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Public Interest in the Pandemic:

*A comparative framing analysis of COVID-19 public health interventions by
the Victorian State Government and Australian digital news outlets*

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Abstract

This thesis investigates the framing of COVID-19 public health interventions by the Victorian State Government, in daily press conferences, and Australian digital news outlets, in their reporting on the press conferences. A mixed-methods approach to framing analysis is used to comparatively analyse the framing by the two sources. The analysis revealed significant differences between the frames operationalised by the Victorian State Government and Australian digital news outlets. These differences were highly indicative of the practices, norms, and ethics of journalism and public health, and their competing definitions over what constitutes 'public interest'. The findings indicated that while the majority of news articles in the sample replicated the 'public health' framing promoted by the State Government, a significant number of articles adopted a negative judgement on public health interventions, emphasising political blame and moral and economic risks. This latter framing predominated among News Corporation-owned tabloid news outlets, in which reporting was found to be more dramatized, sensationalised, and critical of state intervention. These findings prompted recommendations for increased funding and regulation to promote quality journalism and media diversity in Australia, arguing that it is the interests of both democracy and public health.

Keywords: *COVID-19, frame analysis, Australian news media, journalism, public health, media representation, media diversity, public interest*

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“In the next influenza pandemic, be it now or in the future, be the virus mild or virulent, the single most important weapon against the disease will be a vaccine. The second most important will be communication.” (Barry, 2009, p. 324).

1. Introduction

Alongside the declaration of COVID-19 as a pandemic, the World Health Organisation (WHO) declared an ‘infodemic’, defined as “an overabundance of information, both online and offline.” (2020a). The use of this term by the WHO represents the significant shift in how health information, particularly during times of crisis, is circulated, interpreted, discussed, and produced. Although much of the focus of infodemiology (the study of infodemics) throughout the COVID-19 pandemic has been on the emergent issue of (mis)information on and through social media, the news media contributes significantly to the excess of pandemic related information (WHO, 2020b; Media and Communication Journal, 2020). For years, media scholars have emphasised the central role the news media play in the construction of reality and setting of agendas for citizen-consumers. Numerous framing effects and agenda setting studies have demonstrated a robust correlation between types of news content consumed and audiences’ priorities and understanding of events, phenomena, and individuals (Kim, Scheufele, and Shanahan, 2002; Nelson, Clawson, and Oxley, 1997). These findings suggest two key suppositions—borrowed from Monahan—on which this thesis rests: the news media play a key role in the social construction of reality, and, thus, that news matters (2010:4-5). The WHO’s concurrent declaration of both a pandemic and an infodemic is illustrative of these two points: COVID-19 is not only a biological reality, it has become a mediated construct—one which produces a very real impact on how citizen-consumers think, feel, and behave.

Hall et al. describe how the news media can be seen as a *secondary definer* of important social issues, mediating the messages produced by *primary definers*, such as governments and expert arbiters, into a product for public consumption (1978:58). In nations the world over, the news media have played exactly this role in the dissemination of health and policy updates related to the COVID-19 pandemic, acting as a key conduit for governments and medical experts on which the public rely for medical information and advice. Beyond this, the news media have also challenged these *primary definers*, playing the democratic role of amplifying the voices of those concerned with government (in)action, as well as individuals affected by COVID-19 and public health measures such as border closures, mandatory quarantines, and lockdowns. In this way, the role of the news media, particularly in a health crisis, is highly complex. Journalists are compelled to report both accurately and responsibly on emerging information from official sources; while also acting on behalf of the public to challenge unjust state intervention, expose inequitable policy changes, and offer a platform for non-expert/elite individuals who would otherwise be

without one. This mediating role—of acting as a mouthpiece both for *primary definers* and for the broader public—creates a tension between official and unofficial narratives and frames. In line with framing research, this tension can be assumed to impact and influence the ways in which the public interpret and understand the health crisis (Wise and Brewer, 2010; Ratcliff et al. 2018). The news reporting of health and policy information during the pandemic, in this way, raises numerous questions regarding the responsibility of the news media in times of crisis, the role of the news media in public health communication, and the ways in which COVID-19 has been collaboratively constructed for citizen-consumers by public health professionals, politicians, journalists, and media conglomerates (Briggs and Hallin, 2016).

This thesis aims to explore these questions through a case study focusing on the second wave of COVID-19 in Victoria, Australia, which occurred in the second half of 2020. In particular, this research pursues a dialectical understanding of how Australian digital news media outlets negotiated competing discourses of public health—in its top-down imposition, utilitarianism, and privileging of science and data—and journalism—in the tendency towards an open flow of information and an egalitarian representation of public matters. This will be investigated through a comparative analysis of the framing of public health interventions by the Victorian State Government, in their daily press conferences, and Australian digital news outlets, in their reporting on these press conferences and the interventions announced therein. The thesis adopts a mixed-methods approach to framing, including both an in-depth qualitative framing analysis, and a quantitative content analysis hierarchically clustered in SPSS. Methodologically, the research is both constructionist and critical in nature, looking not only at the mediated construction of events and restrictions, but also the discursive elements and dynamics of power implicated in the case study. It aims to take into account matters of media diversity, disciplinary autonomy, definitional struggle over what constitutes the public interest, and political partisanship as it relates to COVID-19 reporting.

1.1. Case study: Victoria's second wave of COVID-19

Like many of the world's island countries, Australia, early in the COVID-19 pandemic, adopted a COVID-19 suppression approach. This entailed vast contact tracing systems, border closures, lockdowns, mask mandates, and a hotel quarantine system, among many other public health interventions (Department of Health, 2020). These measures were, for the most part, effective in combating the spread of the virus. However, in June 2020, there were significant breaches in the hotel quarantine system in Victoria, largely attributed to the

decision to use low-paid and poorly-trained private security to monitor quarantined arrivals (Willingham and Harrison, 2020). These breaches led to Victoria's second wave of COVID-19, which was combatted by months of strict lockdowns and restrictions in the state.

During this period, the Victorian Labor Government, led by Premier Daniel Andrews, held daily press conferences updating the public on case numbers and deaths, as well as changing public health policies. These conferences provided a daily stream of information from the State Government to the public, and were widely reported on, with the Australian news media acting as a key conduit for circulating the fast-changing situation in the state. The public health measures enacted by Andrews' Labor Government were the most extensive in Australia, but after a prolonged lockdown period, the COVID-19 case numbers fell from hundreds of daily cases to two months without a single case of community transmission (Victoria State Government, 2020).

This is a rich case study for the exploration of the dialectic between public health and journalistic discourses, as decisions were made in the interests of public health, but were widely contested for infringements on individual freedoms, as well as their economic and social impacts. The case study is illustrative of the at once symbiotic and antagonistic relationship between public health and the news media (Ting Lee and Basnyat, 2013:122). Major news outlets were invited to live stream the press conferences, and the State Government continued the press conferences each day until journalists had no further questions to ask, meaning each press conference usually lasted over an hour. Journalists, in this way, acted on behalf of the public, guiding the content of the press conferences through asking for clarification on specific rules and medical recommendations, and questioning the impact of public health interventions on individuals, entertainment, education, and the economy.

These press conferences, and the news coverage of them, offer a wealth of data through which to explore and compare the framing of public health interventions by official governmental sources and the Australian news media. The case study is particularly interesting, as reporting on the crisis was subject to much public and political invective, and Victoria has a Labor State Government amongst the Federal Australian Liberal Government and a highly-concentrated Liberal-leaning media landscape (Graham et al. 2021; Young, 2015).

1.2. Aims

The aims of this research project are threefold: (1) to explore how the representation of public health messages is shaped by disciplinary ethics, norms, and practices; (2) to investigate the implications of the commercialisation, privatisation, and digitisation of Australian news outlets with regards to media diversity, independence, and the instrumentalization of the news media; and (3) to reflect on the implications of the findings and suggest recommendations for improving public communication in the Australian media landscape. This research is original in that while there is a large body of political framing research which looks at policy discussions and press conferences and releases, public health framing research, for the most part, has focused on the framing of specific diseases or ailments (King and Watson, 2005; Seale, 2002). This research will combine these approaches by investigating not the representation of COVID-19 as a disease, but the representation of the public health interventions necessitated by the disease. Here, the dialectical exploration of public health and journalism, and the comparative analysis of press conferences and reporting by digital news outlets, provides a unique insight into the flow of information from official sources to the news media, as well as the complex discursive elements that shape this process. Additionally, situating this research in Australia—which has one of the most concentrated levels of media ownership among all democratic nations—and focusing on digital news outlets, sheds light on the impact the trends of media privatisation may have on news content and journalistic practice.

1.3. Research Questions

1. In what ways are the public health interventions imposed in response to Victoria's second wave of COVID-19 framed by:
 - a. The Victorian State Government, in daily press conferences?
 - b. Australian digital news outlets?
2. Do significant differences exist between the framing of public health interventions by the two sources, and if so, to what extent are these differences characterised by the distinct ethics, norms, and practices of the disciplines of public health and journalism?
3. Does the framing of public health interventions differ between news outlets, and if so, to what extent are these differences characterised by the commercial trends towards dramatization, sensationalism, and political partisanship in the news media?

1.4. Disposition

This thesis will be presented in four sections: (1) the literature review and theoretical outline, (2) the methods and methodology, (3) the data analysis, and (4) the discussion, conclusion and limitations. As this research is related to several disciplines, and analysed through the method of framing research, the literature review serves as an important theoretical basis for the comprehension of the findings. In this section, the ethics, norms, and practices underscoring the fields of journalism and public health are explored, and a dialectical approach is adopted to explain how the fields both conflict and collaborate to co-construct health information for the public (Briggs and Hallin, 2016). Following this, the tradition and practice of frame analysis is explained, and previous studies related to the research are summarised.

The literature review transitions from the theoretical basis of frame analysis and previous research into the methods and methodology section, outlining the specific approaches to frame analysis adopted in this thesis, as well as the methodological foundations the research is built upon.

The data analysis section presents, explores, and analyses the empirical material.

The discussion and conclusion situate the findings in the existing literature, exploring their significance and the implications of the research. Finally, the limitations section will address areas in which the research is lacking, and recommend practices and sites of inquiry for further research.

2. Literature Review

This paper adopts a dialectical approach, looking particularly at the knowledge and value systems of public health and journalism, both of which are considered “autonomous practices which serve the public interest” (Briggs and Hallin, 2016:263). Between the two fields of knowledge, there is definitional struggle as to what constitutes the service of the ‘public interest’, as well as the ethics and norms that underscore the pursuit of that service (Bowen and Li, 2018:232). This research explores the “enduring tension between public health and individual rights—a tension that we ignore at our own peril.” (Bayer, 2007:1099). The dialectical approach is therefore appropriate in the context of this case study, as it investigates “variables or forces that clash with each other and must be reconciled for health communication to succeed to some degree” (Thompson, Cussella and Southwell, 2014:6). Approaching the problem by first understanding the ethics, norms, and practices which characterise the two fields of knowledge, the framing analysis can then be interpreted with a clearer understanding of how these discursive elements manifest in the press conferences and news reporting on COVID-19 public health interventions.

2.1. The news media

Hallin and Mancini, in *Comparing Media Systems* (2004), identify three distinct cultural systems through which the news media takes shape in different nations. Although Australia is left out of the study, its news media landscape most closely resembles the liberal model dominant in the UK and US, which is “characterised by a relative dominance of market mechanisms and of commercial media” (ibid:12), as well as individualism, representation of the state in negative ways, and an emphasis on freedom of information as essential to citizen-consumers (ibid:289). However, as Jones and Pusey point out, Australia is distinct from other liberal systems in several unique and important ways: (1) Australia has one of the highest levels of commercial media ownership concentration in the Western world; (2) journalism was professionalised historically late and as such journalists have comparatively low-levels of education; (3) low per capita investment in public service broadcasters; and (4) low media regulation related to the accuracy and impartiality of commercial journalism (2010:9; Djerf-Pierre, Cokley and Kuchel, 2016:638). While the ideals of journalism in Australia closely resemble those of the liberal model, the practice of journalism in the Australian media landscape, Jones and Pusey explain, shares many features with Mediterranean polarized pluralist model, including clientelism, politically polarised media, and an under-regulated

media landscape (2010). This section will first deal with the ethics and norms of journalism in liberal capitalist systems generally, before looking specifically at the news media of the 21st century and the global trends that have pervaded the Australian news media landscape.

