefore introduce and explain the terms, I use throughout the thesis. The concepts of culture and ethnicity will be further discussed in chapter 3.

#### **Ethnic minorities**

When I refer to the term “ethnic minorities”, I specifically think of non-Western minorities with migrant or refugee background or their descendants, for instance the Somali minority in Denmark. I chose this term as it is often – but not always – used to refer to non-White minority populations or specific identifiable groups such as indigenous people (Bhopal 2007, p. 36). Some authors use the term “ethnic minorities” to describe groups, who have often been settled for generations in a country but in this thesis, I use it as an umbrella term for all persons with refugee- or immigrant background in Denmark as I find the term “ethnic minorities” most suitable for covering a wide range of people, who may be in Denmark for various reasons – labor migration, war, family reunification, etc. I also include descendants of migrants and refugees in this category, as their family background, features, or even their address may lead to them being categorized as “immigrants” even though they are born and raised in Denmark. When it is relevant, or for the sake of variation, I may distinguish between persons with migrant and refugee background.

#### **(Im)migrant**

There is no universally accepted definition of a “migrant”, and the term may thus apply to persons who move for work, education, or refuge, although the UN excludes movements due to recreation, holiday, visits to friends and relatives, business, medical treatment, or religious pilgrimage (International Organization for Migration, n.d.). In a Danish context, *immigrants* are usually understood as long-term migrants, defined by the UN as “a person who moves to a country other than that of his or her usual residence for a period of at least a year, so that the country of destination effectively becomes his or her new country of usual residence” (UNESCO 2008, p. 12). Statistics Denmark defines immigrants as persons who are born outside Denmark to parents who are not Danish citizens. Descendants of immigrants are persons who are born in Denmark to parents born abroad without Danish citizenship (Statistics Denmark 2020, p. 13).

## **Refugee**

A refugee is defined in the 1951 Convention Relating to the Status of Refugees and its 1967 Protocol, to which Denmark is party, as a person who “owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it” (1967 Protocol, article 1).

## **Civic mindedness**

The word "civic mindedness" (*samfundssind* in Danish) has been used frequently during the COVID-19 pandemic in Denmark, by the prime minister as well as many authors of debate articles that make up part of the empirical foundation for my thesis. Lisa Storm Villadsen (2021, p. 230), professor at the Department of communication at Copenhagen University, describes civic-mindedness as "a shared sense of obligation to the community", the trait that the prime minister ascribed to the Danish people in her speeches about the COVID-19 pandemic. The downside of presenting civic mindedness as something essentially Danish, argues Villadsen, is that it makes views differing from Frederiksen's seem un-Danish or even unpatriotic (*ibid.*, pp. 245-246). Moreover, this approach risks excluding non-native inhabitants of Denmark, perhaps fueling the perception of migrants as a problem if they do not demonstrate this unique “Danish” trait. I mention Villadsen's study here because some actors in my media material blame the higher COVID-19 infection rate among non-Western inhabitants on lack of civic mindedness.

## **1.4 Thesis overview**

This thesis is divided into 8 chapters. In the first, I have introduced my topic and the aim of my research. In the second chapter, I provide a brief overview of the history of migration to Denmark from the 1960s and onwards, showing how migration has been considered a problem for many years. I also include a subchapter covering the status of health of ethnic minorities and previous research on ethnic minorities in the Danish media, to set a context for the current debate. In chapter 3, I reflect upon my position as a researcher, my chosen method and material, and the ethical implications of my thesis. Chapter 4 introduces the theoretical framework of my analysis and discussions, which will be presented in the chapters 5 and 6. Chapter 5 discusses the framing of COVID-19 as a cultural or integration issue, and chapter 6

is focused on the narrative of the pandemic as a socioeconomic problem. I finish with a conclusion and suggestions for further research in chapter 7.

## 2. Ethnic minorities in Denmark – a problem since 1973?



**Figure 1** Border control at Copenhagen Airport Station, April 2020. During the COVID-19 pandemic, Denmark closed the borders for all non-citizens without an "approved purpose", requesting travellers to identify themselves when entering the country. Photo by the author.

When talking about COVID-19 and non-Western minorities in Denmark, it is relevant to briefly look at the country's history with refugees and migrants as transmission of COVID-19 among people with non-Western background is sometimes turned into an integration issue (*Jyllands-Posten* 2021; Collignon 2021; Dahl in Sørensen & Vestergaard 2021; Hilmersson 2021; Høgh 2021; Christensen & Radojevic 2021). This chapter serves to elaborate on the "setting" of the current debate on ethnic minorities in Denmark.

Migration is not a new phenomenon in Denmark<sup>2</sup>. Dutch farmers, Swedish workers, Jews, Romas, and German refugees are just some of the different groups that have entered the country through the ages, in search for work or safety (Immigrantmuseet, n.d.). In this chapter, however, I focus on the migrants and refugees who arrived in Denmark from the 1960s and onwards, as most persons with non-Western background residing in Denmark today belong to or descend from these groups. As of September 2020, persons with non-Western background made up approximately 9 percent of the country's population (SSI 2020,

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<sup>2</sup> With "Denmark", I refer to the state of Denmark itself, excluding Greenland and The Faroe Islands that belong to the Kingdom of Denmark but have their own autonomous governments and policies.

p. 1). The largest non-Western minority populations are Syrians and Turks (Statistics Denmark 2020, p. 13).

When migrant workers started coming to Denmark in the 1960s and 1970s, their stay was considered as temporary by the Danish authorities as well as by the migrants themselves (Simonsen 2001, pp. 192-193). A general national integration policy did not exist. According to Simonsen (2001, p. 199), migrant workers in Europe generally saw no need for having contact with the majority society as they only expected to stay for a limited period. When it became clear that their stay would be permanent, and their children were to grow up here, they acknowledged the importance of a dialog about the relation between their cultural and religious beliefs and the European reality. I mention this as it emphasizes how integration is a mutual process that requires action from the host countries as well as refugees and migrants themselves.

<b>Population at the first day of the quarter by citizenship and time</b>	
	<b>2021Q3</b>
Bosnia and Herzegovina	9 221
Poland	41 998
Romania	35 453
Turkey	28 390
Afghanistan	9 901
Iraq	9 747
Iran	10 218
Lebanon	1 408
Pakistan	9 980
Syria	35 857
Vietnam	4 443

29-8-2021 *Danmarks Statistik*, [www.statbank.dk/FOLK1B](http://www.statbank.dk/FOLK1B)

**Figure 2** The largest groups of immigrants and refugees in Denmark as of August 2021. While Turks and Syrians account for the largest non-Western populations, the largest immigrant group in Denmark is in fact from Poland. Source: Statistics Denmark

In the beginning, labor migrants were welcomed in Denmark but when the unemployment rates increased due to the economic crisis in the 1970s, the government, employers, and employees agreed to close the borders for migrant workers outside the EU in 1973. The border nevertheless remained open for family reunifications and refugees (Simonsen 2001, p. 192; Farbøl et.al. 2019).

In the end of the 1970s, some mayors of municipalities with many foreign-born residents started discussing the “immigrant problems” (Farbøl et.al. 2019). Especially former mayor of

Ishøj, Per Madsen, spoke out against more immigration to his municipality. In an interview in the Danish newspaper *Berlingske* from 1976, he explains that he is not “principally against immigrants, but against *too many* immigrants” (Bistrup, 1976, my emphasis). The municipality of Ishøj was one of the areas with a big immigrant population that proved expensive for the authorities (ibid., p. 50) – “the price of solidarity” as Nannestad (2001, p. 25) puts it. In *Berlingske*’s article from 1976, the word “problem” reappears in connection with migrants; they are an expense to the municipality, the women do not speak Danish, they smell differently, etc. The author also questions whether it is fair that one of Denmark’s poor municipalities is made responsible for solving “the immigrant problem”, and Madsen calls for a particular migrant policy from the Parliament (Bistrup, 1976). The “migrant problem” in 1976 was not only presented as a clash between majority Danes and ethnic minorities, but also between the “regular” Danes and the powerful politicians in the Parliament, who did not meet the local politicians’ wishes for a general migrant policy. In fact, a national integration law, outlining standards for the integration procedure, was not implemented before 1998. The law defined “integration” as provision of housing for refugees, an introduction program, including Danish lessons, introduction to Danish society (not further specified), and job-finding support (*Integrationsloven*, 1998:474). The aim of the law was, among others, to provide migrants and refugees with an understanding of the Danish society’s basic values and norms. The then-government also emphasized that foreigners should follow Danish values and norms (Jønsson, 2019). These norms and values, however, were not further specified.

Despite the rising debate about migrants, Denmark implemented an Alien Act in 1983 that was said to be one of the most liberal in Europe. The law i.e. granted the right to asylum even for people, who did not fall under the Refugee Convention’s definition but “for other significant reasons cannot stay in their home country” (*Udlændingeloven af 8. juni 1983*, 1983:226). The liberal act led to increase in asylum applications, which again had Madsen and other mayors worrying about the problems and cost of integrating refugees (Farbøl et.al. 2019).

Among Danish civilians as well as politicians, the protests against immigration were based on economic as well as cultural arguments. Mayors worried that too big groups of immigrants would be too expensive and caused problems due to i.e. language barriers in schools and the health system. Unemployed migrants living on social aid was also a hot debate topic, already back then. In the past as well as the present, immigrants and refugees have been

considered a problem, partly because they were/are seen as an expense and partly because of the clash between cultures and values (Schierup 1993; Nannestad 2001; Jønsson 2019).

Values and norms continue to be part of the current Danish integration law, which states that

“the aim of the law is to ensure newly arrived foreigners the opportunity to utilize their skills and resources to become self-reliant and participate actively in and contribute to the Danish society on equal terms with other citizens and *in accordance with fundamental values and norms of Danish society.*” (*Bekendtgørelse af lov om integration af udlændinge i Danmark*, 2020:1146, my emphasis)

According to the current integration act, immigrants are responsible for their own integration (*ibid.*, article 1.1). The words “in accordance with fundamental values and norms of Danish society” have also been added to the introduction since 1998. To be properly integrated, a migrant must act in accordance with Danish values, which during the COVID-19 pandemic were understood as i.e. civic mindedness.

The link between integration and shared values makes it easy to label a person with minority background, who does not act in accordance with written and unwritten rules, as badly integrated – which is mainly her own fault. According to Schierup (1993, p. 15), lack of Danish skills, work, or social life was blamed on the migrants and refugees and their foreign culture or unwillingness to integrate. Culture was used to explain even social or political issues. These issues were “culturalized”. Migrants' culture thus became something natural and unchangeable linked to their ethnicity. The terms ethnicity and culture became intertwined. Although minority groups in Denmark do not necessarily belong to the same ethnicity or share social and cultural lifestyles, the linkage of (non-Western) ethnicity and culture create an image of non-Western migrants, refugees and their descendants as one homogenous group that is inherently problematic.