2.1.1. Journalism

One of the central ideas in liberal journalistic discourse is the role of the news media as society's public sphere, through which journalists pursue truth, diversity of opinion, and independence to serve the public interest (Reader, 2015:140; Dahlgren, 2005; Hallin and Mancini, 2004). In literature on the news media, this is often looked at through a political framework, wherein media diversity, anti-establishment messages, and a variety of perspectives are appreciated for their democratic value (Reader, 2015; Monahan 2010:19). Allowing government or private control over the freedom of information is seen as giving corruption room to flourish, and ultimately injurious to processes of democracy (Herman and Chomsky, 1988:66; Lawrence, 2010:280). In this sense, "Good journalism matters because it is a bulwark against both industry and state influence over media content and agendas" (Jordens, Lipworth, Kerridge, 2013:448).

This public sphere/public interest ethos is rooted in a set of ethical guidelines for journalists which Hallin and Mancini call 'journalistic professionalism' (2004:37). These include: objectivity, accuracy, balanced reporting, and autonomy (ibid.). These values are foundational to democratic value of journalism in liberal systems, and are taught in journalism courses, incorporated into news outlets' official guidelines, and deeply embedded in journalistic practice (Lawrence, 2010:279). Journalistic professionalism, in this way, acts as guiding force for maintaining the ideal of journalism as a public service, and is "crucial for maintaining a healthy media in the context of powerful influences" (Jordens, Lipworth, Kerridge, 2013:448).

2.1.2. The contemporary media landscape

Before addressing how these journalistic norms and values can at times come into conflict with public health discourses, it is worth noting that many authors contend that trends in recent decades have undermined this role of news media as a public service in a political and economic sense (Herman and Chomsky, 1988; Monahan, 2010; Dahlgren, 2005; Altheide, 2004:294). In Australia, as in other liberal media systems, the neoliberal trends of de-regulation of media, private media expansion, and reduced funding for public service news

has led to high concentration of media ownership, which grants a select few media conglomerates private control over the majority of news content. In contrast to the ideal of journalism as an autonomous and diverse public sphere which informs citizens and promotes political agency, Herman and Chomsky suggest that the private concentration of media ownership has ushered in a new ‘societal purpose’ for the news media: “to inculcate and defend the economic, social, and political agenda of privileged groups that dominate the domestic society and the state.” (1988:380). Hallin and Mancini describe this phenomenon as clientelism, in which the news media is instrumentalized for political and economic influence, and “private business owners will also have political connections [... often used] for negotiation with other elites and for intervention in the political world” (2004:58).

At the forefront of this phenomenon in Australia (as well as the US and UK), is the media giant News Corporation (News Corp), and its owner Rupert Murdoch. News Corp media ownership in Australia is among the most concentrated in democratic nations the world over, with the conglomerate owning over 50% of newspapers, as well as the only national newspaper, and two of the top five news websites in Australia (Dwyer, 2016; Nielsen, 2020; Brevini and Ward, 2021). While the authority of journalism is rooted in professionalism, and “based traditionally on the journalist’s claim to keep their personal opinions out of the news” (Briggs and Hallin, 2016:68), News Corp news outlets operate on a sliding scale which, in Australia, typically leans towards pro-industry conservatism and neoliberalism, often unabashedly advocating for Liberal Party leadership (Hobbs and McKnight, 2014; McKnight, 2012:15, 58; Young, 2015). Although these features are characteristic of a particular political ideology, Arsenault and Castells posit that News Corp and its subsidiaries are not necessarily ideologically anchored, but are instead motivated by private expansion and financial gain, and wield extreme political, economic, and public influence through which to pursue that end (2008). In Australia, this media domination, and the clientelism it enables, has drawn much academic, political, and public invective (McKnight, 2012:15, 58; Dickson and Simons, 2020; Rudd, 2020; Parliament of Australia, 2021).

2.1.3. News media privatisation and public drama

Concurrent with its impact on political processes, many authors agree that the privatisation of the news media impacts the quality of journalism, and in turn the legitimacy of the discipline’s claim to public service (Hallin and Mancini, 2004:247; Altheide, 2004:295).

Through privatisation, the public service orientation of the news media is replaced “with a bottom-line ethos of profitability” (Monahan, 2010:32). Particularly in digital news contexts, journalists are pressured to produce more content faster to attract more viewers. This creates a “tension between the ethics of journalistic professionalism and the pressures of commercialism.” (Hallin and Mancini, 2004:247; Dahlgren, 2005:150). Monahan, among others, contends that, in response to commercial pressures, news reporting on complex real-world issues is becoming increasingly simplified and dramatized to attract and engage audiences (2010; Altheide, 2004:294). He calls this ‘public drama news’, describing it as characterised by “highly dramatic and emotional news elements, compelling characters, evocative themes, and captivating settings, all combined in an uncomplicated narrative that unfolds in a fairly linear fashion” (Monahan, 2010:6). While this public drama model is typical of many broadcast news programs—which combine elements of news and information with entertainment—it is also a common format for tabloid press, in which sensationalism and strong political orientations are common and there is less concern over the professionalisation of journalism (Hallin and Mancini, 2004:211; Arsenault and Castells, 2008; King and Street, 2005).

In the case of reporting on health, public drama news can obscure scientific uncertainty and degrees of evidence, as was the case in March 2020, when hydroxychloroquine—a medication which showed potential to diminish the effects of COVID-19—received frequent coverage from US news outlets like Fox News (Christakis, 2020:143). News outlets may jump from one health story to the next, more interested in the entertainment the story provides than the scientific legitimacy of the claims. These short-term imperatives of for-profit news outlets “often clash with the practices of scientists who emphasize specialized use of language, long lead times to conduct and report research, and careful and qualified expression of their results.” (Viswanath, 2013:247). Several studies have found reporting by particular news outlets to be fickle, under-researched, and over-dramatized, leading researchers to criticize the ability of populist print media to provide balanced information on health and risk (King and Street, 2005:130; Rossman, Meyer, and Schulz, 2018:370).

Whether deployed inadvertently, to attract audiences, or strategically, to push agendas and support the interests of privileged groups, the implications of increased media privatisation and concentration, and the emergence of public drama news and tabloid formats, must be taken seriously, as it is precisely this news content that is used by large swathes of

the public “to make sense of politics, the economy, and other issues and events of the day.” (Monahan, 2010:181).

In a political sense, the Australian media landscape is problematic because of the high concentration of private media ownership, and the clientelism and agenda-setting potential it represents (Herman and Chomsky, 1988; Monahan, 2010; Jones and Pusey, 2010; Altheide, 2004; Dahlgren, 2005). In a public health sense, this represents not only a potential threat to democracy, but also to health (Jordens, Lipworth, Kerridge, 2013:449).

2.2. Public health

The ‘public interest’, as defined in public health discourse, is characterised by preventing disease, prolonging life, and promoting health through the organised efforts of society (Acheson, 1988 in Guest et al, 2013). Practitioners pursue these aims through a recognition of the social determinants of health and diseases, an ethic of collective responsibility, and a promotion of preventative activity, inter-disciplinary collaboration and multi-disciplinary action. Public health approaches to serving the public interest are broad-ranging, and include scientific research and epidemiology, community engagement and health promotion, policy changes, changes to health care practice, and the creation of health technologies, among other forms of research and intervention (Guest et al. 2013: Lupton, 2003:52).

2.2.1. Public health ethics

While one of the key values of journalism is to provide an informative democratic space through which to increase the political agency of the public, public health typically entails interventions that involve restrictions on choice (Bayer, 2007:1102). As non-communicable diseases are often influenced by the social determinants of health as well as lifestyle factors, public health practice pursues a balance between improving health outcomes, and allowing individuals and organisations the freedom to behave as they wish (Lewis and Lewis, 2015:98-99). While it may be in the interests of public health to totally ban the production and sale of alcohol and tobacco, for example, this could be seen as an overreaching of political power and produce civil unrest, or other issues such as a black market for the illicit substances (Bayer, 2007:1102). Communicable diseases are typically treated with more of a hard-line approach, as decisions made by individuals risk not only their own health, but that of the broader public (Parmet and Smith, 2017:904). In this way, public health action, particularly during pandemics, is rooted in a utilitarian ethic, in which ethicality is consequence-based,

and determined according to a health-based public service orientation (Bowen and Li, 2018:236; Lupton, 2003:35). Public health intervention seeks to improve health for all citizens, and infringements on individual freedoms are considered permissible if they are necessary to protect the health of the population.

However, in the context of public health, the utilitarian ethic can be problematic, as it pits “the freedom of individuals to behave as they wish [...] against the rights of society to control individuals’ bodies in the name of health” (Lupton 2003:5; Bayer, 2007:1099). This is one of the central challenges in the imposition of public health interventions: “how to empower self-governance to protect health and autonomy without undermining either.” (Parmet and Smith, 2017:905). Because public health interventions “involve difficult, utilitarian trade-offs between benefits and costs to different people” (Christakis, 2020:73), there is often resistance to change, particularly among parties for whom the change results in more cost than benefit (Chaua et al. 2019:1). Resistance to public health intervention often targets the tension between individual freedoms and governmental control, adopting a deontological principle-based ethic, and focusing on the threat to deep-rooted liberal values of individual freedom and agency, rather than the potential positive health outcomes of a law or restriction (ibid.; Bowen and Li, 2018:237; Piper et al. 2011:134; Henderson et al. 2009). In the COVID-19 pandemic, this deontological ethic can be seen as the predominate position of many anti-lockdown advocates, as in the case of anti-lockdown protests in Victoria in September 2020, which organisers called the ‘Freedom Day’ rally (Hope, McMillan and Dexter, 2020).

In situations such as the anti-lockdown protests, two distinct ethical positions—deontology and utilitarianism—come head-to-head with one another. While in liberal democracies, such as Australia, public health and biosecurity laws are rather explicit about the precedence of health—particularly as related to communicable diseases such as COVID-19—these laws do not preclude public debate and civil unrest (Library of Congress, 2020). It is journalists and the news media, who represent public matters, who are given the task of framing and navigating these opposing ethical positions and representing issues and events for public consumption. The far-reaching impacts of public health action, the utilitarian ethic that underscores it, and the top-down nature of its imposition, almost invariably results in some level of resistance from the public (Foucault, 1978:95; Chaua et al. 2019). The news media’s role as “bulwark against both industry and state influence,” (Jordens, Lipworth, Kerridge, 2013:448) results in these perspectives often being amplified by journalists, who “in general, have a bias toward an open flow of information, including disagreements and

uncertainty” (Briggs and Hallin, 2016:71).

This is the key difference between the two disciplines’ definition of ‘public interest’: while journalism, in its ideal, offers political agency for public good, public health exerts political control for public good.