The former is not an attempt to assert that bad integration is only “society’s fault” but to show that the importance of individual responsibility has been added and the duty to comply with Danish norms and standards has been further stressed.

In 2019, the Danish government passed Law no. 174, which is commonly known in Denmark as “the paradigm shift”. The law established a range of changes in the Alien Act, the Integration Act, the Repatriation Act, and other laws. In short, the paradigm shift emphasized the temporary nature of new refugees’ stay in Denmark, i.e. stating that residence permits were only temporary and allowing the Minister of Integration to set a limit for the number of family reunifications (*Lov om ændring af udlændingeloven, integrationsloven*,

*repatrieringsloven og forskellige andre love*, 2019:174). The shift of focus from integration to repatriation was also stressed by the fact that terms containing the word “integration” were changed so that “integration programs”, for instance, became “self-reliance and repatriation programs” (ibid.). The Integration Act emphasizes “the foreigner’s responsibility for their own integration” (ibid.), just like the inhabitants of Denmark were expected to take responsibility for their own well-being during the COVID-19 pandemic.

#### Laws mentioned in this subchapter:

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*Udlændingeloven af 8. juni 1983* (1983:226)

*Integrationsloven* (1998: 474)

*Lov om ændring af udlændingeloven, integrationsloven, repatrieringsloven og forskellige andre love* (2019:174)

*Bekendtgørelse af lov om integration af udlændinge i Danmark* (2020:1146)

## 2.2. Ethnic minorities and health inequity

Before I move on to the Previous Research section, I find it relevant to also provide background on ethnic minorities and the health system in Denmark to show that ethnic health inequity is documented, and that addressing these is a political issue.

Persons with minority background in Denmark generally have worse self-perceived health than majority Danes. They also suffer from long-term disease and worse mental health more often than majority Danes (DSFS 2020, p. 9). It is important to note that ethnic minorities in Denmark make up a very heterogenous mix of people, and ethnicity is only one determinant impacting individual health. In addition, come social determinants of health (SDHs), which are defined by The World Health Organization (WHO) as “the non-medical factors that influence health outcomes”. Such factors include, among others, income and social security, education, (un)employment, work conditions, housing and environment, early childhood development, social inclusion, structural conflict, and access to decent and affordable healthcare services (WHO, n.d.). On that note, it is worth pointing out that persons with non-Western background in Denmark are over-represented in the socioeconomic low-income group and live in low-income neighborhoods with lower quality accommodation (DSFS 2020, p. 11).

Culture, social capital, and language barriers also create challenges in the meeting between ethnic minorities and the Danish health system, and persons with non-Western background generally use fewer preventative services, such as dentists and mammography screenings,

than majority Danes, while they more often need acute treatment and emergency care. The same group also has less knowledge of the accessible health facilities in Denmark (ibid., p. 12). Besides socioeconomic conditions and individual behavior, societal structures also affect the health of citizens. DSFS point towards three structural factors that negatively impact the health of non-Western minorities: 1) lower social support that creates poverty and thus health problems, 2) the removal of free translation services at health facilities for persons who have been in Denmark for more than three years, and 3) the lack of policies and strategies for improving the health of ethnic minorities (ibid., pp. 12-13).

### Recommendations from The Danish Public Health Association

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1. The authorities should improve and nuance health policies and strategies, e.g. by seeking more knowledge on minority groups' health and creating national health networks among people with minority background.
2. Municipalities should create a health-promoting local environment, e.g. by establishing health centers in areas with many minorities and promoting integration and social activities.
3. Focus should be on health in the entire life cycle. There should be preventative examinations and vaccines for all ages to make sure everyone's needs are met.
4. Improve cooperation across sectors and professions, e.g. general practitioners, hospitals, and municipalities.
5. Improve cultural competences among health professionals, e.g. by recruiting health professionals with minority background and providing cultural training for students and professionals.
6. Improve access to health facilities, e.g. by including knowledge about the Danish health system in the municipalities' integration programs and develop information material in multiple languages and media.
7. Reduce language barriers by providing free translators for patients with minority background.
8. Improve documentation and research in minority groups' health.

(DSFS 2020, pp. 20-27)

### 2.3 Previous research on ethnic minorities in media

In this subchapter, I review literature on previous representation of ethnic minorities and migration in the Danish media. The review establishes a context for my analysis and helps me form an impression of whether the coverage of minorities during the COVID-19 pandemic has been more positive or negative than usually.

Hovden et.al. (2018, p. 328) refer to previous studies concluding that Danish media since the 1970s have tended to relate refugees and immigrants to negative issues such as crime, racism, and social problems. The potential negative consequences of immigration are seen as not just economic but also cultural, as mentioned in previous subchapter. The incoming refugees and migrants are viewed as coming from “disorderly societies” and bringing chaos to Denmark (Olesen 2020, p. 976). During the COVID-19 pandemic, for instance, Danish right-wing populist media portrayed Muslim immigrants and “Muslim culture” as the reason why non-Western minorities get sick as well as a threat to Danish society because the “Muslims” bring COVID-19 to Denmark from the outside (Marker 2020, pp. 300-301). The right-wing media also accused the authorities – or “the elite” – of unjustly privileging the minorities over the Danes (ibid., p. 303), criticizing not only the dangerous Others (the Muslim minority) but also the authorities.

In the mainstream media, minorities are also often presented in media as something different or exotic, for instance through photos of women in hijabs and Arabic grocery stores (Løngreen 2001, p. 26). Moreover, immigrants, refugees, and asylum seekers are generally portrayed as victims and often spoken about by others, for instance, public officials, but less frequently speaking for themselves (Hovden et.al. 2018, p. 326). When they are given a voice, Løngreen finds, they are acting as representants of the minority and not as part of majority Denmark. This way minorities become outsiders and remain invisible in representations of the majority or the “typical” Denmark, which maintains the image of minorities as “the Others” and prevents them from taking up space and roles in Danish society (Løngreen 2001., p. 28).

Løngreen also argues that the ethnic “Others” in the media only include the minorities who are visually different, for instance concerning skin color and way of dressing, and look like the Others we see in media reports from developing countries (ibid., p. 25). White minority citizens from, for instance, Sweden, Germany, and The US are not othered in the same way (ibid., p. 23). Løngreen explains this with the similarity between the ethnic minority groups, who are visibly different from the stereotypical white Dane, and the ethnic Others representing developing countries. These ethnic Others are often represented negatively as victims of war, oppression, ethnic cleansing, or natural disasters, which supports the image of ethnic minorities in Denmark as passive and living off the system (ibid., p. 25).

It should be noted that Løngreen’s article is 20 years old and the sources, she bases it, on even older. I would suggest that the representation of minorities has become at least a bit more diverse since then. In a slightly more recent study, Christiansen (2011, p. 338) looks into how eight Muslim women – who belong to more of a religious than ethnic minority in

Denmark – enter the Danish mediascape and what strategies they apply to make their voice heard. These women are taking up space in the media on their own terms, nevertheless, they do it cautiously to avoid being othered due to their religion or choice of dressing (ibid., p. 350).

During the past years, refugees (and predominantly Syrians) have received significant media attention in Denmark, starting with the arrival of large groups of refugees in 2015 and 2016. Olesen (2020) looks into two reportage photos documenting the arrival of refugees in Denmark, one of a man spitting on the refugee masses and one of a police officer playing with a little girl on the highway. This study is interesting because it looks at the reactions to the photos rather than media coverage of refugees, showing how debate participants construct themselves and “Danish values” in relation to the Danes depicted in the photos.

The photo of the man spitting on the refugees was met with an outrage by many Danes, who dissociated themselves from him by claiming that he did not represent the typical “Danish” values of empathy, sympathy, and solidarity. Some readers of the Danish newspaper *Ekstra Bladet* nevertheless sympathized with the man as they considered the refugees a threat to Danish identity, national coherence, security, and economic well-being. They legitimated the spitting man’s behavior with ‘their’ acts of violence against ‘us’ (ibid., p. 973). The Danish newspapers themselves were also generally more negative towards the 2015 refugee arrivals and more often emphasized the cultural problems of migration and the threat to national security. Meanwhile, Norwegian newspapers were less focused on the economic aspect and Swedish media hardly mentioned problems at all (Hovden et.al. 2018, p. 342).

Interestingly, the Danish policeman, who was photographed playing with an Iraqi refugee girl on the highway, was both lauded as a carrier and defender of Danish values – that again have to do with empathy and kindness – and at the same time criticized for being naïve and ignorant towards the troubles ‘thousands of law-abiding Danes’ had to face because refugees were walking on the highway (Olesen 2020, p. 976). The latter reaction again reflects the view of migrants and refugees as a threat or annoyance, not only in media but also among parts of the Danish population.

Although Hovden et.al. (2018, p. 325) notice that the Scandinavian media coverage of the refugee arrivals in 2015 were overall less negative than in the Northern European neighbor countries, they also conclude that the humanitarian aspects of the crisis became less prominent in the Scandinavian press over time, just like in the rest of Europe. In general, the Danish newspapers more often mentioned the negative economic consequences of the arrival

of refugees while Swedish and Norwegian print media emphasized the humanitarian perspective more strongly (*ibid.*, p. 339).

Some studies (Hovden et.al. 2018; Løngreen 2001; Olesen 2020) draw links between the media coverage and existing discourses and/or policies on migrants and refugees in Denmark. Løngreen (2001, p. 20) discusses whether the media describe or actually construct a societal problem and concludes that the media created the Danes' negative perception of ethnic minorities. Hovden et.al. (2018, p. 327) note that the different media coverage of refugees in Denmark, Norway, and Sweden are consistent with observed differences in immigration policy and public discourse in the three Scandinavian countries.

Van Klingeren et.al. (2015, p. 269) investigate whether the news in respectively The Netherlands and Denmark have an impact on people's attitudes towards migration by analyzing news from the two countries in the period 2003-2010. As the scope of the media's coverage of immigration does not always correspond with actual immigrant inflows, the aim of their study is to investigate how the media affect opinions compared to real-world data on migration. The authors conclude that the Danish media's coverage of refugees and migrants varies a lot, peaking in certain periods and dropping in others (*ibid.*, p. 274). Interestingly, the data could not prove a significant effect of neither positive nor negative news content on people's attitudes (*ibid.*, p. 276). This is not consistent with the arguments of the aforementioned studies, but Van Klingeren et.al. also state that the limited influence of media variables in Denmark does not mean that the media has no impact at all (*ibid.*, p. 279). This study provides an example of quantitative analysis of media material. This method has nevertheless been called too simplistic to determine the impact of media texts (Macnamara 2005, p. 5). Van Klingeren et.al. (2015, p. 269) do acknowledge the limited predictive power of their model. They also raise the possibility that media are in fact influenced by public opinion and not the reverse (*ibid.*, p. 280). Løngreen (2001, p. 20) also considers this but argues that the media do reflect the existing discrimination but also contribute to create a public discourse on ethnic minorities. The media reflect the public opinion on the "ethnic Others" as well as contribute to a mediated perception of how these Others "are". The media therefore simultaneously present and construct a societal problem, she argues.

Looking at the COVID-19 situation in Denmark, one could therefore both argue that the media only presented the fact that non-Western minorities were unproportionally infected with COVID-19 and that the media contributed to the public discourse of ethnic minorities as a problem to society. This will be further outlined in chapter 5.

### 3. Theoretical framework

In this chapter, I introduce the concepts and literature I will use as framework for my analysis. I first discuss the concepts of culture and ethnicity, and then I move on to Deborah Lupton's writings on risk, disease, and othering. I believe the terms culture and ethnicity are important to introduce since these are used in various contexts and sometimes synonymously. As there is no fixed definition of neither concept, I therefore find it important to clarify how I understand these.

#### 3.1 Culture and ethnicity

Some sources connect the disproportionate number of COVID-19 patients with non-Western background to the ethnic minorities' culture and subsequent lack of civic mindedness (Høgh 2021; Collignon 2021; Hilmersson 2021; *Jyllands-Posten* 2021; Dahl in Sørensen and Vestergaard 2021).

The term **culture** is used in various ways and on different occasions (Hastrup 2004, p. 16). "Culture" is defined in the Cambridge Dictionary as "the way of life, especially the general customs and beliefs, of a particular group of people *at a particular time*" (Cambridge Dictionary n.d., my emphasis). I have emphasized the words "at a particular time" because these imply that a certain culture is not fixed and neither remains the same forever.

One of the earliest anthropological definitions of culture were made by Edward Burnett Tylor (1871), who described the term as "that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society". Although Tylor does mention immaterial concepts such as law, morals, and belief, it has been argued that his definition links culture to things and customs (Hastrup 2004, p. 15). The definition describes different traits but says nothing about how people use culture to navigate the world and make decisions.

Another definition was made by Clifford Geertz (1973, p. 5), who saw culture as a "web of significance" that humans themselves have spun. That is, culture represents socially established codes and is therefore a public or social phenomenon. A culture is articulated through behavior and social interactions, not only in form of artefacts or individual beliefs (ibid., p. 17). Geertz also stresses that culture is not a power that can explain social events, behaviors, institutions, and processes, but rather a context in which actions are given meaning (ibid., p. 14). In Geertz's definition, culture goes from being material things and characteristics to a way people interpret and perceive their surroundings.

Culture thus also influences what people consider unhealthy or dangerous and how disease is experienced and spread. Responses to diseases may therefore vary between different cultures. Drawing on Mary Douglas, Lupton argues that culture not only influences people's understanding of danger but also "contributes to a communal rather than an individualistic notion of risk, taking into account mutual obligations and expectations". The difference attitudes towards wearing face masks in Denmark and China could be an example of such communal expectations. Refusal to comply with protection advice, such as wearing masks, may therefore not stem from lack of understanding of the guidelines but a preference that depends on what is expected from the individual's cultural background and shared conventions. In such situations, it is pointless to focus on providing 'better' communication or more education about risk (Lupton 2013, p. 54). From this point of view, one can thus argue that members of ethnic minority groups may choose to not follow the Danish restrictions due to cultural beliefs but at the same time, the Danish authorities' approach to the COVID-19 pandemic also represents political and moral judgements on risk.

It may seem very cultural relativistic and too easy to conclude that it is all just a matter of culture, and Lupton also stresses that Douglas does not deny the existence of real risks or dangers, such as disease:

[T]he reality of dangers is not at issue. The dangers are only too horribly real, in both cases, modern and pre-modern. This argument is not about the reality of dangers, but about how they are politicized. This point cannot be emphasized too much. (Douglas in Lupton 2013, p. 55)

However, I would argue that presenting preventative measures as a matter of collective preferences puts too much emphasis on cultural conventions and simultaneously may construct cultures as static and never changing. Although culture influences the way societies view and act in the world, the explanation "it's because of their culture" risks excluding social determinants of health and other factors that influence individual preferences and cannot be attributed to culture. Furthermore, simply connecting non-Western minorities' behavior to "their culture" falsely constructs persons with non-Western background as a single group with one ethnicity and one culture, erasing inter- and intragroup differences. Although "culture" is often used to refer to ethnicity or race in medical anthropology (Lupton 2003, p. 15), culture and ethnicity are not the same, and within one ethnic group, there may be several cultures and sub-cultures (Barth 1969, p. 11). Norwegian anthropologist Fredrik Barth argues that culture is rather an implication or a result of ethnic group organization. Cultural traits reflect the external circumstances of a group, and there may therefore be internal differences within the

same ethnic group (*ibid.*), just like members of the same cultural group may not share ethnic origin.

**Ethnicity** is, like culture, a term that is fluid and contested. Researchers generally agree that ethnicity refers to identity, social or cultural boundaries between “us” and “them”, and the feeling of belonging to a group (Peterson and Ålund 2007, p. 16). Some discuss whether ethnicity is socially constructed and changing or if the phenomenon is intrinsically connected to culture and something that is naturally given like nationality (*ibid.*, pp. 16-17). Barth is usually referred to as the one who broke with the understanding of ethnic groups as units created by biology and shared, overt cultural values, making up a field of communication and interaction and identifying members as distinguished from other categories. Barth does not reject these characteristics but further sees ethnicity as a social process. According to him, ethnicity is created in the encounter with other social collectives, and ethnic distinction involves processes of inclusion and exclusion (Barth 1969, pp. 10-11). You define what you are in terms of what you are *not*. Of course, the inclusion/exclusion process is only a part of the group building, but I find it important to note that ethnic groups do not develop a culture in isolation from others (*ibid.*).

Like culture, ethnic positioning provides individuals with a mode of interpreting the world and put themselves and their peers in relation to other groups, often through dominance and contestation. Lastly, it should be noted that belonging to a certain ethnic group is often seen to imply that one cannot belong to other groups, although individuals may in practice belong to a number of ethnic groups (Anthias and Yuval-Davies 1993, p. 4).

Ethnicity organizes interaction between people and may even define the status of members of a certain group (Barth 1969, p. 17) and is therefore inherently political (*ibid.*, p. 37).

Anthias and Yuval-Davies (1992, p. 3) follow Barth’s view of ethnicity as a relational phenomenon that is shaped by the surroundings and political context. They further argue for an intersectional approach to ethnicity, meaning that the phenomenon is closely tied to other factors such as class, gender, race. Although they point out that culture is often used to perform ethnicity and in practice provide credentials for membership of an ethnic group, Anthias and Yuval-Davies also assert that ethnicity is not predicated only on common culture but can be focused around other signifiers such as religion, language or race. They agree with Barth that ethnicity is a social construction and that ethnic boundaries can be changed and are inherently political, meaning that the dominant groups (whether a majority or minority) have the privilege of controlling the means of communication and cultural production and thus naturalizing their worldview (*ibid.*, p. 6). What is categorized as “ethnic” therefore varies

depending on the context. A white Swedish resident in Denmark may not be classified as an ethnic minority in the same way as a Syrian person, who may in turn have belonged to the majority population in her home country but described as “refugee”, “Syrian”, or “Muslim” in Denmark. Similarly, migrant workers of different ethnic origins may for instance become “ethnicized” and merged into the category “non-Western” through state legislation or by the ways they are identified by the majority population (ibid., p. 6).

The pursuit of different political ends may entail exclusionary and inclusionary practices, for instance, when actors argue that ethnic minorities do not have solidarity and thus exclude them from the general group of Danes. Ethnicity can therefore be a medium for class, nation, or state formation. When the Danish prime minister used the term “civic mindedness” as a specifically Danish trait, ethnicity similarly became a tool for explaining why minority inhabitants in Denmark do not comply with the restrictions, regardless of how many of their peers actually followed the rules.

It is nevertheless possible to challenge the dominant group’s construction of minorities. At any specific time, there may be a dominant view of what characterizes the essential character, needs, or interests of an ethnic group – but this is always subject to change depending on the context (ibid.). Some actors in Denmark, for instance, challenge the narrative of ethnic minorities lacking civic mindedness when they argue that minorities fall ill because they live close together and have jobs that prevent them from working from home. This does not mean that all ethnic minorities necessarily belong to the working class. But class positioning may be an outcome of the opportunities and access to resources a person has depending on her ethnicity (ibid., p. 14).

### 3.2 Risk, responsibility, and the Other

“On the appointed day, everyone is ordered to stay indoors: it is forbidden to leave on pain of death. The syndic himself comes to lock the door of each house from the outside; he takes the key with him and hands it over to the intendant of the quarter; the intendant keeps it until the end of the quarantine. Each family will have made its own provisions; but, for bread and wine, small wooden canals are set up between the street and the interior of the houses, thus allowing each person to receive his ration without communicating with the supplier and other residents; meat, fish and herbs will be hoisted up into the houses with pulleys and baskets. If it is absolutely necessary to leave the house, it will be done in turn, avoiding any meeting.”  
(Foucault, 1975)

The quote above is from “Discipline and Punish” by Michel Foucault and outlines instructions from seventeenth century-France on what to do if the plague arrived in a town.

While the restrictions during COVID-19 in Denmark were far from as strict as those described by Foucault, the first months of lockdown nevertheless reminded me of his text. With the pandemic followed a time of disciplining and surveillance in Denmark. Just like the plague in seventeenth century-France was countered by order and discipline, so was COVID-19 in Denmark 2020. People were advised to stay home. Face masks were required. Marks on the station platforms showed me where to stand to keep proper distance to my fellow passengers.

All societies develop strategies and belief systems to deal with danger. But unlike in the past, modern-day Denmark and other Western societies no longer consider disease something uncontrollable or a result of God's wrath or punishment. Today, our knowledge of diseases and control of life has increased and so has the assumption of people's individual responsibility in case of illness (Lupton 2013, p. 6).