2.3. A dialectical understanding

This is the meeting point between the discourses of public health and journalism. However, Foucault explains that such a meeting point, rather than a fundamental flaw in either perspective, is a key feature of how democratic societies function:

“We must make allowance for the complex and unstable process whereby discourse can be both an instrument and an effect of power, but also a hindrance, a stumbling-block, a point of resistance and a starting point for an opposing strategy. Discourse transmits and produces power; it reinforces it, but also undermines and exposes it, renders it fragile and makes it possible to thwart it.” (1978:101)

In this way, the dialectic can be seen to produce a productive tension, whereby journalists, on behalf of the public, hold governments accountable for their decisions by questioning the legitimacy of state intervention and giving voice to the parties affected by public health intervention. Governments, on the other hand, hold not only the legal authority to impose such interventions, but also to hold journalists and news establishments accountable for what they publish (Briggs and Hallin, 2016:163; Jordens, Lipworth, Kerridge, 2013:449). Political interventions and public health policy are held to a higher standard by investigative journalists and news outlets; and journalists are held to a higher standard by laws concerning libel, privacy, and hate-speech, among others (Hallin and Mancini, 2004:43). It is, therefore, prudent to recognise that the ‘official’ public health framing is not invariably the dominant discourse in public’s comprehension of COVID-19-related information, rather, it is one of many discursive elements (Roche and Muskavitch, 2003; Getchel et al. 2018). Multiple voices and perspectives must be considered, to avoid granting any discipline or group “the exorbitant privilege of setting up a single criterion for what is valid and what is appropriate” (Perelman 1969: 71, in Blakely, 2003; Macy-Ayotte, 2018). Public health practitioners and state intervention are fundamental to the organisation and improved health outcomes of society, and journalistic autonomy is fundamental to the exercise and continuing practice of democracy, representing the potential to expose and thwart abuses of political power (Lupton, 2003:121). The fields conflict, but are also mutually beneficial and symbiotic, as public

health policy changes create stories for news outlets to report on, and the news media serves as a platform through which public health professionals can amplify and inform the public about health recommendations and policy changes (ibid.; Foley, McNaughton, and Ward, 2019:4).

2.4. Biomediatization

Briggs and Hallin argue that this complex relationship between public health/medicine and journalism is not sufficiently explained by treating the disciplines as two separate cultures (2016:13). Indeed, they argue that the two fields should be considered as “complexes of heterogeneous cultural forms that have been deeply influenced by one another and whose basic modes of practice presuppose one another.” (ibid.). As explored in the section above, though motivated by distinct ethics and definitions of ‘public interest’, the practices of public health and journalism are intimately and inextricably linked to one another. Although discussing medicine generally—rather than public health specifically—Briggs and Hallin explain this link through combining the concepts of biomedicalization and mediatization, to produce the neologism *biomediatization* (ibid.). Biomediatization is “the co-production of medical objects and subjects through complex entanglements between epistemologies, technologies, biologies, and political economies.” (ibid:5). Briggs and Hallin’s findings indicate that news reporting on health involves a complex interplay between the discourses of journalism and medicine (among other disciplines), between expert and non-expert actors, and medical research and media logic. They contend that it is precisely this interplay through which biomedical knowledge is co-produced for the public (ibid:12). This same contention motivates much of the medical framing research, and underscores the emergence of frame analysis as a research method for public health inquiry (King and Street, 2005:119; Roche and Muskavitch, 2003; Foley, McNaughton, and Ward, 2020).

Briggs and Hallin identify three frameworks through which health information is typically represented in the news, which they call biocommunicable models (2016). For this study, two of these models are relevant: the biomedical authority model and the public sphere model. The third model, the active patient consumer model, is excluded from this study, as it refers to situations in which neoliberal logics prevail and individuals are represented as consumers who are responsible for seeking out information and making judicious choices about their individual health (ibid. 34). The biomedical authority model is functionalist, in that it presents medical experts as “authoritative sources of information [while] laypersons

are urged to attend to and follow their advice and are warned of the consequences of failing to play that role” (ibid:41; Lupton 2003:8). The public sphere model is more egalitarian. It involves journalists, politicians, and the broader public in the discussion of health, and represents the “increased interpenetration of the field of health with other social fields, and particularly with the market and state” (Briggs and Hallin, 2016:40). This biocommunicable framework, like Monahan’s public drama framework, and the frame analysis literature, hold a central unifying supposition: that “the form of news—how it is packaged and presented—plays a crucial role in what people take from their encounters with news content.” (2010:14).

2.5. Framing

Framing theory has, for many years, been one of the foremost methods for analysing public matters and how they manifest in both the media and the minds of citizen-consumers. This research is rooted in the idea that the ways in which public matters are represented has an impact on their interpretation by the public, and thus sets the public agenda and influences public opinion (Entman, 2010a). The key insight of frame analysis is that representations and interpretations are typically consistent across a range of complex and varied issues; that frames are culturally embedded, and connect elements of a perceived reality to one another to promote a particular interpretation (ibid.; Reese, 2010; Van Gorp 2010). The effects of framing can impact individual behavioural intentions, risk assessments, and opinion on public policy and governance (Dudo, Dahlstrom, Brossard, 2007; Bowen and Li, 2018; Chaua et al. 2019). Thus, although frame analysis is concerned with the representation of reality, the implications of framing research are profound, and framing practices have real-world impacts on the construction of the social world and organisation of societies.

Methodologically, framing theory is rooted in social constructionism, as its central supposition is that the representation of an issue, individual, event, or phenomenon presupposes its meaning for the public. It is generally recognised that framing is inherent to representation, and as contemporary society’s ‘public sphere’, the news media is often the locus of framing research (Nisbet, 2010:44; Scheufele, 1999).

2.5.1. Three elements of frame analysis: agenda setting, priming, and framing

There are three central and interrelated concepts of framing theory: agenda setting, priming, and framing.

Agenda setting refers to the power the news media has to establish the public agenda (Scheufele and Tewksbury, 2007:14; McCombs and Shaw 1972). Journalists and news

outlets choose which issues are considered ‘newsworthy’, and in doing so, make decisions about the importance of different issues and their relevance to the public (Entman, 2010a:336; Monahan, 2010:4). Agenda setting is rooted in the work of McCombs and Shaw (1972) and supported by research which demonstrates a high correlation between the issues which the news media report on and the issues which the public consider important (Kim, Scheufele, and Shanahan, 2002). Agenda-setting is thus concerned with the salience of issues, and is described as the news media’s power in “telling people what to think about” (Entman, 2010b:392).

Often seen as a secondary attribute of agenda setting, priming involves evaluations of public issues and figures, and is the intended effect of news content on audiences (Entman, 2010a:336; Scheufele and Tewksbury, 2007). Scheufele and Tewksbury refer to agenda setting and priming as accessibility-based effects, since they are based on the assumption that the relevance of an issue, along with judgements about it, is rooted in “the ease in which instances or associations could be brought to mind” (Tversky and Kahneman, 1973:208, in Scheufele and Tewksbury, 2007:11).

Contrary to agenda setting and priming, framing is applicability-based, meaning it is centrally concerned with the representational choices of public figures and journalists (ibid.). Framing advances the insight that the representation and interpretation of issues is filtered through “organizing principles that are socially shared and persistent over time, that work symbolically to meaningfully structure the social world” (Reese, 2010:11). Although the nature of world events, crises, public figures, and issues shift and change throughout history, scholars contend that many of the frames used by public figures and the news media remain consistent over time (Van Gorp, 2010; Reese, 2010:24). For example, commonly identified frames across media include human impact, political game, economic, and conflict frames (Benziman, 2020; Blakely, 2003; Briggs and Hallin, 2016; Hammond, 2018; Rossman, Meyer and Schulz, 2018; Chaua et al. 2019; Lawrence 2010; Nisbet, 2010; Price, Tewksbury and Powers, 1997). Van Gorp calls common frames such as these ‘culturally embedded frames’, explaining that they are “universally understood codes that implicitly influence the receiver’s message interpretation, which lends meaning, coherence, and ready explanations for complex issues.” (2010:87-8).

Agenda setting and priming are thus implicated in framing, but are distinct from it, in that “Framing focuses not on which topics or issues are selected for coverage by the news media, but instead on the particular ways those issues are presented.” (Price and Tewksbury, 1997:184 in Scheufele and Tewksbury, 2007:15). Entman explains that in fully developed

frames, agenda setting, priming, and framing come together through four key elements of a frame, which have become foundational to the framing literature: ‘problem definition, causal attribution, moral evaluation, treatment recommendation’ (2007; 2010a).

2.5.2. Framing and power

While some authors contend that the value of framing analysis lies primarily in identifying alternative frames to help better understand and strategically construct public issues and perceptions (Van Gorp 2010:104), others assert that the study of framing is not only constructionist, but critical, and that “to study framing [...] is to study power” (Lawrence, 2010:278; Entman, 2010a; Reese, 2010). The dynamics of power in framing research are multifaceted and discursive. In spite of the ‘public sphere’ ideal of journalism, the news media often perpetuate existing power structures. The agenda-setting and priming function of the media, in its decisions as to ‘newsworthiness’ is intimately tied up not only with the social impact of issues upon citizen-consumers, but also with the status, title, and power of the actors connected to an issue. The indexing hypothesis in framing research claims that “in many circumstances the news reflects the views put forth by those in positions of power” (Lawrence, 2010:277). Governments, for example, have an “enormous influence on the agenda and framing of public issues” (Hallin and Mancini, 2004:44). In reporting on health phenomena, lay people are often excluded from discussion, with medical experts granted the authority to define the nature of risks and recommend prevention practices (Lupton, 2013:116; Briggs and Hallin, 2016:75; Ratcliff et al. 2018). For Foucault, this acceptance of the authority of expert knowledges is seen as a productive element of power, as journalistic and public trust in expert knowledge acts as a heuristic, replacing the necessity for individuals to make their own subjective assessment of an issue (Foucault in Lupton, 2013, p. 116, 151; Ratcliff et al. 2018:158; Scheufele and Krause, 2018). Returning to Hall et al. (1978), these government and expert sources can be considered ‘primary definers’ of news content.

A secondary component of power as related to framing is attributed to journalists. This manifests in journalists’ mediating role—their capacity to perpetuate the dominant narratives produced by those in power, or to introduce alternative frames and actors (De Vreese, 2010:188; Briggs and Hallin, 2016:99; Lawrence, 2010:265). As discussed, this mediating role is what makes the ideal of the news media as a public sphere so important. Journalists have platforms through which they can give voice to the voiceless, investigate corruption and injustice, introduce new issues into the public agenda, and challenge the

priming efforts of those in positions of power (Hallin and Mancini, 2004:271; Jordens, Lipworth, and Kerridge, 2013). They are ‘secondary definers’ of public issues, and play an important role in the democratic process (Hall et al. 1978).

However, as discussed above in relation to the clientelism and the instrumentalization of the news media, the increased privatisation and concentration of media ownership has contributed to a power dynamic, in which “Media institutions have become more autonomous and more powerful in important ways, [challenging] the autonomy and authority of other social fields, including medicine” (Briggs and Hallin, 2016:9). This dynamic affords news media outlets and those who run them their own form of organised editorial power, which isn’t necessarily motivated by the journalistic norms which underscore the discipline’s claim to public service (ibid.; Hallin and Mancini, 2004:277). Owners of large media conglomerates can decide not to report on issue, to lower its standing in the public agenda, or can introduce repeated frames which prime audiences to think about an issue in a particular way, to serve political or commercial interests. This is referred to as content bias, which Entman defines as “consistent patterns in the framing of mediated communication that promote the influence of one side in conflicts over the use of government power.” (2010a:338). As opposed to purely constructionist framing analyses, which seek to identify alternative frames and frame packages, critical framing analyses investigate the discursive elements of power behind public communication and framing, often seeking to identify content bias in news reporting (ibid; Entman, 2010b).

2.5.3. Medical framing

There is a significant and burgeoning body of inter-disciplinary research on the framing of health issues in the news media. Increasingly, scholars are recognising that the framing of health in the news “is an important field of public health inquiry” (Foley, McNaughton, Ward, 2019:2), and that the media is “a crucial player in the cultural ecology of public health” (Lewis and Lewis, 2015:57).