Lupton elucidates the cultural aspect of disasters such as global pandemics. She describes how 'risk', in contemporary Western societies, is widely used to describe deviations from the norm, misfortune and frightening events<sup>3</sup>. The focus on human responsibility also assumes that 'something can be done' to prevent this misfortune (Lupton 2013, p. 3). In Denmark as well, there is an expectation that patients take responsibility for their own illness by actively trying to cure it (Nielsen & Hermansen 2018, p. 9) and similarly, an expectation that the population demonstrate civic mindedness and for the well-being of society (Villadsen 2021, p. 230).

To Lupton (2013, p. 10), the term risk is also "a normative statement of morality because it incorporates the notion that it may involve harm to someone or something". If you take a



**Figure 3** "Protect yourself and others". During the pandemic, marks on the train platforms in Denmark directed passengers where to stand while waiting. Photo by the author.

<sup>3</sup> Lupton (2013, p. 204) asserts that risk may also be intriguing to some people, who create a counter-discourse representing risk-taking more positively. When lockdown restrictions in Denmark lifted, going out, hugging friends, and having parties may have felt like a relieving escape from the bounds of the quarantine and indeed considered something positive among many social groups. But for the sake of space and focus, I will not get further into this aspect in this thesis.

risk, for instance by hosting a big party during the COVID-19 pandemic, you do something immoral as you put yourself and others in danger. During the lockdown, the call for civic mindedness likely became a method for many Danes to cope with social deprivations and restrictions (Villadsen 2021, p. 245). But the rhetoric also led to clashes, not only between majority- and minority Danes but also between groups such as party-craving youth and worried elders, whose perception of risk differed from each other.

Risk is thus intimately connected to notions of politics, responsibility, and blame (Lupton 2013, p. 54). Although a danger objectively exists, the interpretation of and response to it may vary and so may the perception of *who* is dangerous (ibid.). The labelling of danger and the dangerous is also a way of dealing with deviance or maintaining social order. Different social groups will distance themselves from "the Other" that is labelled a risk (ibid., p. 56). In a society, where multiple social groups co-exist, tensions could obviously rise between those different systems. I will stress here that such social groups need not be separated by ethnicity, as I have shown with the example of the clashing preferences between youth and elderly people. COVID-skeptic groups such as the Danish group Men in Black, which has become infamous for violent demonstrations against the COVID-19 restrictions, are neither characterized by one common ethnicity or culture

All cultural classification systems have anomalies, things that do not fit in. These anomalies are identified via the concept of risk, stigmatized, and considered "polluting persons" (ibid., p. 61). Combined with the ideal of individuals taking responsibility for their own health and behavior, it is easy to see why this "Other"-label could be plastered on members of a group that is considered to not share the same perception of disease and danger, although there may be internal differences. As mentioned, someone must be blamed for misfortune in contemporary Western cultures, as we no longer ascribe death and disease to divine powers beyond our control (ibid., p. 64). "The Other" remains central to the ways of thinking and acting about risk (ibid., p. 172). Otherness is, very simply, a "product of observations of difference". The Others disturb the order of society (ibid., p. 173). When a group is identified as risky or dangerous, this requires control and intervention.

Lupton describes the concept of Otherness as related to those of embodiment. In Denmark, we want control of our lives, of our bodies, and what comes inside and goes outside of them (ibid., p. 176). What we find disgusting or even dangerous is what threatens our bodily or self-integrity (ibid., p. 180). Now, the COVID-19 pandemic has put a threat to this control. The importance of maintaining distance to others' bodies has become even bigger. We need to identify the dangerous bodies to stay safe.

Hygiene standards become a way of identifying the Self and the Other (writing this, the COVID-19 mantras “wash your hands” and “keep distance” echo in my head), because the Other is considered “the contaminated, polluting threat to the purity of Self”. The bodies of the Other – often non-Whites – are represented as unreasonable, uncivilized, and prone to violence or disarray (ibid., p. 182). The speakers and authors of the media material, I analyze in the thesis, do not directly label people with non-Western background as impure, but they still construct them as the polluting Other by ascribing increasing infection rates to the behavior of this particular group. The Others are, for instance, threatening our integrity by “stealing our freedom” (Vermund, 2020).

Otherness involves not only the binary opposite of what is "us", but also the uncertain, the confusing, what blurs the boundary between binary positions (ibid., p. 174). Between the Self and the Other there are “hybrid identities”, bodies that transgress cultural boundaries, are neither the Self nor the Other, a mix that challenges the established ideas about different types of cultural identity (ibid., p. 184). Such hybrid identities cannot easily be categorized as either friend or enemy but seek to remake cultural boundaries and therefore cause confusion, fear, anxiety and even hatred among the privileged group (ibid., p. 186). They still pose a threat to the social order.

In short, the things that fall outside cultural categorization systems tend to arouse anxieties and fears along with what is classified as “the polluting Other”. These Others can be constructed through their features, their divergent behavior, or even their address as people develop a “mental map” classifying certain areas as safe and others as dangerous, depending on social relations and the kinds of people who inhabit or pass through these spaces (Lupton 2013, pp. 197-198). To keep risky individuals out of areas that are not considered to be “for them”, members of the dominant group often take measures to control those who are considered dangerous or contaminating (Lupton 2013, p. 201).

Even though they may be seen as polluting and a potential threat, marginalized groups may also be constructed as vulnerable and “at risk” from the dominant group (Lupton 2013, p. 201), which some debaters and I myself do when arguing that ethnic minorities are more exposed to COVID-19 because of smaller apartments or inability to work from home. Both perspectives run the risk of constructing both groups as stereotypical and static when separating them into “us” and “them” constructs.

### 3.3 The language of disease

It matters how we talk about disease. According to Lupton, metaphors, associations, and comparisons, are often used in a medical context. This language is not politically neutral. It influences how we view our social context. (Lupton 2003, p. 59). She draws on Sontag to show how language can be used to make moral judgement about the ill. When disease is portrayed as something evil, it in turn demonizes the patient (ibid., p. 61), although the ill may also be seen as vulnerable and *at risk* rather than *a risk* (Lupton 2013, p. 201). Sontag has also been criticized for arguing that metaphors should be completely removed from medical language (Lupton 2003, p. 61). However, her points about how some diseases like HIV were portrayed as punishments for unhealthy lifestyles (ibid.) are somewhat similar to the way some debaters talk about COVID-19 among ethnic minorities – it is their own fault that they are getting COVID-19 because they do not abide by the rules.

The language of warfare is common in case of infectious diseases (ibid., p. 65) and also relatable to COVID-19. Around the world, health staff has been referred to as “frontline workers”, and the Danish prime minister’s emphasis on civic mindedness as a specific Danish virtue made it difficult to protest or divert from the government’s views without appearing un-Danish or unpatriotic (Villadsen 2021, pp. 245-246). Warfare language appeals to the need to mobilize against emergency (Lupton 2003, p. 65). When someone does not take part in this mobilization, it is easy to judge them as “traitors”.

This approach, combined with the expectation that ill persons take responsibility for their own health, makes it easy to blame COVID-19 patients, who did not or could not comply with restrictions, for their own misfortune. Failure to act preventively may be considered a sign of irresponsibility, and once a person has fallen ill, he or she is expected to seek treatment (ibid., p. 107). Not complying with the cultural norms underpinning an illness may result in moral judgement if the illness is considered to be the sick person’s own fault. This way, illness serves to make moral distinctions and control the social order (ibid., p. 99).

Although such different belief systems play a role in conflict, Lupton does not account for the socioeconomic factors that may also influence people's ability to follow the government's recommendations. It is well established that there are social determinants of health (WHO, n.d.), and these social determinants may be created through competition for resources and control entailing exclusionary and inclusionary practices. As Anthias and Yuval-Davies show, such exclusion can be based on ethnicity. For instance, newly arrived migrants and refugees in Denmark do not have access to the same resources as native Danes and political barriers

such as the lack of free translation services in health care, may hinder them from achieving equally good health. Again, not all ethnic minorities may be in a subjugated position but there are political instruments in place to naturalize the dominant group's worldviews and control outsiders.

## 4. Material and Methods

In this chapter, I explain the selection of data for my thesis and my choice of analysis method. I focus on the collection of media material during the period February-March 2021 as the data from my fieldwork with DRC will not be the foundation of my analysis. Finally, I cover the limitations to my research and my ethical concerns.

### 4.1 Selection of material

I rely on news and debate articles that I gathered in the period February-March 2021. I chose to not include data from my fieldwork with DRC in my analysis, since many of my participants had agreed to be part of a field study for DRC but not specifically an academic paper. I also had limited options to get informed consent from all of them, which I will further elaborate on in the Ethical Concerns section.

I chose to include news and debate articles concerning COVID-19 and non-Western ethnic minorities, as media may play a role in the "othering" process of certain groups but also may serve to spread awareness and persuade citizens to avoid health-related risks (Lupton 2013, p. 14). For instance, messages from the Danish Health Authority would air on tv and radio (in Danish) during the lockdown period, reminding the audience of the authorities' recommendations to avoid infection.

Although it is discussed whether media represent or create public discourses, I found it relevant to look into the dominating media narratives because documents, such as newspaper articles, take part in shaping reality. By describing an issue, documents modify what is the problem and in turn who is responsible for solving it (Asdal 2015, p. 78). What is chosen as a news story, and how this story is written, impacts the worldview of the readers because people read news to get informed. Even though people may not always trust the media, these remain a source of information. Some people may not read entire articles but see a headline on the media's website or shared on social media and still form an opinion and maybe even participate in debates on forums like Facebook.

I chose a sample of material from Denmark's ten most read newspapers. I also included three local media. The sampled material is a combination of news and debate articles expressing the author's personal views.

What I am interested in is mainly what the authors or interviewed people say and how they express it, less so the audience as my sources are mainly large national or regional newspapers addressing a broader target group. That said, the different media may traditionally represent certain value sets and thus attract a certain group of readers. In the following paragraphs, I therefore shortly introduce the media I have used in my thesis:

**Danish Broadcasting Corporation (DR)** is the Danish public service corporation, providing television, radio, and online news. DR is a public institution but operates independently from the authorities. The service has been accused, especially by right-wing parties, of transmitting socialist propaganda and favoring left-wing political views. However, DR itself states that the channel “commits to reach all parts of the population” (dr.dk, n.d.).

**Berlingske** is Denmark’s oldest newspaper. Today, it is part of a whole media group, Berlingske Media, that also publishes *BT* and *Weekendavisen*. *Berlingske* is said to be the more conservative newspaper of the bourgeois, and although the paper is politically independent, the media group identifies as right-leaning (Berlingske Media, n.d.).