One of the foremost issues associated with health news is the fact that, although journalists require no medical or scientific education, they, through the news media, have become one of the public’s key sources of health information. Scientific health information and public health advice, as presented in the news, is filtered through culturally embedded frame packages and journalistic norms (Viswanath, 2013:247). As frame packages offer mental short-cuts and ready explanations for complex issues, they can be problematic in the

presentation of science and health information, as they can obscure the complexity of an issue, favour emotional interpretations of public health interventions, or represent stories through ‘balanced’ reporting, giving alternative, unscientific frames more weight than they merit (Ratcliff et al. 2018). This framing of health information in the news can, for example, lead to health policies being conflated with the political actors promoting them, or scientists who have reached different findings being represented as indicative of conflict within the scientific community (King and Street, 2005).

While the acts of representation and framing in themselves have potential to distort and simplify health information, journalistic professionalism’s dictums of accuracy, objectivity, independence, and public service can be seen as guidelines to prevent or minimise the effects of this distortion. However, returning to the commercialisation of health information, under a profit-driven ethos, accuracy and objectivity may be sacrificed in favour of dramatization and sensationalism, and risks and conflicts may be amplified to attract viewers (Monahan, 2010:32). News stories may be more quickly produced and less thoroughly researched, or may adopt or perpetuate the prevailing issue position of a particular political ideology. In this new media environment, Bowen and Li state, “messages are ever more fragmented and often poorly sourced and rapidly moving” (2018:231).

This is significant for public health because audiences likely make decisions about science-related risks through the media as their primary source of information about such risks, and “the exaggeration and amplification of issues by the media may contribute to unintended adverse effects and impede the communications plans of the public health community” (Bowen and Li, 2018:232; Dudo, Dahlstrom, and Brossard 2007:430). Framing not only influences public opinion on a macro-level (as it relates to policy and collective perceptions) but also on a micro-level, as it influences individuals’ behaviour-intentions and assessment of health risks (Reese, 2010:21). This is why framing research is increasingly recognised as an important component of public health research and practice: it provides insight into how health issues are constructed for the public, and how practitioners and politicians can strategically employ framing to put health matters into the public agenda, and prime audiences to form a desired attitude or behaviour intention.

2.5.4. Framing of pandemics/epidemics

There are a considerable number of texts which are rooted in the belief that the news framing of pandemics and epidemics constitutes an important area of cultural and public health

inquiry. The motivations behind these studies are typically threefold: (1) to investigate the reporting on infectious diseases as cultural phenomena, providing insight into public opinion and responses to the health risks; (2) to identify what constitutes ‘quality information’ in the news media, devising normative recommendations for both journalists and public health communicators; and (3) to assess how reporting by news outlets lives up to this definition of ‘quality information’, evaluating factors like the amplification of risk and attribution of responsibility in news content (Blakely, 2003; Abeysinghe and White, 2010; Barry, 2009; Benziman, 2020; Cornia et al. 2016; Dudo, Dahlstrom, and Brossard, 2007). This brief review of the literature will look primarily at coverage of Ebola and H1N1 in the news media, as both of these have been thoroughly studied using various methodological approaches to framing in a number of different media contexts.

Researchers have identified the different degrees to which the representation of a pandemic becomes politically implicated. In some cases, the collective threat a pandemic represents supersedes political partisanship. This involves a ‘rally round the flag’ framing, which is typical of wartime reporting, in which citizens across political and cultural lines are brought together under a threat they all face (Briggs and Hallin, 2016; Lupton, 2013:153; Benziman, 2020). This framing is perpetuated by both political actors, in their rhetoric and actions, and the news media, who, in times of crisis tend towards a privileging of official sources and frames, rather than challenging authority or introducing alternative frames (Lawrence, 2010:267). In other cases, researchers have found pandemics to be highly politically implicated, as in the case of the opposition utilising the Ebola threat to critique the Obama administration in 2013 (Getchel et al. 2018: 331). In this case, political actors used the Ebola epidemic response as an opportunity to promote themselves and denigrate their opposition (ibid.).

The differences in the framing of pandemics may vary according to numerous factors, but a comparative analysis by Cornia et al. suggests that the media system in which the news is produced plays a large role in this process (2016). This research found that in Sweden, H1N1 was represented as non-political and public health authorities were foregrounded; in Italy, the media was more partisan, making judgements on the public health response according to ideological inclinations; and in Britain the news media acted as watchdog, critiquing the public health response where appropriate but not according to partisanship (ibid.). Sandell, Sebar, and Harris compared reporting on H1N1 in Australia and Sweden, finding that contrary to the Swedish emphasis on public responsibility and expertise,

Australian news outlets focused on the attribution of blame (2013). Briggs and Hallin's own assessment of reporting on H1N1 in the US found that there was a high degree of collaboration between health official and journalists (2016). Reporting on H1N1 was mostly characterised by biomedical authority biocommunicability, with journalists hewing close to the official narrative and avoiding partisanship in favour of sphere-of-consensus reporting (ibid:134). They suggest this as a desirable outcome, contrasting it with reporting on Ebola in the US "in which public health responses were thrust into the middle of partisan politics" (ibid.; Getchel et al. 2018).

The findings of these papers are not merely isolated analyses of cultural phenomena, they offer real insight into the challenges public communicators face during a health crisis and the communicative strategies journalists, public health practitioners, and politicians alike can utilise to represent health information in an appropriate way. These texts often pursue normative frameworks and develop best-practice recommendations for public communicators. These include: (1) the emphasis of scientific uncertainty where appropriate (Blakely, 2003:895; Getchel et al. 2018:331; Ratcliff et al. 2018:171; King and Street, 2005:128); (2) the presentation of quantitative risk with a numerator (e.g. 10 people died out of 1000 cases) rather than qualitative risk (deadly virus) (Dudo, Dahlstrom, and Brossard, 2007:435; Yu et al. 2018:301); (3) the inclusion of specific information on which individuals can act (Dudo, Dahlstrom, and Brossard, 2007:435); (4) reference to known risk scenarios to serve as comparison; (5) minimal sensationalism (Rossman, Meyer and Schulz, 2018:375); (6) an equal distribution of episodic and thematic content (ibid.); and (7) message consistency (Bowen and Li, 2018: 230).

While these recommendations may be seen as standard practice among health and risk communicators, as we have explored throughout this literature review, journalism has its own distinct norms, ethics, practices, and commercial pressures, which may contravene these normative recommendations (Roche and Muskavitch, 2003:362; Viswanath, 2013). As King and Street write, the reporting of health information "has become problematic for the print media and brings its own uncertainties, especially in the relationship between the short-term priorities of the print media and long-term nature of public health issues." (2005:128).

2.6. Positioning this research in the literature

This thesis both builds off previous research, and fills a gap in the framing literature. It is

unique from previous studies in three key ways: (1) there are very few comparative analyses of press conferences and news articles (for exceptions see: Ting Lee and Basnyat, 2013; Rossman, Meyer, and Schulz, 2018); (2) there are few public health framing analyses performed in the Australian context (for exceptions see: Abeysinghe and White, 2010; Chaua et al. 2019; Henderson et al. 2009) and (3) the majority of medical framing analyses look at the framing of a particular disease, risk, or health outcome, with few studies looking specifically at the framing of public health interventions on a disease. This thesis thus looks at the production of frames in the context of the COVID-19 pandemic, with a specific focus on the representation of public health interventions. Through the case study, it investigates the flow of information from official sources to the news media, serving as an exploration of the dialectic between public health and journalism. With reference to the above literature, it will address both the nature of the frames, as well as reflect on how framing is influenced by the norms, ethics, and practices of the two disciplines.

3. Methodology and Methods

3.1. Methodology

As stated in the introduction, this thesis rests on two core methodological assumptions: that news is a social construction, and that news matters (Monahan, 2010:4). Complementary to these two core assumptions, the dialectical approach to the research problem seeks to understand, recognise, and compare the discourses of public health and journalism, as well as the ethics, practices, norms, and values which characterise these knowledge-systems. Here, a stance of empathic neutrality was adopted, in which a ‘middle ground’ position is assumed, with the two disciplines, along with their aims and conceptions of public interest, both recognised on equal terms for their value and legitimacy (Foley, McNaughton and Ward, 2019). As per the work of Briggs and Hallin, this research explores the key differences between the two knowledge systems, but with the acknowledgement that the separate characterisation of them as ‘two cultures’ is misguided (2016:163). In this way, this thesis considers the fields of public health and journalism as inextricably linked—at once symbiotic and antagonistic (Ting Lee and Basnyat, 2013:122). Through recognising that health and public health are co-constructed by medical actors, politicians, journalists, and the public through the media, and that power is inevitably implicated in this co-construction, the methodological approach of this research is both constructionist and critical in nature (Briggs and Hallin, 2016; Reese, 2010:19).

Frame analysis is rooted in the insights of social constructionism in that it assumes that representation, subjectivity, and habitualization are implicit in the creation of meaning (Scheufele, 1999:105; Van Gorp, 2010). Frames themselves are considered culturally embedded and socially reproduced, they simplify the construction of complex events, making them comprehensible and giving them meaning (Nisbet, 2010:47). Frames, in this way, work “symbolically to meaningfully structure the social world” (Reese, 2001:11 in Reese 2010:17).

The primary critique against social constructionism is the idea that, if taken to its logical conclusion, it devolves into relativism and solipsism (Hacking, 2000). With this in mind, and in line with the bulk of health-related framing research, a ‘weak social constructionist’ approach was adopted for this research (Lupton, 2013:45). This methodological approach recognises the insights of social constructionism, while maintaining that social constructions are rooted in real biological and empirical realities (ibid.; Briggs and Hallin, 2016: 13). It avoids a fully technocratic position, which grants governments and medical experts’ full control over the definitions of reality, instead recognising that that

“these expert actors, networks and practices [interact] with embodied experiences, non-expert forms of knowledges, mass media representations and spaces to construct the ‘reality’ of the particular health risk.” (Lupton, 2013:47). This approach allows the researcher to recognise the realities of scientific facts and data, and the legitimacy of public health interventions, while maintaining that these facts and interventions have different implications and meanings for different people. It does not aim to evaluate or critique public health interventions, but instead pursues an understanding of the ways in which these interventions are represented in the public sphere, and role journalists, politicians, and medical experts play in this process. Returning to the WHO’s declaration of both a pandemic and an infodemic, this research focuses on the latter: exploring the nature of the information that accompanied the biological reality of COVID-19 and its spread (2020a).

While a purely constructionist approach to news framing seeks to understand the public perception and framing of issues, the critical approach draws a link between frames and hegemonic processes and media bias (Van Gorp, 2010:104). Critical framing analyses takes into account the producers of frames, their potential motives, the power dynamics behind framing processes, and patterns of content bias (Reese, 2010; Entman, 2007; 2010a; 2010b). Through considering the unique media landscape of Australia, the global trends of privatisation of media, the ideological underpinnings and potential motivations of particular news outlets, and looking for systemic patterns in the application of frames, this research aims to reflect on the discursive elements of power.

This thesis is therefore constructionist in that it rests on the notion that frames employed by journalists in the news media influence the public’s understandings of events, issues, and figures; and critical in that it considers the deployment of these frames as an expression and outcome of the discursive elements of power (Reese, 2010:19; Blakely, 2003). The mixed-method approach supports these two methodological aims, with the qualitative method seeking to identify framing devices and alternative frames, and the quantitative approach giving an indication of the patterns behind these frames, how they differ between outlets, and the potential influence frame packages may exert over public opinion.

3.2. Sampling

The sample includes both the Victorian State Government press conferences—the primary definers of social issues (Hall et al. 1978)—and news media coverage of the press

conferences from the same day—secondary definers (ibid.). This sample allows for a comparative analysis of the various frames used to characterise the COVID-19 public health interventions, frames operationalised by both the official and medical actors, and the news media.