**BT** is considered a tabloid media. The newspaper addresses “city people who love news, sport, and entertainment” (Berlingske Media, n.d.). It publishes short news stories and uses clickbait headlines.

**Information** was first founded as an illegal rebel newspaper when Denmark was occupied by Nazis during World War II (*Information*, n.d.). It is politically independent but said to be a left-wing newspaper. The paper mainly publishes longer in-depth articles.

**Jyllands-Posten** is Denmark’s largest national newspaper. It is politically independent but said to be right-leaning. The paper puts emphasis on the freedom of speech and is known for the controversy of the Muhammed drawings in 2005 (*Jyllands-Posten*, n.d.).

**Kristeligt Dagblad** describes itself as “the paper for all Danes about the big questions in life”. It was once a Christian newspaper but is now religiously independent and focuses on ethics, literature, and questions about values and culture (*Kristeligt Dagblad*, n.d.).

**Politiken** is sometimes mockingly called “the politically correct newspaper”. According to the editorial board, the paper centers on power and people’s relation to power, and its content mainly focuses on culture, contemporary society, and debate (*Politiken*, 2017). Today, *Politiken* and *Jyllands-Posten* are owned by the same media group, JP/Politikens Hus.

**Weekendavisen** is considered an intellectual newspaper due to the length of the articles and sometimes mocked for not addressing “the regular Danes”. The paper is founded on right-leaning values (Berlingske Media, n.d.).

**Fyens Stiftstidende** is a local newspaper covering the island of Funen, but it also contains news from the rest of Denmark. The stories are mainly focused on the local communities of Funen and the people there. The paper is owned by the media group Jysk Fynske Medier that aims to “develop the crucial role regional and local media play for democracy and cohesion in local communities” (Jysk Fynske Medier, n.d.).

**Fyns Amts Avis** is another local newspaper from Funen. Like *Fyens Stiftstidende*, the paper focuses on the local communities and is based on liberal, democratic values, according to the editorial board (*Fyns Amts Avis*, n.d.). *Fyns Amts Avis* is also owned by Jysk Fynske Medier.

**Århus Stiftstidende** is a local newspaper mainly covering Denmark’s second-largest city Aarhus and the surrounding area. The paper also publishes from Denmark and the rest of the world, and it is owned by Jysk Fynske Medier.

When selecting material, I specifically searched for articles from the periods 1 August 2020-31 September 2020 and 1 February 2021-31 March 2021. I did this to limit the amount of data to make it suitable for qualitative analysis, and I selected the two time periods as they cover times of increasing COVID-19 rates in Denmark. Moreover, ethnic minorities received significant attention in these periods as a high concentration of the COVID-19 patients reportedly belonged to an ethnic minority group or were from areas with high concentration of minority inhabitants. In total, I looked at 52 news and debate articles. Of these, 13 news or debate articles pointed out socioeconomic factors as the reason why non-Western minorities more often get COVID-19, as in this debate article from September 18, 2020:

“‘No one in Denmark can be unsure of the COVID-19 guidelines,’ said the prime minister on August 15. For researchers working with relations between language, society and majority- and minority citizens, these words mainly display lack of understanding of Denmark as a multi-lingual society. This time this lack of understanding has social and health-related consequences.” (Karrebæk and Sørensen, 2020)

In 20 articles, the author or speaker instead links the high infection rate among people with non-Western background to their culture, lack of civic mindedness, and/or lack of respect for Danish regulations:

“‘Sociologists constantly try to explain the unproportionate infection rate with housing conditions and frontline work, but these explanations disempower people and free them from any kind of responsibility, guilt, and sense of right and wrong. People have an individual

responsibility – also when they belong to a minority group,’ says Henrik Dahl, who explains the infection rate with ‘a parallel society where people generally do not care about Danish law.’” (Sørensen and Vestergaard, 2020)

The material was selected via the databases Retriever Media and Infomedia. I also found several articles through the website of Danmarks Radio (DR), the national Danish public service corporation. When searching the databases, I first used the key words “COVID-19” and *indvandrere* OR *etniske minoriteter* (Danish for “immigrants” and “ethnic minorities”). Later, I included “corona” as alternative to “COVID-19” as I realized that many media used this word.

I decided to focus on articles from media with national coverage as they reach a wide audience all over Denmark. I included debate articles, but I purposefully left out articles from media with a strong political agenda, such as the right-wing populist media *Den Korte Avis*, as these are not regarded as reliable sources and even labelled “fake news” by established media and researchers (Marker 2020, p. 296). I was more interested in seeing how politicians, minority representants, and experts address a supposedly broader group of readers. I have excluded articles from local newspapers, except for *Fyens Stiftstidende*, *Fyns Amts Avis*, and *Århus Stiftstidende* as these media cover geographical areas, where two outbreaks of COVID-19 among ethnic minorities received intense media attention; among the Somali minority in Aarhus and among residents of the area Vollsmose in Denmark’s third-largest city Odense, which is home to a large concentration of residents with non-Western background.

I also chose to focus on printed/web media, which means that my material only represents a fraction of the debate on COVID-19 and minorities. My material is a sample and by no means exhaustive, but I do feel that it represents the overall media narratives of non-Western minorities and COVID-19 in Denmark.

## 4.2 Analysis Method

After selecting my material, I conducted a qualitative media content analysis. Media content analysis has been used to study how different issues, e.g. violence and racism, are portrayed in various forms of media from newspaper articles and films to interview transcripts and scientific discussions (Macnamara 2005, p. 1). The method can be both quantitative and qualitative (ibid., p. 4). The qualitative approach pays attention to the audience, media, contextual factors and looks into text elements such as positive/negative adjectives, metaphors, the tone of the text, visual imagery, and the binaries established and how these are positioned and used (ibid., p. 17).

While quantitative content analysis tries to identify future effects of media content, the qualitative approach seeks to understand what the content says about society in which it is produced. Both methods are useful. Most researchers agree that media both create public opinion and reflect existing attitudes and culture (ibid., p. 3). As I aim to look into how culture and/or ethnicity has been defined, used and misused during the COVID-19 pandemic in Denmark, I found qualitative content analysis suitable for this purpose.

The disadvantage of qualitative media content analysis is that there is very little precise definition of this methodology (ibid., p. 15). The approach also relies heavily on the researcher's reading and interpretation of a smaller sample of content, and it has therefore been accused of being "unscientific and unreliable" (ibid., p. 5). As a humanities student, I have encountered similar allegations, and I find it important to stress that the purpose of quantitative and qualitative analysis is different. While quantitative analysis aims for representativeness, qualitative analysis provides in-depth insight into a given phenomenon. Moreover, Newbold argues that "there is no simple relationship between media texts and their impact, and it would be too simplistic to base decisions in this regard on mere figures obtained from a statistical content analysis" (Newbold in Macnamara 2005, p. 5). Ideally, quantitative and qualitative should be combined. I will discuss objectivity and the positioning of the qualitative researcher further in the Ethics section.

Choosing data for a qualitative study is subject to certain standards and procedures, just like in quantitative research. But data selection for qualitative research should be guided by a conceptual question rather than concern for "representativeness" (ibid., p. 17). Miles and Huberman (1994, p. 34) suggest three techniques for selecting material for qualitative analysis: 1) selecting apparently typical/representative examples, 2) selecting negative/disconfirming examples, and 3) selecting exceptional or discrepant examples. When I selected a sample of articles for analysis, I looked for texts claiming that ethnic minorities did not demonstrate civic mindedness as well as texts that pointed to socioeconomic factors causing a higher infection rate.

Mayring (in Macnamara 2005, p. 17) also argues that two central procedures for qualitative text analysis are inductive category development and deductive category application. This means that categories for analysis should be developed before initiating the process and then applied to the object of analysis – in this case, a media text. This way, Mayring create guidelines for a sort of a priori design for qualitative analysis; categories should not be created as the analysis process goes on.

In ethnographic research, however, researcher-constructed categories do not always match the topics brought up by participants. Rossman and Rallis (2012, p. 278) distinguish between *etic* categories created by the researcher and *emic* categories based on topics the participants themselves bring up. When I looked for media material for my thesis, I already had certain topics I wanted to know about. But I also found articles that brought up additional topics. For instance, I knew before starting the analysis that I wanted to look at how the culture and ethnicity of minorities was being described, and what was determined as the source of the problem with high COVID-19 rates among this group. But when I went through my theory and the articles again, I decided to add another category of civic mindedness as the word repeatedly came up in the material.

Emic categories serve to provide the researcher with a better impression of what informants consider important and I do not think that the views of authors and speakers in my material should be disregarded. I may not have followed Mayring's guidelines completely, but neither would I say that the categories are created simply "at the researcher's whim", as Macnamara puts it, as the emic categories were added because I saw a recurring theme in the articles or interviews.

In my analysis, I looked for how the author or person quoted talked about ethnic minorities – as a problem/the reason for an increasing number COVID-19 cases or as a victim or even a hero going to work every day in the middle of the pandemic. I also paid attention to what words were used to describe the subjects as the word "immigrant", for instance, has a more negative connotation than "citizen with minority background".

I also looked at whether the author or person quoted blame minorities' culture for the spread of COVID-19 or asserts that culture does not spread COVID-19 as well as the quotes person or author's attitude towards ethnic health inequity. I also looked for the mentioning and use of the word "civic mindedness" or "unity" and other language of mobilization.

Finally, I looked for the kind of "proofs" that the speaker in the texts use. Some authors of debate articles for instance mention that a certain amount of people with minority background in the suburb Vollsmose are unemployed, but that does not necessarily say anything about their willingness to follow COVID-19 restrictions. It does, however, contribute to a negative image of inhabitants in Vollsmose.

Because qualitative content analysis also takes into account the society surrounding the media, readers, and the historical context, I found it relevant to go a bit back in time to see how migrants and refugees have been considered "a problem" for years in Denmark. In the background chapter, I therefore also included primary and secondary historical sources as

well as current and past laws regulating migration and integration in Denmark. I looked for how the sources talk about migrants and refugees as well as the placement of responsibility for integration.

### 4.3 Ethical considerations

One ethical concern is the use of interview data from my fieldwork. While my participants agreed to share their experiences with DRC, they did not explicitly agree to be part of my master's thesis. Some of them I had the opportunity to reach out to via email, but many of my participants with ethnic minority background I only met once under circumstances facilitated by gatekeepers such as social workers and DRC volunteers. Due to the difficulty of tracing them, and because most of my participants possessed limited Danish language skills, I chose not to use the interviews as data for my thesis, apart from the quote and references I included in the introduction to provide a background for my choice of topic.

I also considered the risk of feeding into existing stereotypes by focusing on minorities. As Nielsen and Mogensen (2007, p. 7) write, too much focus on culture or ethnicity may suggest that refugees and migrants automatically are a problem or imply that culture is something only “the Others” have and not a thing of the majority community.

While some actors tend to reduce minority groups' behavior to their ethnicity or culture, thus creating a simplified image of the group, the same happens to the majority in this process. The actors who may “culturalize” minorities' behavior simultaneously risk creating a stereotypical and false image of the majority group. I therefore find it important to account for complexities, not just among minorities but the majority, too. Although I am critical to the media and the politicians' approach to minorities and COVID-19, I do not wish to imply that some persons are simply evil or racist. The authorities are, after all, under pressure to bring down the infection rate in Denmark, and the Danish prime minister and the mayor of Aarhus may not have had bad intentions mentioning the high infection rates among minorities, although the right-wing unsurprisingly took the opportunity to make it an issue of integration.

Writing this thesis, I also reflected on my own position. As an employee of DRC, I realize that this leads to certain bias in terms of my stance on ethnic minorities and the authorities' efforts to support this group. As mentioned above, I also side with the actors who have criticized the authorities' (lack of) action when it comes to protecting vulnerable persons against COVID-19. As many modern-day Danes, I do exemplify Lupton's statement that we cannot blame diseases and pandemics on the wrath of God but human behavior. On the other

hand, I also find it important to keep in mind the social determinants of health and I would argue that we need to focus not only on individual behavior but also the societal structures that cause or exacerbate disease.

I am clarifying this before initiating my analysis, as I had ethical concerns about my position before I started writing my thesis because of my position. But all knowledge is situated, which means it is produced by individuals who hold subjective views. Haraway (1988, p. 581) argues that researchers, who claim to be producing unbiased and objective knowledge, in turn hide their sources of knowledge and therefore are not as transparent and objective as they want to be. This obscurity in turn shields them from criticism.

Instead, Haraway argues for feminist objectivity, or situated knowledge, which recognizes that no viewpoint is ever truly objective but a mediated perception of the world. Objectivity, she argues, is therefore about acknowledging that we as researchers are partial and embodied beings and must be aware of the multiple viewpoints, we observe the world from (ibid., p. 582). We need to “split” ourselves, so to speak, because we can never see “the full picture” of a phenomenon, but what we can do is holding ourselves responsible for the vantage points we take. Positioning yourself as a researcher makes you accountable for your practices, which in turn makes your research more ethical and objective (ibid., p. 587). By being aware and open about my position, and how I am both a researcher, a DRC employee, and a majority Dane, I apply this situated knowledge.

## 5. Narrative 1: The polluting Other

“These immigrants from the Middle East region are experts in disobeying Danish law. No matter what kind of violations of rules, we look at, they are over-represented – also in violations of criminal law, traffic rules, and fraud legislation.” (Dahl in Sørensen and Vestergård, 2021)

In this subchapter, I dive into the articles in which minorities with non-Western background are presented as “the Other” – the divergent, the ignorant, the ones who are to blame for their own misfortune. Either because their culture makes them unwilling to behave according to the Danish restrictions or because they do not possess the civic mindedness that has been constructed as a trait of the Danes or Danish culture (Villadsen 2020, p. 231). I first present my findings and subsequently discuss the media material and my chosen theory.

Many actors in these articles are local or national politicians or members of political parties, predominantly from the right-wing. Two of the authors are not cited as debaters or members of political parties but appear as “regular Danes” with an opinion, and two of the articles are editorials from the newspapers *Jyllands-Posten* and *Berlingske*.

Of these actors, at least those who are politically active are in a position to work for changes that could potentially impact the unproportionate contagion rate or improve the health of minorities beyond the pandemic. However, many of these actors are the same people who stress the population's individual responsibility to take care of themselves and others, thus echoing Lupton's analysis of illness as a human responsibility (Mengesha 2020; Frederiksen in Maach 2020; Dahl in Sørensen & Vestergaard 2021; Khan 2021; Heitman in Sørensen 2021). The editorials in *Jyllands-Posten* and *Berlingske* also reflect this perception:

“It does not matter if some communities do not want to be part of society. Why should we do more while they [residents of Vollsmose, ed.] do not have to do anything themselves – such as keeping distance and getting tested? Are the residents of Vollsmose not grown-up people?”  
(*Jyllands-Posten* 2021)

The authors and speakers, who hold these views, are not necessarily unaware of the socioeconomic factors many minorities face, which are also mentioned in many of the same articles – small living spaces housing multiple generations, inability to work from home, language barriers, etc.

Although leader of the nationalist party *Nye Borgerlige*, Pernille Vermund, attributes the living conditions to “the Muslim culture” (Vermund in Nielsen and Christensen, 2021), most actors acknowledge the existence of socioeconomic factors although they have very different opinions on the impact of these. Some question whether living- and working conditions are the sole explanation for the high infection rate among persons with non-Western background, like the Danish prime minister did at the press conference on August 15, 2020 (Frederiksen in Maach 2020; Collignon 2021; *Jyllands-Posten* 2021; Khan 2021; Lilleholt in Blichfeldt 2021).

The views of high-profile experts are said to generally outweigh non-expert opinions (Macnamara 2005, p. 18), yet some actors reject or even mock researchers and health professionals, who argue that socioeconomic inequality is what causes the spread of COVID-19 (Hilmersson 2021; Høgh 2021; Tavakoli 2021; Dahl in Sørensen & Vestergaard 2021; Collignon 2021; *Jyllands-Posten* 2021). When Marie Høgh, priest and member of the Conservative Party, for instance, writes that non-Western migrants and descendants “cannot help” that they are over-represented in the COVID-19 statistics, she in fact means the exact opposite:

“They cannot help it because they are poor (because then you are obviously unable to wash your hands and keep distance). They cannot help it because language barriers make it difficult to

understand and comply with the health authorities' recommendations and guidelines – even though they have access to a corona hotline and corona information in 15 different languages.” (Høgh, 2021)

The tone of Bjarne Hilmersson's reader's letter in *Fyens Stiftstidende*, which does not reveal his profession or political affiliations, is similarly sarcastic:

“If you live in Vollsmose, it is not your fault. They [the Vollsmose residents, ed.] have such poor housing conditions and live so many people together in every apartment. They are poor. They are taxi- and bus drivers, healthcare assistants, or cashiers in Netto. Some of them, that is. Of those who have a job. We have to feel so bad for them because even after living in Denmark for 30-40 years, they can still not read or speak the Danish language.” (Hilmersson, 2021)

Høgh and Hilmersson are among the actors, who make the COVID-19 infections a matter of integration as well as culture: bad integration makes people with non-Western background unwilling to follow the guidelines, and bad integration is caused by cultural differences, more specifically between the West and the Middle Eastern/Muslim culture (Høgh, 2021; Hilmersson, 2021). Bad integration is therefore to blame on the minorities, too. Others also blame the COVID-19 rates among minorities on lack of integration or take the opportunity to present non-Western people as criminals and even advocate for an asylum stop (Lilleholt in Blichfeldt 2021; Christensen & Radojevic 2021; Dahl in Sørensen & Vestergaard 2021).

In some articles, persons with minority background are even presented as a threat to Denmark, either because they bring contagion to the country or delay the reopening of society, thus jeopardizing the national economy. Former leader of the populist right-wing party *Dansk Folkeparti*, Pia Kjærsgaard, directly points out that the contagion among the Somali minority and Polish labor migrants in Denmark may have consequences for the country's economy (Kjærsgaard in Svendsen, 2020). Almaz Mengesha, member of the city council in Aarhus for the center-right party *Venstre*, is more subtle and starts out by describing the economic consequences of COVID-19:

“The COVID-19 crisis has required sacrifices from all of us, and we still see industries suffering financially, while the economic aid packages are eroding our national reserves and indebting the country for generations to come. We will inevitably pass on part of the corona bill to the next generation, we will experience a general deterioration of the major welfare areas for the next many years, and my biggest fear is that we will send the country into recession if we enter a new lockdown.” (Mengesha, 2020)

Then, she ends by concluding that minority groups who feel publicly shamed are over-reacting. Her debate article can be interpreted as a way of signaling that minority groups are not facing more hardship than the rest of the population or as a way of pushing the responsibility for the Danish economy on the ethnic minorities:

“Fighting COVID-19 is a shared responsibility. With that follows the responsibility for thinking beyond ourselves. The hypersensitive overreaction from certain groups must therefore be replaced by the civic mindedness the prime minister has asked us all to demonstrate.”

(Mengesha, 2020)

Høgh (2021) is more direct in her debate article, concluding that culture is the explanation why COVID-19 mostly spreads among immigrant groups in Europe and linking immigration to the “cultural and spiritual decay” of the Western world. Neo-liberal parliament member Henrik Dahl describes “immigrants from the Middle East region” as “experts in disobeying Danish law” (Dahl in Sørensen & Vestergaard 2021). And members of the populist right-wing party, *Nye Borgerlige*, Gert Christensen and Susan Radojevic (2021) link COVID-19 among residents in Vollsmose to parallel societies, terror, and hazardous driving:

“In a debate article in *Fyens Stiftstidende*, Kurt Hansen wonders why foreign residents of Vollsmose receive special treatment. So do we. Instead, they isolate themselves in parallel societies, where some of them have lived for more than 20 years without learning Danish, and other groups undermine the Danish democracy by planning terror and other evil such as hazardous driving in giant cars, killing innocent people and running away from the crime scene.” (Christensen and Radojevic, 2021)

These actors, directly or indirectly, create a binary between the Others – the malevolent migrants – and the law-abiding Danes, the real victims of discrimination and uncontrolled immigration. The category “Danes” need not refer solely to the predominantly white majority population. Mengesha is born in Ethiopia and adopted to Denmark (Aarhus.dk, n.d.) while Radojevic’s surname suggests roots in Eastern Europe or the Balkan countries, yet they both position themselves outside the category “ethnic minority”, exemplifying how ethnic groups are constructed in pursuit of certain political ends, as Anthias and Yuval-Davies argue.

The examples above also show how the concept civic mindedness is used to define ethnic and cultural boundaries. When demonstrating civic mindedness becomes naturalized as something Danish, it is easy to explain non-Western minorities’ failure to comply with the COVID-19 restrictions with them not being Danish or properly integrated. When this happens, there is a risk that socioeconomic factors, independent of ethnicity, are overlooked

because the infection among minorities is not presented as a problem of health inequality but a cultural and ethnic issue.