Evaluating several online ‘timelines’ of the Victorian Second Wave, nine significant dates from 2020 were selected for the sample (Lupton, 2020; Tsirtsakis, 2020). These are shown in Figure 1. The choice to sample according to the significance of the announcements made in the press conferences was motivated with the richness of the data in mind. In the initial search for data, it was determined that on many dates, particular news outlets published no articles about the press conferences. This is likely as the conferences lacking in major announcements were not considered ‘newsworthy’ or of significance to the public (Altheide 2004: 295). Google Trends demonstrated that public interest in the search term ‘Press conference’ in Victoria rose and fell dramatically over the span of the second wave, with notable upticks in search queries on dates on which major announcements were made (App. 6). Days on which significant announcements were thus selected with the assumption that the press conferences would be longer in length, receive more news coverage, and garner more public attention.

The press conferences held on each of these dates (Fig.1) were downloaded and transcribed (n=9).

Figure 1: Key dates

Date (2020)	Announcement(s)
20/06	First restrictions announced, hotel inquiry launched
30/06	Ten suburbs placed under stage three lockdown, international flights into Victoria suspended
05/07	Over 100 new cases, nine public housing towers placed under full lockdown
07/07	Whole of Melbourne and Mitchell Shire placed under stage three lockdown
19/07	State of Emergency declared, masks become mandatory in Melbourne
02/08	Melbourne placed under stage four lockdown, State of Disaster declared
06/09	Roadmap out of lockdowns announced
25/10	First day in several months with no new cases, restrictions announced to ease within the week

30/10	The last of Andrews' 112 consecutive days of press conferences, low cases, Victoria open
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Research conducted by Roy Morgan in 2020 found that the internet had overtaken television and newspapers as the main source of news for Australians. With this finding in mind, articles from digital news outlets were selected for the news sample. To gather a sample most representative of the news which Australians were consuming, the sample included the three most-accessed Australian digital news producers during the period of this case study: ABC News, News.com.au, and Daily Mail Australia, respectively (Nielsen, 2020). Additionally, for a regional news perspective, articles from the largest regional news outlet in Victoria, the Bendigo Advertiser, were included in the sample. Articles published on the nine dates were downloaded from Factiva using the search criterion: '[coronavirus or COVID-19 or pandemic or restrictions] same Andrews'. Several search criteria were tested, but the articles under this criterion were found to be best suited to the aims of this study, as they specifically referred to the press conferences, quoted the primary speaker (Andrews) and mentioned COVID-19 and/or the restrictions. If there were no articles published by a particular outlet on one of the dates, the next available article filling the search criteria was selected. Duplicate articles as well as articles which only mentioned the press conference or COVID-19 information in passing were excluded from the analysis. This resulted in 128 articles which were included in the full news sample.

While similar comparative analyses look at news articles over several days following press conferences/releases (Ting Lee and Basnyat, 2013), the fact of consecutive daily press conferences and the selection of digital news outlets necessitated a different sampling approach for this research. Almost all of the articles found in the initial stages of the sampling process referred to press conferences from the same date the articles were published. To open up the comparative analysis to several days following the press conferences would introduce information not contained in the press conference sample and complicate the comparative analysis. Thus, news articles published on the same date as the press conference sample were selected.

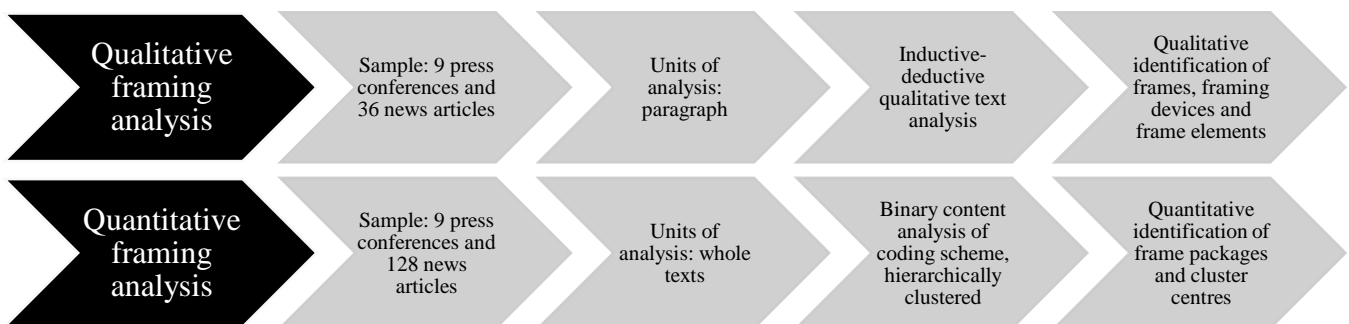
The nine press conferences (n=9) and all 128 articles (n=128) were included in the content analysis and clustering. The qualitative text analysis involved a smaller sample of the nine press conferences, as well as one randomly selected article—using a random number

generator—from each of the four outlets on each of the nine dates (n=36). Randomisation was used to avoid selection bias in the gathering of data.

3.3. Methods

A mixed-method framing approach adapted from Van Gorp (2010) and Matthes and Kohring (2008) was used to analyse this data. This approach, roughly speaking, involved an initial phase of inductive-deductive qualitative framing analysis, followed by a codification of the frame elements, and a binary content analysis of the data, which was hierarchically clustered to determine how the frames and frame elements are employed and grouped together by producers into frame packages (Fig.2). The first stage of this process allows for thick description of the framing devices and identification of metaphors, reasoning devices, lexical choices, narratives, values, and stereotypes (Van Gorp, 2010); the second stage operationalises and organises these frame elements, blinding the researcher to their grouping and allowing frame packages to be empirically—rather than heuristically—determined (Matthes and Kohring, 2008). Mixed-methods approaches to framing analysis which combine qualitative and quantitative data analysis are widely advocated in the framing literature (ibid; Seale, 2005; Hammond, 2018; Van Gorp, 2010; Nisbet, 2010).

Figure 2: Methods outline



3.3.1. Qualitative framing analysis

Van Gorp’s suggested approach to framing analysis involves an initial review of the data before an open and inductive coding process which seeks to identify frames and framing devices through descriptive and analytical coding (2010; Rivas, 2018:881). In this stage, the texts were coded in NVIVO with paragraphs as units of analysis, so that separate and

competing frames and framing devices contained within the same text could be identified (app. 5). This process is iterative, and involved constant comparison between the units of analysis. Following this initial stage, the developed frames were assessed and compared with reference to previous literature to look for patterns, similarities, and differences (Ting Lee and Basnyat, 2013; Matthes and Kohring, 2008; Foley, McNaughton and Ward, 2020; Thomas et al. 2020; Henderson et al. 2009). This process revealed four overarching frames through which the COVID-19 public health interventions were represented in units from the data: medical, political, social, and economic. Each of these frames were divided into Entman's four elements of a frame: problem definition, moral evaluation, causal attribution, and treatment recommendation (2007). This axial stage produced 16 categories into which the initial inductive codes were organised. The units of analysis, isolated from the broader context of the full texts, were then checked for the appropriateness of their allocation, with minor changes made. The results of this process are presented both through hierarchy charts generated using NVIVO (app. 2; app. 3), and descriptive qualitative analysis (Van Gorp, 2010). The presentation of the data in this way is influenced by papers by Foley, McNaughton and Ward (2020) and Thomas et. al (2020). This process was completed for the nine transcribed press conferences and the 36 of the news articles in the sample. This method identified the key frames used in the sample and the frame elements and devices of which they are comprised. The next stage of the process looked to codify these frame elements and understand how they are grouped together in frame packages though quantitative content analysis with a broader sample and full texts as units of analysis.

3.3.2. Quantitative binary content analysis

Matthes and Kohring's method seeks to improve reliability and validity through a binary content analysis designed to counteract the hermeneutic aspects of frame analysis (2008). This approach entails the understanding of Entman's aforementioned four frame elements as variables which can be operationalised in a content analysis of texts (2007). Through this process, the researcher identifies the presence or absence of individual frame elements, rather than heuristically attributing frame elements to holistic and abstract frames and frame packages. Once coded, the data was hierarchically clustered using the Ward method to allow for reliable identification of patterns. Different clustering solutions and the 'elbow method' were tested to develop a three-cluster solution with significant differences between the clusters and consistent patterns of similar frame elements within the clusters (app. 7; Yim and

Ramdeen, 2015).

Matthes and Kohring organised their data according to the inductive and comparative identification of topics and actors (2008). Usefully, the qualitative stage of the analysis, in this thesis, involved the identification of key frame elements and frames used in the texts. The four overarching frames identified in the qualitative text analysis—medical, social, economic, and political—thus serve as an appropriate summary of the main topics of the articles. In addition to this, 19 categories of actors identified in the original data-set were recoded into four overarching characterisations: medical experts, politicians, business actors, and media/public opinion (app. 5). As in Matthes and Kohring’s analysis, these four central topics and four types of actors constitute the problem definition variables in the coding scheme (ibid.). The frame element causal attribution is presented through variables describing to whom risks and benefits are attributed in the texts. These variables mirror the actor variables, with the omission of business actors. This omission was based on the findings of the first method and the hierarchy charts—it did not occur in any of the texts that business actors were held responsible for the risks or benefits related to the restrictions, therefore this code was excluded from the coding scheme. Moral evaluations were determined according to the benefits and risks of the public health interventions. Moral evaluations related to governance and impacts on social life were typically represented in the same two ways: focusing either on individual freedoms, impacts, and injustices; or on the justification of restrictions through health as the primary good. The political and social topics were therefore amalgamated into the moral topic. The moral evaluation variables employed were, therefore: health benefits, economic benefits, moral benefits, health risks, economic risks, and moral risks. As in Matthes and Kohring’s paper, positive and negative judgements are used as proxies for the treatment recommendation (ibid.). As the initial review of the data revealed a number of texts which merely listed the restrictions and case numbers, a third judgement—neutral—was additionally included. In addition to these variables, two additional variables were added to include the biocommunicable models of Briggs and Hallin: public sphere and biomedical authority (2016). This choice was made as the two biocommunicable models are easily identifiable, and their inclusion in the coding scheme would allow an additional dimension through which to understand the frame elements which constitute the final frame packages.

This produced total of 25 variables which were coded according to binary variables (1=present, 0=absent) with full articles as the unit of analysis (app. 1). All 128 articles and the nine press conferences in the sample were coded according to this schema. Once coded,

the data was input into SPSS and was hierarchically clustered using the Ward method and a three-cluster solution (Matthes and Kohring, 2008; app.7). In addition to the initial qualitative framing analysis, the numerical representation of the clusters and their mean values provide a more empirical basis for analysis. The first stage of the analysis allowed for the identification of frames, frame elements, and framing devices through the data, and the second stage demonstrated the patterns through which these frame elements were presented in the data. The mixed-method approach, in this way, improves the clarity, reliability, and validity of this study. The limitations to this approach will be addressed at the end of this thesis.

4. Analysis

The analysis is comprised of two main sections, separated according to dataset. Each of the two sections include descriptions of the results of the qualitative and quantitative framing analyses. The qualitative framing analysis results include hierarchy charts of frames and frame elements, as well as descriptions and examples of framing devices found in the texts. In this section, quotes are presented according to their assignment to the identified frame and frame element as well as the source, order, and date of publication (e.g., ‘PC12006 Medical-treatment recommendation’ indicates the quote is a treatment recommendation from the medical frame in press conference #1 from the 20th of June).

The quantitative analysis includes the results of the content analyses. The significance of the clusters is explained, along with the ways in which patterns of frame elements constitute identifiable frame packages adopted in both the press conferences and the news articles. The qualitative and quantitative findings of the press conference sample will be compared with that of the news article sample throughout the analysis and in the discussion.

4.1. Press conferences

Before detailing the results of the analysis of the press conferences, it may be prudent to briefly explicate some of the narrative elements of these press conferences that are lost in the textual analysis below. These press conferences were held daily for several months. Premier Daniel Andrews consistently led the conferences, but the Health Minister, Chief Health Officer, and Chief Police Commissioner also regularly had speaking roles, and answered questions from journalists according to their area of expertise. The conferences were highly consistent in format and content. The opening monologue typically involved the detailing of COVID-19 related data (including case numbers, deaths, tests), announcements regarding the public health response and/or an emphasis on the importance of continued compliance with public health advice, and an expression of gratitude to the Victorian community. Following this opening speech, another speaker sometimes took the podium to expand on a particular topic. If not, the floor was given to the journalists and the remainder of the conference was directed by their questions.

4.1.1. Qualitative framing analysis (n=9)

Medical frame

Consistent with previous research, medical framing of the public health interventions was

dominant in the press conferences (Getchel et al. 2018; Briggs and Hallin, 2016:112; app. 2). In fact, the other three frames predominately occurred only when journalists would lead the speaker towards a particular topic through their questions. There were several key medical framing devices which emerged during the qualitative framing analysis of the press conferences: ‘driven by data/science/medical advice’, ‘public health bushfire’, and ‘do the right thing’.

Medical: ‘Driven by data/science/medical advice’

Throughout all of the press conferences, addresses of other social, economic, and political topics were often counteracted by emphasising that all decisions were based on expert medical advice, epidemiology, mathematical modelling, and scientific knowledge of the virus. This emphasis on science and data worked to depoliticise the decisions, demonstrating that policy decisions are made according to expertise, and distributing responsibility among the government and the public health team (Lupton, 2013:26):

PC12006 Medical-treatment recommendation: *“First things first: we have always followed the advice of our public health experts [...] that advice is critically important. That advice has been followed and it will continue to be followed by our government.”*

By continually stressing their role as a conduit for the advice of public health experts, speakers at the press conferences situated themselves as quasi-medical actors. Not in the sense that they pretended to be a scientist or a medical expert—when asked specific medical questions they typically deferred to the Chief Health Officer. However, the constant reference to medical advice, science, and data, frame the government decisions through a biomedical authority biocommunicable model (Briggs and Hallin, 2016).

Through this framing, the science/data/advice constitute elite and expert forms of knowledge, which work to distinguish the health crisis from other public issues, in which “more populist, relativist, or democratic communication ideologies prevail” (Briggs and Hallin, 2016:23). The public health interventions are, in this way, framed as embedded in and determined by data, science, and highly specialised authoritative sources. Consistent with previous studies, science is represented as the solution to the health crisis (Blakely 2003; Getchel et al. 2018; Abeysinghe and White, 2010):

PC70609 Medical-treatment recommendation: *“more than a thousand different scenarios have been put into this supercomputer. [...] You can't argue with this sort of data. Can't argue with science. You can't do anything but follow the best health advice.”*

This biomedical authority framing is largely technocratic, and situates expert risk assessments as indisputable (Briggs and Hallin, 2016). In this quote, the benchmark for risk assessments is scientific and determined according risk to health (Lupton, 2003:35; Bowen and Li, 2018). The public is stripped of their agency to make individual risk assessments due to their lack of expertise and knowledge, and the public health interventions being imposed are framed as the only appropriate course of action (Lupton, 2013:151; Briggs and Hallin, 2016:75). Subjective risk assessments and public opinion, in this way, are framed as illegitimate and invalid: “This is not about popularity—it’s a pandemic.” (PC82510).

Medical: ‘Public health bushfire’

The medical problem definition was frequently characterised through the metaphor of the spread of COVID-19 as a ‘public health bushfire’. In Australia, bushfires are a relatively common occurrence and are generally times in which state intervention, as well as collective effort and community involvement, are relied upon. Indeed, the summer directly preceding the COVID-19 pandemic saw fires rage around Australia and a State of Disaster declared in Victoria, allowing the government more power to stop the spread of the fires. Rendering COVID-19 as a public health bushfire creates a link between the virus and a phenomenon that is well-known and negatively regarded across political and cultural lines. A number of studies on medical news framing have identified war frames as commonly used by politicians and journalists alike (Benziman, 2020; Blakely, 2003). This framing engenders a ‘rally around the flag’ effect, encouraging political divisiveness and tensions to be set aside for the greater good of the nation (Briggs and Hallin, 2016:94). Through war frames, health crises are framed as a threat to a nation, and as issues which need to be acted upon and controlled. Andrews employs the war frame throughout the conferences, describing public action to prevent the spread of COVID-19 as a ‘war’ against a ‘wicked enemy’. However, in Australia bushfires are a more recent and potent collective memory, and Andrews employs the bushfire analogy to create a similar effect (Lupton, 2013:150):

PC60208 Medical-problem definition: *“This is a public health bushfire, but you can't smell*

the smoke and you can't see the flames. This is very different. It is a wicked enemy and it spreads so fast without people even knowing.”

PC23006 Medical-treatment recommendation: *“These are simple things, but they make a massive difference to the fight against this virus. They make a massive difference to us putting out this public health bushfire”*

Here, the medical advice for individual behaviours is framed as a weapon every citizen can wield to help the state’s ‘fight’ against COVID-19. This framing device establishes an enemy, compels actions, and promotes a sense of hope that the virus can be overcome. In this way, the war/bushfire framing device implicates a link between the problem definition (the spread of COVID-19), the treatment recommendations (public health advice and intervention) and a positive moral evaluation (Benziman, 2020; app. 2). As the government presents it, public health interventions—and public compliance with them—are morally just in that they serve to suppress an evil enemy. It is a compelling frame, providing Victorians with a sense of agency and purpose, and representing public health interventions and advice as essential tools for putting out the fire and/or winning the war:

PC51907 Medical-moral evaluation: *“I thank every Victorian who’s come forward and got tested even with the mildest of symptoms. That data gives us the key to winning this battle [...] it makes a powerful difference for all of us”*

Medical: ‘Do the right thing’

Often combined with the previously outlined framing devices was the framing of abiding by recommendations and public health interventions as a moral imperative (Entman 2010a; Lupton 2013:122; Douglas, 1994:26). Much of the causal attribution of the spread of COVID-19 and subsequent restrictions was behavioural—workplace transmission, family-to-family transmission, people not following advice (app. 2). Returning to the idea of risk, in these scenarios individuals have made subjective risk assessments and chosen not to follow the expert definition of risk purported in the press conferences. The speakers are explicit in their framing of these transgressions as immoral, labelling them as ‘selfish’ and ‘irresponsible’ (Lupton, 2013:10; Douglas, 1994:84). They reinforce the biomedical authority of expert definition of risk:

PC12006 Medical-moral evaluation: *“You cannot make your own decision because it is not your decision to make. You are putting the rest of Victoria at risk. That is not right. That is not the appropriate thing to do.”*

Additionally, speakers often focused on the inverse of these behaviours, praising individuals for following rules, expressing gratitude to those who get tested and those who comply with contact tracing measures. Here, individuals are compelled to do the ‘right’ thing, meaning accepting the expert definition of risk and the legitimacy of interventions to mitigate it. Compliance with public health advice and restrictions is represented as a public service, as it protects oneself, one’s family, and the State of Victoria.

Social Frame

The public health interventions announced over the nine press conferences included lockdowns, school closures, restrictions on public and private gatherings, and travel restrictions. These interventions impacted Victorian citizens in dramatic ways. The social impacts of public health interventions were regularly recognised and addressed in the press conferences; however, they were typically framed according to the utilitarian public health ethic, and presented as necessary sacrifices in order to overcome the health crisis (Bowen and Li, 2018:236; Lupton, 2003:35).

Social: ‘Sacrifice’

During announcements, speakers regularly recognised that restrictions and rules were ‘difficult’, ‘challenging’, ‘a struggle’, and ‘frustrating’. They expressed sympathy and offered support to vulnerable communities, separated families, those who had lost loved ones, and children who were missing school. These human impacts, however, were framed as necessary sacrifices to overcoming the health crisis, and contributions to a collective effort:

PC30507 Social-moral evaluation: *“We at no point underestimate how challenging this will be for families and businesses, particularly those families, many of whom are vulnerable, in those public housing towers, [...] But your sacrifice and the contribution that you are making is central to the safety and wellbeing of every Victorian family. You have our gratitude. We are proud of the job you are doing.”*

Using the framing device in which compliance with public health interventions is represented as sacrifice is similar to war framing devices, in that it encourages individual wellbeing to be sidelined for the good of the nation (Benziman, 2020:248). It represents giving up something valuable for a greater good. There is an implicit moral evaluation in this rendering of compliance to the public health interventions, in which the social risks posed by the restriction of activities like schooling, sports, religious gatherings, protests, social interactions, are represented as secondary to the health risk these activities pose. In this framing, the utilitarian public health ethic and expert definition of risk predominates, and social risks are represented as permissible in the interest of health:

PC70609 Social-Problem definition: *“I've got kids of my own. The Premier's got kids, school-aged children. We understand what impact this is having on parents and students. We want every child back to face-to-face teaching, but we simply cannot do that. Now it's not a choice available to us. There may be decisions we'll be we'll make in the future, but that we entirely based on the case numbers,”*

Here, the Chief Health Officer is using the ‘driven by data/science/medical advice’ framing device to present the health interventions and social impacts as unavoidable. Alternative courses of action to open schools up once again, are not a ‘choice’, but are predetermined by COVID-19 case numbers. By including himself and the Premier among the socially impacted, he additionally employs the second key social framing device: that Victorians are ‘all in this together’; not even government officials are exempt from the social impacts.

Social: ‘All in this together’

A sense of social collectivism and responsibility was frequently engendered along with the framing device of sacrifice. Here, the ‘necessary sacrifices’ are not being made alone, but are being endured by all Victorians. With the understanding of health as the primary good deeply embedded in the press conferences, individual sacrifices are rendered as contributions towards a collective effort which benefits not merely oneself, but one’s family, community, state, and nation. In this sense, the medical frame superseded and often subsumed the social frame, as responses to questions regarding social impact were often answered by deferring to medical advice and data (De Vreese, 2010:188). Social issues like home schooling, working from home, loneliness, fatigue, and panic were mentioned as important, but rarely entailed

treatment recommendations that actually addressed the issue. Instead, treatment recommendations often focused on the necessity of such social sacrifices and the implication that the only way to overcome them is through a collective effort to overcome the health crisis (app. 2):

PC40707 Social-treatment recommendation: *“if we all work together over these next six weeks, as painful and frustrating and difficult as that will be, we will be able to get to the other side of this stay-at-home period.”*

Economic Frame

The public health interventions announced in the conferences had a large economic impact both on individuals and the State of Victoria. The treatment of these impacts largely mirrored the treatment of social issues. That is, economic impacts were presented as necessary sacrifices, and issues to do with jobs and the economy were presented as secondary to combatting the health crisis. As in the social frame, medical framing pervaded questions related to the jobs and the economy, with the utilitarian public health ethic underscoring many of the addresses of economic effects.

Economic: ‘sacrifice’

Economic impacts were often characterised by framing devices which emphasised the paramountcy of health. As explored above, the ‘official’ definition of risk according to expertise and health outcomes was often given precedence over subjective risk judgements, including those to do with financial wellbeing. The following quote addresses the rise in workplace transmission of COVID-19, and individuals who are going to work despite them having symptoms or waiting for a COVID test result:

PC12006: Economic-Moral evaluation: *“people are sadly making the choice that public health is less important than the welfare and the survival in a financial sense of their family. They're wrong to make that judgment, but I can appreciate that.”*

Here, the State Government is quite explicit in stating that the collective good of public health is more important than any form of individual economic benefit. Subjective risk assessments which perhaps prioritise the financial wellbeing of one’s family—and in doing

so diverge from the expert definition of risk—are ‘wrong’. In the same way as in the social frame, following the rules is represented as a sacrifice every individual must make for the greater good. In the economic framing of the press conferences, this greater good involves ‘repairing the damage’ done to the economy.