Of course, the link between risk, responsibility and morality does not only affect ethnic minorities. As previously mentioned, COVID-19 and the subsequent lockdown also caused clashes between the older and younger part of the population, and majority Danes have also faced media backlash and public criticism for not complying with the COVID-19 restrictions, for instance people going on holiday in Dubai in December 2020 and January 2021, when Denmark was in its second lockdown (Ahrens, 2021). However, I have yet to see an article explaining the majority population's behavior in terms of ethnicity or culture. Instead, Danes on holiday in Dubai are, for instance, referred to as "celebs", and it is specified that it is "young people" who gather at parties despite lockdown restrictions (*Jyllands-Posten*, 2021; Ahrens, 2021). Elsewhere, it is questioned how many Danes on holiday in Dubai actually got COVID-19 (Hilmersson, 2021). In all these examples, it is specified that a *part* of the population has broken the rules while the same authors seem to be less consideration for internal differences among minority groups or residents of Vollsmose. Moreover, some actors even portray the majority Danes facing criticism as victims, asking why these people were treated so harshly when it is not "allowed" to criticize minorities? (Mengesha 2020; Kjærsgaard in Svendsen 2020; Hilmersson 2021; *Jyllands-Posten* 2021; Christensen & Radojevic 2021; Hansen, 2021).

"One cannot help but wonder about the slowness and indulgent servility that characterizes the municipal response (to the COVID-19 cases, ed.) compared to how, for instance, the Danish mink farmers were treated," writes the author behind the editorial in *Jyllands-Posten*, referring to the quick killing of all minks in Denmark after it was reported that a mutation of COVID-19 was found in these animals (*Jyllands-Posten*, 2021).

It is not possible to identify whether the same persons criticizing tourists in Dubai also blamed minorities. But the examples above can be interpreted as a criticism of people calling out the tourists and party-goers as well as another way of constructing people with minority background as a "threat" by implying that they are being privileged over majority Danes, even if this is not necessarily the case. This is also a way, even if unintentional, of turning attention away from socioeconomic determinants of health and the different circumstances under which each group may catch COVID-19.

Something, I want to highlight here, is that these claims of the supposed privileging of ethnic minorities over the majority reminds strikingly of the discourse adapted by the right-

wing populist media introduced in chapter 2.1 (Marker 2020, p. 303). Some of actors, who make similar claims in the mainstream media, are members of populist right-wing parties. But the same arguments are also used by editors and members of other political parties that would usually not be considered as part of the extreme right-wing in Denmark. The narratives of the Other as a threat, who is being unfairly prioritized over “the real” Danes, are thus not only claims of the extreme right, but also echo in mainstream media.

As in Marker’s analysis of the discourse of populist right-wing media, the authorities or the elite are also subject to criticism in the mainstream media. A word that reappears in many debate articles is the Danish word *berøringsangst*, which is best translated into “the fear of starting a conflict”, for instance by telling ethnic minorities to comply with Danish rules (Kjærsgaard in Svendsen 2020; Leonhard 2021; *Jyllands-Posten* 2021; Tavakoli 2021). The word is often used by nationalist debaters to criticize integration policies. In my media sample, authors and speakers similarly use it to describe the Danish authorities’ efforts to bring down the COVID-19 rate among ethnic minorities, which they consider too careful or too naïve (Collignon 2021; Kjærsgaard in Svendsen 2020; *Jyllands-Posten* 2021; Tavakoli 2021).

In the final part of this chapter, I want to touch upon the seemingly neutral articles that do not point to specific reasons why minorities are sick or speculate whether they take responsibility or not. The language of these articles is largely kept simple and free of metaphors and visual imagery although the authors use certain words that signal crisis, guilt, or danger. Infection rates “explode” or “sky-rocket” (Christiansen 2021; Leonhard 2021). Non-Western ethnic minorities live in “parallel societies” or “ghettos”, which are both words with negative connotations (Leonhard 2021).

The timing of some articles may also contribute to a negative perception of ethnic minorities even if the author did not intend to do so. For instance, news of Somali bus drivers came out two days after it was known that half of cases in Aarhus were among this minority (Sennels 2020; Jørgensen 2020). The Somalis were already considered a “risk” and the headline “COVID-19-infected bus drivers are Somalis” could add fuel to the fire, especially because it is not stated how many bus drivers are actually sick. Similarly, a series of articles published in *Fyens Stiftstidende* in March 2021 revealed that residents of Vollsmose abused municipal isolation facilities by inviting guests, smoking indoors, and going out (Blichfeldt 2021; Blichfeldt 2021; Nyeng 2021). In the articles, it is mentioned several times that the perpetrators are “immigrants” or “residents of Vollsmose” who are isolated in hotels paid for

by public funding. The tone of the articles suggests that the reader should feel anger or indignation as the authors repeatedly mention that it is the *society* that pays for the isolation of this problematic group of people, which again feeds into the stereotype of immigrants as welfare scroungers (Løngreen 2001, p. 25):

“*Fyens Stiftstidende*’s exposure of citizens with immigrant background, who have been isolated in a hotel paid for by society, is met with massive condemnation. According to the hotel management, the isolated persons have ignored the rules in several cases and left the hotel – and thus broken the isolation.” (Blichfeldt, 2021)

It may be a fact that some persons do not comply with the isolation rules and that the same persons have immigrant background and come from Vollsmose. But while the interviewed sources in the articles disagree whether the problems reflect an integration problem, the authors’ use of terms like “Vollsmose residents” and “persons with immigrant background” risk constructing the issue as a matter of ethnicity or integration instead of a group of problematic individuals. This again supports the narrative of the actors arguing that COVID-19 among ethnic minorities is a result of culture or lack of civic mindedness. In one of the articles, the hotel manager is interviewed but kept anonymous, which the journalist justifies with “the information being relevant for the current public discussion about potential reasons for the widespread infection in Vollsmose” (Blichfeldt 2021), again suggesting that residents of Vollsmose get sick because they do not want to follow the rules.

### 5.1 Foreignness as a threat

The articles mentioned above do bring up an important issue of what to do with individuals who do not abide by the restrictions that are supposed to protect society from danger. Like in Foucault’s plague-stricken town, discipline and order were seen as the solution to rid society from disease during the COVID-19 pandemic in Denmark. But unlike in seventeenth-century France, offenders did not violate COVID-19 restrictions at the risk of their own life but of public shaming and condemnation. The article sample in this chapter shows that media provide a platform for holding offenders accountable and imposing the moral norms (Blichfeldt 2021; Blichfeldt 2021; Nyeng 2021), but the media simultaneously become an instrument for different actors to create a new issue about integration and Danish values.

One can argue that culture does impact people’s attitudes to disease (Lupton 2013, p. 54) and in that sense can be part of the explanation for why some persons, regardless of ethnicity, choose to not abide by the COVID-19 restrictions. But on the other hand, culture is not solely depending on ethnicity (Barth 1969, p. 11) and when some actors explain the spread of

COVID-19 among ethnic minorities with culture or lack of civic mindedness, they oversimplify and culturalize the problem, constructing a polluting “Other” and simultaneously idealizing civic mindedness as a specific Danish virtue.

Despite the risk of creating such binaries between “us” and “them”, there seems to be an overall agreement between various actors in Denmark that the facts must be brought forward. Only in few of the articles, actors question if it is even necessary to disclose data based on ethnicity during the pandemic (Singh in Vestergård 2020; Frederiksen in Maach 2020). Politicians as well as researchers and journalists put forward similar arguments: to overcome the pandemic, we need to know where to put in extra resources for information and testing (Frederiksen in Maach 2020; Nørredam and Krasnik 2020; Krause in Vestergård 2020; Collignon 2021; *Jyllands-Posten* 2021). But as mentioned the same information may lead to Othering of non-Western minorities and the creation of a cultural issue that overlooks the social determinants of health that also play a part in the spread of infectious diseases such as COVID-19.

## 6. Narrative 2: “I do it for society”

“An important factor is that many of us [locals from Vollsmose, ed.] go out to work every day. We are healthcare staff and bus- and taxi drivers. We *cannot* work from home. I go to work every day and risk infecting myself and my daughter. I do it for society.” (Ganesh in Bugge, 2021)

The actors pointing to socioeconomic conditions, rather than culture or ethnicity, as the explanation of why non-Western minorities are over-represented in the COVID-19 statistics, are a mix of majority Danes and people belonging to the groups that received criticism for not complying with COVID rules, predominantly people with Somali background or residents of Vollsmose with non-Western roots.

While the majority Danes – researchers, health professionals, activists, and politicians – are mainly the ones who use words like “socioeconomic differences” or “health inequity”, the actors with minority background portray themselves as good citizens by stressing how they contribute to society or by stating that they do not understand why the COVID-19 infection rate is so high among their social group (Ahmed et.al., 2020; Idle in Sckerl 2020; Ganesh in Bugge 2021).

“Dear Mette Frederiksen. On a press conference on August 15, you demanded that ethnic minorities take their share of the responsibility for fighting the corona virus. We would like to

inform you that the Somali associations in Aarhus have taken the pandemic very serious from the start and spread information extensively.” (Ahmed et.al., 2020)

With this open letter to the Danish prime minister, the members of the Somali COVID-19 taskforce in Aarhus present themselves as good citizens who act in society’s interest. They describe themselves as Somalis but also as active, responsible members of the Danish society, they draw and blur the ethnic boundary at the same time, they become a hybrid. The same happens to Nishan Ganesh, community spokesperson in Vollsmose, when he stresses that he goes to work every day although he risks falling ill (Ganesh in Bugge, 2021).

In the open letter to the prime minister, the Somali taskforce also criticizes the Danish Health Authorities’ Somali translation of the COVID-19 guidelines for looking like a “Google translation” that is “practically useless”. This way, they do not only make themselves the heroes of the story. They also point out the villain; the Danish authorities, who do not put effort into informing minorities properly, are to blame for the unproportionate infection rate. This is a recurring binary in many other articles (Ganesh in Bugge 2021; Karrebæk & Sørensen 2020; Veis & Johansen 2020; Wejse in Kjær 2020; Hejlskov 2020; Sodemann in Jensen 2020; Elkorn et.al. 2020) although it should be mentioned that there are also people with minority background, who consider culture the reason why more ethnic minorities get corona (Tavakoli 2021; Elkourfti in Hejlskov and Nielsen, 2020):

“I think it has something to do with the culture. We are very dependent on our closest relatives. We help each other and our elderly.” (Elkourfti in Hejlskov and Nielsen, 2020)

Actors from the majority population also criticize the Danish authorities – the government or the Health Authorities – for lack of action and/or information or stigmatizing rhetoric towards minority groups (Karrebæk & Sørensen 2020; Veis & Johansen 2020; Wejse in Kjær 2020; Slot in Hejlskov 2020; Sodemann in Jensen 2020; Elkorn et.al. 2020). The authorities have done too little too late, repressed” minority languages, or “refused to publish guidelines in other languages than Danish” etc. In other words, the authorities failed *their* responsibility, and the non-Western minorities fall victim to that.