Economic: ‘Repairing the damage’

In some cases throughout the press conferences, economic framing was used to motivate the public health interventions and incentivise compliance with them. The greater good, in the economic frame, was represented as restoring and repairing the economy and returning to normalcy. As the public health interventions were framed as ‘not a choice’ but a necessity, the path out of the restrictions and into economic normalcy is represented as dependent on public compliance with them:

PC70609 Economic-treatment recommendation: *“We must take steady and safe steps to find COVID normal and make sure that in opening up, we can stay open; not have a situation where we are unable to begin the task of economic repair, unable to begin the enormous task of repairing the damage that this global pandemic has done to communities, to our economy, to businesses, to workers—that will simply be impossible [if lockdowns are lifted prematurely]”*

In this framing, the health crisis is a precursor to the economic crisis, and thus the only way to properly address the economic crisis is to first address the health crisis. The public health interventions are repositioned as not the catalyst of the economic crisis, but the solution to it. Economic impacts serve as an:

PC40707 Economic-treatment recommendation: *“important reminder for all of us, that we have to get past this public health bushfire and get back into a position where we can start to open up again and start to repair the very significant economic damage that has been done.”*

Public health interventions and the subsequent economic impacts are in this way justified through an economic framing, as they are represented as only path towards the restoration of the economy and creation of jobs—the only way to ‘repair the damage’.

(A)political frame

Before addressing the findings related to political framing devices, it is important to clarify what exactly is meant by political frames in the context of this research. A number of authors contend that health and risk judgements are always political (Douglas, 1994:10; Lupton, 2013; Thompson, Cussella and Southwell, 2014:6). Indeed, these press conferences were run by political actors, and involve governance and exercises of power, and in this way, politics permeates all statements contained within them. For the purposes of this research, however, political frames were only considered activated when addressing external political actors, political controversies, interstate comparisons, and critique of political actors and actions. In this way, political framing is considered in terms of the ‘political game’ or ‘political strategy’ frame, in that the substance of policies are set aside, with a focus instead on frames which address the successes, failures, and popularity of political actors (Briggs and Hallin, 2016:91; Brewer and Gross, 2010:160; Haigh, 2018).

With this understanding of political frames in mind, the political frame was the only of the four key frames which were not raised in all of the nine press conferences. Additionally, political issues and concerns were rarely raised in statements by the State Government, and most of the addresses of political topics were spurred by questions from journalists.

Political: ‘All in this together’

Political relationships were typically referred to by Andrews as amicable, supportive, and collaborative. While questions were regularly asked about border closures and the statements by and decisions of the Federal Government and other state Premiers, Andrews would often emphasise that he was in regular contact with the political actor(s) in question and he was working alongside them and grateful to them:

PC23006 Political-Moral evaluation: *“I’ve spoken with the premiers of new South Wales, South Australia, and Queensland over overnight. And I thank them very much on behalf of all Victorians. Just like fires and floods, we’re all working together because we all know this to be not just a Northern Melbourne issue, this is a Victorian, and a national issue. And I’m very, very grateful to all of them. I’m also very grateful, as I explained yesterday, to the Prime Minister. I had a few texts with him last night. He is very pleased with the announcements we made yesterday as the appropriate response. And we’ll continue to work*

with him and his officials and his ministers to make sure that whatever we need, we will get.”

Here, Andrews is actively countering the potential framing of the issue in terms of partisanship or as a problem that only affects a certain populace of Australians. Expressing that the other states are supportive of Victoria and that the Prime Minister thinks the public health interventions are ‘the appropriate response’, provides an additional level of credibility to the actions of the State Government. As in the ‘public health bushfire’ and the ‘all in this together’ framing device, solidarity and bipartisanship is used to emphasise the collective nature of the threat, and the necessarily collective nature of the steps to combat it (Briggs and Hallin, 2016:130):

PC70609 Political- Moral evaluation: *[We are] where we are today as a result of a partnership where people are not worried about what political party you're from, or what government you're from, but we're all working together.*

Political games: ‘irrelevant’

The main critique of Victorian State Government throughout the second wave was their failures to prevent it from occurring in the first place. This was largely attributed to missteps in the management of the Victorian hotel quarantine system, which was a topic on the agenda for many journalists, as well as the Victorian opposition. In two cases, when asked about Liberal opposition leader for Victoria (who was particularly vocal in his criticisms) Andrews essentially dismissed the questions, saying he wouldn’t play ‘silly political games’ (PC40707), and that:

PC12006 Political-Moral evaluation: *“those individuals and that criticism is completely irrelevant to the work that I'm doing, and the work that the public health team is doing. They're free to say whatever they like, but that's irrelevant to me, and irrelevant to the work that all Victorians are doing.”*

Similarly, when critical questions were levied at Andrews regarding the missteps in the management of hotel quarantine, he dismissed the questions as irrelevant to the public health task at hand. Here, Andrews’ establishment of a Royal Inquiry into hotel quarantine in June was an important step in framing the problems with hotel quarantine as not something for

him to make judgements on or comment on, but as separate issue that was under investigation by a third party:

PC30507 Political-treatment recommendation: *“In terms of these matters, a judge is conducting an inquiry and it's not my position to conduct that inquiry for her. [...] And I'm unapologetic about focusing on the stuff that needs to be done right now and tomorrow and the next day, and for the foreseeable future. [...] And that is: right now, and for the foreseeable future, containing these cases, slowing the spread of the virus, bringing consistency, driving down the numbers, and resuming our process of cautious, easing of the restrictions.”*

In these quotes, as in the economic and social frames, the issue being addressed is represented as secondary to the health crisis and necessity of public health intervention. The consequence-based utilitarian ethic is very explicit here, in that Andrews stresses that while what has happened cannot be changed, what might happen can be.

In this way, the press conferences were characterised by an active negation of ‘political game’ frames, and an emphasis on bipartisan solidarity, technocratic decision-making, and public health utilitarianism.

4.1.2. Quantitative framing analysis (n=9)

To enable a more reliable comparative analysis and look for patterns in the application of frames and frame elements, following the initial qualitative framing analysis, a binary content analysis of the press conferences was performed (app. 1). The key difference in this analysis is not only its quantitative nature, but the fact that the units of analysis were the full texts of individual press conferences and news articles, rather than paragraphs. This choice allows the researcher to identify how certain frames and frame elements are consistently employed together to promote a particular interpretation.

Cluster analyses are useful for finding patterns and grouping together heterogeneous data, however, the press conferences were mostly uniform in their inclusion of frame elements. Tests of cluster solutions were trialled, but the data was too homogenous and no clusters with significant in-group linkages or distances between them could be formed. For this analysis, this homogeneity is taken as an indication of a single overarching frame package of its own (app. 4).

Results

Present in all the press conferences were medical, economic, and social topics; medical experts, politicians, and media/public opinion actors; the attribution of benefit to medical experts; the attribution of risk and benefit to the public; moral and health benefits; a positive judgement on the restrictions; and a biomedical authority biocommunicable model (app. 4). These variables are closely aligned with public health practice, which takes into account socioeconomic factors, depends on politicians and policy for intervention, utilises the media for spreading health messages, relies on medical expertise and public behaviour change, and promote the protection of health (Guest et al. 2013). As in the qualitative analysis, the speakers at the press conference presented restrictions as rooted in medical advice (benefit attribution: medical experts; biomedical authority), a collective responsibility (benefit and risk attribution: public), and a moral imperative (benefits: health and moral; judgement: positive) (app. 4).

In this way, this binary content analysis, along with the qualitative text analysis, establish a 'public health' frame package through which COVID-19 public health interventions were framed by the Victorian State Government in press conferences. This framing involved both the nature of the risk and the appropriate response to it being defined according to their impact predominately on health. Public health interventions were framed as determined by expertise, data, and science, and were presented through biomedical authority biocommunicability, with the public's opinions and positions on the matter rendered as largely invalid. They were presented as the only available solution to the health crisis, and in turn the only path to repair the social and economic damage associated with it. The interventions were, therefore, framed as not only the scientifically appropriate course of action, but also the most moral course of action. The public was attributed with responsibility for both risks and benefits. They were compelled to make sacrifices for a greater cause, comply with the restrictions to fight the 'public health bushfire', and set aside their personal interests, beliefs, and political leanings to work together to combat the health crisis.

In the following section, this framing, and the qualities by which it is characterised, will be compared with news reporting on the same topics from the same dates.

4.2. News Articles

Public service, regional, and tabloid news outlets

Before addressing specific frames and frame elements found in the analysis, it is important to address some of the key differences between the four news outlets in the sample and how those differences were reflected in the qualitative and quantitative framing analysis.

Consistent with previous research, the articles were quite heterogeneous in their reporting, with clear differentiation between the public service, regional, and tabloid news (Cornia et al. 2016). The headlines of the four articles in the sample from the 7th of July—the date wider lockdowns for Melbourne were announced—are illustrative of the differences between the outlets¹:

DM40707: *'The numbers will get worse': Daniel Andrews makes worrying admission as all of Melbourne is locked down for SIX WEEKS in bid to stop 'thousands and thousands' of COVID cases and deaths* (Moore, 2020)

NEWS40707: *'Catastrophic': Vic seethes with anger* (News.com.au, 2020a)

ABC40707: *Melbourne enters new coronavirus lockdown. Here are the key points from Premier Daniel Andrews* (Iorio, 2020)

BA40707: *Victoria-NSW border to close, amid new daily COVID-19 record* (Nakos, 2020)

These differences are indicative of the business models and size of the different news outlets. ABC News Australia is a publicly funded bipartisan news outlet; The Bendigo Advertiser is a regional news outlet with a paywall, smaller circulation, and a digital and physical publication; and The Daily Mail Australia and News.com.au are national digital news producers which are owned by News Corp and are funded by advertising revenue. For the latter two news outlets, the dependency on ad revenue encourages the production of more news articles and more sensational news content, which is reflected in the findings below. In this way, News.com.au and the Daily Mail are understood as tabloid news, in that reporting typically “emphasises damage, is emotional, focuses on soft news, human interest, and

¹ ‘DM’ indicates the Daily Mail Australia, ‘NEWS’ indicates News.com.au, ABC indicates ABC News Australia, and BA indicates The Bendigo Advertiser.

unexpected events” (Rossman, Meyer, and Schulz, 2018:362; King and Street, 2005:121; Young, 2015).

4.2.1. Qualitative Framing Analysis (n=36)

Medical frame

As explored in the analysis of the press conferences, in efforts to exert control over the dominant narrative, the press conferences included strategic framing and priming strategies of public health interventions along with specific recommendations and case numbers.

Consistent with previous research, many of the news articles from the sample followed the official State Government framing of the restrictions (Getchel et al. 2018; Lawrence, 2010; Abeysinghe and White, 2010; Macy-Ayotte, 2018; Ting Lee and Basnyat, 2013). These articles announced case numbers, restrictions, included quotes compelling individuals to follow the rules, and cast a positive moral evaluation on the interventions by the government. These articles typically took the form of a ‘summary of’ or ‘the key points from’ the press conferences. In these cases, the flow of information from press conferences to news media was self-evident. The role of journalist is reduced to the selection of key announcements and reproduction of the dominant frame presented by official sources in the press conferences (Lawrence, 2010). One ABC News article simply quoted Andrews’ full opening statement (ABC News, 2020a).

In other similar articles, however, the facts of restrictions were stripped of the moral evaluations embedded in the press conferences. Instead, public health interventions were presented as lists of facts, rules, and testing sites. Perhaps this is attributable to the journalistic norm of objectivity, requirements as to the length of articles, and reluctance of journalists to take a stance on a public issue (Herman and Chomsky, 1988:84; Lawrence, 2010; 265; Hallin and Mancini, 2004:246). The public service role of journalists, in these cases, is simply to update the public on the new rules under which they live and how these rules impact them.