**Figure 4** Posters from The Danish Health Authorities with preventative instructions in Danish, Spanish, and Arabic. Many actors criticized the authorities for translating information too late. “What if these posters were the only information available for majority Danes?” ask Karrebæk and Sørensen (2020). Photo by the author.

Class is also a topic that is brought up. Professor and doctor Morten Sodemann states that “it is social inequality and not ethnicity that is the problem” (Sodemann in Jensen, 2020). Member of the socialist party Enhedslisten, Rosa Lund, also points towards class differences between majority- and minority Danes:

“Yes, we all have a responsibility to get tested and follow the guidelines. But that does not exclude the fact that not everyone has a holiday home where they can isolate themselves to avoid infection, or a large apartment with room for isolating a family member.” (Lund in Sørensen and Vestergaard, 2021)

Looking at the media sample, I found it striking that most of the authors or quoted persons in fact belong to the Danish majority population. In total, I noted 10 persons, who based on their names and/or appearances, would be categorized as “ethnic minority” in Denmark. 16 sources would be considered as belonging to the majority population. Interestingly, many of those are also in a position of power, longer education, and not belonging to the working class, judging from their titles and positions – they are politicians, researchers, activists, and health professionals. The minorities are mainly portrayed as representants of the minority, and although their profession is not always disclosed, they are most often depicted or depict themselves as members of the working class or “frontline workers” (Ganesh in Bugge 2021; Sodemann in Jensen 2020; Lund in Sørensen and Vestergaard 2021; Pedersen in Hejlskov and Nielsen 2020; Wejse in *Jyllands-Posten* 2020; Veis & Johansen 2020). But like ethnicity,

class is a very heterogenous category and racialized groups do not necessarily belong to the same class (Anthias and Yuval-Davies 1992, p. 64). One could argue that statements like Sodemann and Lund's run the risk of contributing to a stereotypical image of non-Western minorities as "poor". On the other hand, it frames the issue as a matter of socioeconomic class rather than culture or lack of civic mindedness.

It should add some credibility to the articles that many of the actors, who authored or are often quoted in the texts, are health professionals or researchers within the field of health, languages, or psychology. Sometimes they are even labelled as experts (Kjær 2020; Hejlskov 2020) or referred to by other authors to signal credibility (Norlander 2020; Karrebæk and Sørensen 2020; Veis & Johansen 2020). But as mentioned in previous chapter, an "expert" label may not always be convincing enough. Some authors also use more rhetorical tools and address the reader's emotions. A news story from Jyllands-Posten focus on a mother with Somali background, who was refused to drop off her daughter in daycare due to fear of COVID-19 (Hvid, 2020).

"I was very hurt and thought 'why'. I was told that it was only Somalis who had been sent home. I feel like they are sorting people – they believe that only Somalis have corona and everyone else is fine." (Hussein in Hvid, 2020)

Others use words like "shaming", "discrimination", and "harassment" in their texts, signaling the unfairness of the actions and underpinning the argument that minorities are not responsible for the pandemic (Norlander 2020; Ahmed et.al. 2020; Veis & Johansen 2020; Kjær 2020; Karrebæk & Sørensen 2020; Vestergård 2020). Some actors also appeal to the feeling of unity when they stress that "only together we can fight the pandemic" (Ganesh in Bugge 2021; Norlander 2020; Veis & Johansen 2020). This is also a form of language of mobilization and in line with the "Danish" value civic mindedness, even if they do not use the word directly. We take care of each other. We do this together. The concept of civic mindedness is thus also used in the reverse way to argue for non-discrimination and against shaming of minorities. When minorities mention how they contribute to society, they also counter the claims of lacking civic mindedness by showing that they are in fact just that – solidaric and taking the responsibility on their shoulders. While many texts mentioned in previous chapter focused on what others so, some authors here turn the lens the other way and talk about what "we" (the majority) should do – or avoid doing (Norlander 2020; Veis & Johansen 2020; Karrebæk & Sørensen 2020).

## 6.1 Cultural solutions to socioeconomic problems

Although many of the actors in this chapter explain the spread of COVID-19 among non-Western minorities with socioeconomic structures, the solutions they suggest are often more technical or cultural. Many stress the need for better communication, not only translation of necessary information but also more dialog between authorities and ethnic minority groups, because culture influences how people receive and perceive information (Sodemann in Jensen 2020; Karrebæk & Sørensen 2020; Nørredam in Kjær 2020; Wejse in Kjær 2020; Slot in Hejlskov 2020; Hjort in Olsen 2021; Ezzedine in Olsen 2021; Sodemann in Bugge 2021). Others advocate for technical solutions such as testing facilities close to socioeconomically vulnerable neighborhoods such as Vollsmose (Thomsen in Schuldt 2021; Ganesh in Bugge 2021). This way, the spread of COVID-19 is presented as a cultural as well as socioeconomic problem, where ethnicity interplays with class and challenges the notion of civic mindedness or community spirit as something that characteristic for majority Danes only.

It is interesting, though, that the articles published in 2021 do not refer to DSFS' recommendations for improving the health equity between ethnic groups in Denmark, and that only one debate article mentions political actions that have exacerbated the ethnic health inequity in Denmark – the amendment to the Health Act requiring people to pay for translation in health services if they have been in Denmark for more than three years (Karrebæk and Sørensen 2020). While the actors in the other articles do point out the authorities' responsibility to share appropriate information and ensure testing and isolation facilities, they do not delve further on the political mechanisms of inclusion and exclusion that co-create the ethnic boundaries and naturalize the view of integration as a responsibility that falls on the individual alone.

## 8. Conclusion and suggestions for further research

In this thesis, I set out to map the dominant media narratives about COVID-19 and ethnic minorities in Denmark. I have showed that there are two overall discourses, focusing on either socioeconomic factors or culture and lack of civic mindedness as the explanations for the over-representation of non-Western ethnic minorities in the Danish COVID-19 statistics.

Culture and ethnicity are often used synonymously and as an explanation for the many COVID-19 cases among ethnic minorities. The same actors often use the term civic mindedness to draw ethnic boundaries as well. Civic mindedness has been an individual responsibility but in the political discourse, it also becomes an ethnic trait – Danes have civic mindedness because it is part of our culture, and ethnic minorities have not.

While it is true that culture influence individuals' approaches to disease, the theories and material in this thesis do not provide basis for concluding that a certain ethnic group is specifically likely to violate the restrictions solely because of one's cultural or ethnic background. Culture can nevertheless be a tool to break down the information barrier and make minorities more aware of the pandemic and regulations via a language and a platform they are familiar with. But because of the socioeconomic factors that some minority groups live under, information alone may not be enough to level out the differences between minorities and majority Danes.

The media has played a part in bringing forward the social determinants of health and challenged the notion of disease as an individual responsibility, but the solutions presented are mainly of cultural and technical character, while the sources do not elaborate on the political mechanisms that contribute to creating ethnic health inequity.

Moreover, there is a shift in the overall tone of the sampled media articles from August 2020 and February-March 2021. In the sample from August, the number of news and debate articles highlighting socioeconomic factors outweigh the actors claiming that non-Western ethnic minorities do not take responsibility. Many articles and debates also from August 2020 also refer to The Danish Institute for Human Rights' report that recommends better translation and distribution of information for minorities and provision of opportunities to isolate outside the home for persons sharing a small living space with many others (Veis & Johansen 2020; Hejlskov 2020; Maach 2020; Svendsen 2020). In the sample from February-March 2021, on the other hand, more actors blame minorities for their own misfortune, referring to culture and lack of civic mindedness (*Jyllands-Posten* 2021; Collignon 2021; Dahl in Sørensen & Vestergaard 2021; Hilmersson 2021; Høgh 2021; Christensen & Radojevic 2021). Even supposedly "neutral" news articles report about "explosive" increase in the number of COVID-19 cases and residents of Vollsmose abusing isolation facilities paid for by tax money (Blichfeldt 2021; Blichfeldt 2021; Nyeng 2021). The authors, and likely the readers too, make a series of judgements about risk that involve persons with non-Western background, who are being othered or even presented as a threat to Denmark (*Jyllands-Posten* 2021; Collignon 2021; Dahl in Sørensen & Vestergaard 2021; Hilmersson 2021; Mengesha 2020; Høgh 2021; Christensen & Radojevic 2021; Kjærsgaard in Svendsen 2020). Anthias and Yuval-Davies and Barth argue how ethnicity can be a medium for justifying or promoting certain political actions. Lupton shows how the way we talk about disease involves responsibility, blame and othering of polluting persons, which was also the case of COVID-19 in Denmark. On basis of these approaches, I am unsure whether the media coverage of the authorities' failure to inform

ethnic minorities and address COVID-19 in vulnerable neighborhoods in time will have impact beyond the pandemic. The use of civic mindedness as a “Danish” trait and the increasing public skepticism against social determinants of health as an explanation for the spread of COVID-19 may take away momentum from the debate about ethnic health inequity, especially considering the historical attitude towards immigrants and refugees in Denmark.

Although the media have raised awareness of the issue of ethnic health inequity – a topic that is far away from the everyday life of healthy middle-class Danes – and showed that the Danish Health Authorities have a lesson to learn, when it comes to ethnic minorities and infectious diseases, many actors in the media have also used the pandemic as an opportunity to advocate for an asylum stop, once again portraying the ethnic Other as polluting elements and the source of the pandemic in Denmark.

We have yet to see official publications from the relevant authorities showing whether or not action will be taken to improve the health inequity in Denmark. Future research should look into such documents to investigate how they frame the problem, the appropriate solutions, and responsible the actors.

Only time can tell whether the awareness of inequality in health will last beyond the COVID-19 pandemic. My hope is that this thesis has at least contributed to the spread of awareness of the issue. I do not argue that individuals never have a responsibility to take care of themselves and others in crisis situations like the COVID-19 pandemic. I merely wish to show how cultural and ethnic arguments have been used to turn the pandemic into an issue of integration instead of inequality as well as argue that cultural solutions do not necessarily spur political action to address social determinants of health. With this thesis I wish to emphasize that culture and ethnicity alone cannot explain the socioeconomic factors that also impact the health of many persons with non-Western background in Denmark.

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