The Bendigo Advertiser was the only outlet in the sample which included articles classified as ‘editorial’ (two of the nine articles). Both of these editorial articles similarly hewed close to official government lines, with the authors asking readers to “play by the rules” (Kennedy, 2020) in an article from June, and highlighting the “chance to look ahead to better days” in

October as restrictions eased². These articles framed the interventions in more emotive and unscientific ways, but were nonetheless consistent with the press conferences in terms of their positive framing of restrictions. Many of the units of analysis in the sample mirrored this, replicating the more moralistic framing devices used in the press conferences such as the ‘do the right thing’, ‘all in this together’, and ‘repair the damage’:

DM12006: Social-moral evaluation: *“The community response to COVID has shown that when Australians understand there is a crisis they will pull together to look after each other”* (Poposki and Wondracz, 2020)

Social frame

Social: ‘Melbourne’s most vulnerable’

One of the key social frames that emerged in the news articles addressed vulnerable communities and the ways in which government action overlooked or threatened these individuals’ livelihoods. This framing was particularly salient during the lockdowns of the public housing towers in July, during which several articles adopted a critical framing of the government’s hard-line approach to the lockdowns:

DM40707 Social-moral evaluation: *“residents of the nine locked-down towers said they feel let down by a lack of communication, food and supplies. Some have complained they have had to go hungry because officials have not brought them enough to eat.”* (Moore, 2020)

Here, the ideal of the news media as public sphere is foregrounded, with the individuals most affected by the restrictions given a platform through which to communicate what they feel are injustices forced upon them (Reader, 2015; Briggs and Hallin, 2016). The official government statements that restrictions are necessary and support will be provided are contrasted with the shortcomings of such support and the moral risks of the restrictions. The notion of the media as a ‘watchdog’ for the government is evident here, with the public housing tower hard lockdowns, in these articles, incorporated into a framing of the government failing to support or act on behalf of vulnerable communities, immigrants, and already struggling citizens (Cornia et al. 2015; Jordens, Lipworth, and Kerridge, 2013; Lawrence, 2010: 280). The affected parties are represented in terms of their vulnerabilities,

² Article appeared in Factiva download, but is missing from The Bendigo Advertiser website

with some tenants described as having “fled war or family violence”, “dealing with mental health challenges”, and working “casual or insecure jobs” (Zaczek and Piotrowski, 2020). The restrictions imposed by the government are framed as extreme, “worse than prison” (Moore, 2020), with police “swarming” the buildings (Zaczek and Piotrowski, 2020), and potentially “horrific” consequences (ibid.). One article included a quote stating: “We believe that if Victoria had more public housing this would be less of an issue.” (ABC News, 2020b). This critical social framing is rooted in a deontological ethic, which sees the lockdowns of the public housing towers as transgressions of moral principle and representative of broader societal issues related to public housing and vulnerable communities (Bowen and Li, 2018; Chaua et al. 2019):

DM30507 Social-problem definition: “*Public housing resident Hoda God, 31, told AAP everyone was surprised by the lockdown and families with young children were already struggling. [...] It has echoes of Wuhan residents being sealed in their homes during the first outbreak of the pandemic.*” (Zaczek and Piotrowski, 2020)

The comparison to Wuhan in this quote is a powerful framing device which associates the acts and decisions of the Victorian Government with those of Communist China in the early stages of the pandemic. It functions in the same way as the characterisation of restrictions as ‘draconian’ (Moore, 2020; Parsons and McPhee, 2020), emphasising their severity and unprecedented nature in a liberal democracy like Australia (Chaua et al. 2019). Although not present in this sample, characterisations of Andrews in communist terms by news outlets garnered much public backlash during the pandemic, as The Daily Mail and News.com.au alike ran articles which referred to Andrews as ‘Dictator Dan’ and ‘Chairman Dan’ (Graham et al. 2021:144; Brevini and Ward, 2021). Such framing techniques draw upon the western ideological opposition to communism, and Herman and Chomsky suggest are used by right-leaning media as a political control mechanism to “fragment the left and labor movements” (1988:95). They write that “The ideology and religion of anticommunism is a potent filter” (ibid:97), and here it is used to position the restrictions as in violation of core liberal values of freedom and democracy.

These articles focusing on moral risks adopted a public sphere biocommunicable model, and exemplified a key departure from the official government framing and a central aspect of the journalistic ideal (Briggs and Hallin, 2016). The expert definition of risk

presented in the press conferences is challenged by stories of vulnerable individuals and communities who are suffering as a result of the public health interventions. The interventions themselves are seen as posing moral risks, both in terms of their infringements on civil liberties, and the disproportionate impact they have on already-struggling groups (Chaua et al, 2019:6). These articles do not necessarily dispute the necessity of the public health interventions, but are critical of their imposition. They highlight how socioeconomic factors are implicated in the public health decision making, giving voice to the affected parties, and, as in previous studies, focusing on the human impact of the restrictions (King and Street, 2005). Articles like these can have a significant impact on public opinion and rally public support for affected parties. In the case of the public housing towers, a fundraiser was launched to support affected residents which raised over 250 thousand dollars in 24 hours (Coë, 2020).

Social: ‘Vic seethes with anger’

Beyond the representation of human impacts in terms of vulnerable communities, many of the articles contained an authorial voice regarding the broader social impact of restrictions. Sensational and critical language regarding the public health interventions, such as ‘angry’, ‘frustrated’, ‘furious’, ‘disappointed’, were often vaguely attributed to ‘locals’, ‘families’, and ‘Victorians’:

NEWS40707 Social-Moral evaluation: “*Melburnians have been quick to react with a mix of shock, despair and anger about the “devastating” consequences of a second lockdown.*” (News.com.au, 2020a)

DM70609 Social-Moral evaluation: “*But a growing number of locked down residents are growing increasingly frustrated with the Premier's tough restrictions.*” (Parsons and McPhee, 2020)

While the speakers in the press conferences framed the social impacts of the public health interventions as secondary to risk to health, statements such as these foreground the social impacts. This ‘conflict’ framing device has been identified in a number of previous studies, and it draws a contrast between the desires of the public and the

actions of the government (Price, Tewksbury, and Powers, 1997; Bowen and Li, 2018; Hammond, 2018; Rossman, Meyer, and Schulz, 2018:370). It is indicative of a ‘definitional struggle over risk’, in which the public health framing defines risk according to health outcomes, and the social framing defines risk according to social impacts (Lupton 2013:87; Abeysinghe and White, 2010:371). By focusing on the emotional responses to the imposition of restrictions, statements in several of the articles in the sample amplified the social risks of public health interventions at the expense of recognising the legitimate health risks represented by their absence (Rossman, Meyer, and Schulz, 2018).

Economic frame

The economic framing of public health interventions was additionally more salient in news articles than press conferences, however, notably, it was not as common or negative in tone as one may have expected based on previous similar studies (app. 3; King and Street, 2005:120; Thomas et al. 2020). Articles typically shared the framing of the State Government, in which the economic risks were large, but were secondary to the health risks. Many of the units of analysis were also characterised by the same economic optimism of ‘repairing the damage’ as in the press conferences. The key exception to this risk assessment was found in several articles by the Bendigo Advertiser, which focused on the differences between regional and metropolitan Victoria, and the government’s failure to properly address the distinction between the two.

Economic: ‘Communities and local economies’

Three articles by the Bendigo Advertiser focused in part on small business owners, and the struggles they have faced as a result of the pandemic. In many ways this mirrored the previously identified social framing device of ‘vulnerable communities’, in that public health interventions were represented as unbalanced in their impact upon regional communities:

BA40707: Economic- Moral evaluation: *"Our communities and local economies have already been smashed by Victoria's COVID-19 shutdowns." [Mr. Walsh said] "We are all prepared to do our bit to flatten the curve and save lives, but for us to be dragged into Melbourne's mess is a bitter blow to regional Victorians."* (Nakos, 2020)

Here, a contrast was drawn between the elitism of politicians and health experts, and their failures to recognise the economic struggles of regional communities and economies:

BA40707: Economic-Moral evaluation: *"Daniel Andrews has taken a Melbourne problem and extrapolated that across regional Victoria," Mr Drum said. "We have so many border communities that act as one. This is a clear opportunity for Daniel Andrews to pretend he understands the regions."* (Nakos, 2020)

In Regional Victoria there were fewer cases of COVID-19 and fewer deaths than in metropolitan Melbourne. With regards to regional Victoria, economic frames demonstrated the same definitional struggle over risk, in which the economic risk in regional Victoria was portrayed as larger than the health risk. This framing involved a public sphere biocommunicable model, in which business and political actors are included in the discussion and used as sources to comment on the public health interventions (Briggs and Hallin, 2016):

BA23006: Economic-treatment recommendation: *IT IS time to consider easing social distancing restrictions in regional Victoria, a Bendigo business leader says.* (O'Callaghan, 2020)

Political frame

As the hierarchy charts illustrate, the biggest disparity between the press conferences and the news articles was observed in the political framing of public health interventions (app. 2, 3). While in the press conferences Andrews continually referenced the scientific and apolitical nature of the restrictions and emphasised amicable relationships between State and Federal leaders, the news articles frequently attributed responsibility to politicians and emphasised political controversy.

Political: 'blame'

The attribution of blame is a common journalistic practice, and has been identified in many previous studies on pandemic reporting and risk scenarios (King and Street, 2005; Blakely, 2003; Bowen and Li, 2018; Haigh, 2018; Yu et al. 2018:304). Two main critiques of the State Government public health interventions emerged in the reporting on the pandemic: (1) the mismanagement of hotel quarantine, which is presented as the catalyst for the second wave of

the virus; and (2) Victoria's contact tracing system, which is presented as a key failing which allowed the virus to spread and prevented restrictions from being lifted earlier.

The issues with hotel quarantine were mentioned in seven of the articles in the sample, and were regularly used as a framing device to counter the 'official' narrative, in which the public was attributed with the risk, with a framing in which the government is responsible for the risk (Getchel et al. 2018):

NEWS40707 Political-causal attribution: *“Mr Andrews was critical of Victorians who've been “pretending this is over” and said people ignoring social distancing advice were “part of the problem”. But the start of this second wave has been linked to a failure in hotel quarantine practices, with travellers returning from overseas allowed to flout the rules, go home early and leave for food breaks.”* (News.com.au, 2020a)

Here, the use of the conjunction 'but' directly contrasts the advice related to restrictions with the missteps of the government in the management of hotel quarantine measures. In quotes such as this, the utilitarian consequence-based ethic of the press conferences—which emphasises compliance with public health interventions—is underscored by a focus on the attribution of blame and the government's 'failure' to prevent the spread of COVID-19. The frequent return to the issues of hotel quarantine is indicative of journalism's status as “bulwark against state [...] influence” and emphasis on acting on behalf of the public (Jordens, Lipworth, Kerridge, 2013:448). It establishes a framing in which the news media is acting in defence of the public by emphasising that the spread of COVID-19 in Victoria is not their fault or responsibility, but that of State Government.

Political: ‘Government has lost control’

Critiques of the State Government were at their most explicit in quotes from the Victorian opposition leader Michael O'Brien. Similar to findings on reporting on the Ebola outbreak in the US, the spread of COVID-19 in Victoria was used as an opportunity for the opposition to call into question the Labor party's competence (Getchel et al. 2018). O'Brien was one of the most frequently cited sources in the sample (outside of speakers from the press conferences), appearing in four of the 36 articles. His public statements invariably levied blame at the Labor Government and called attention to the hotel quarantine 'bungle'.

NEWS40707 Political-causal attribution: *“The spread of the virus isn’t down to bad luck – it’s bad decisions by government,” Mr O’Brien said, “These lockdowns are the catastrophic consequences of Daniel Andrews’ failure on hotel quarantine, mixed messaging and from being more focused on Labor’s own political issues than Victorians.”* (News.com.au, 2020a)

Two articles from News.com.au were titled with quotes from O’Brien: *“‘Catastrophic’: ‘Vic seethes with anger’*” (ibid.), *“‘Don’t deserve this’: Lockdown lashed’* (Wolfe, 2020). In the latter of the two articles, O’Brien’s statement is reproduced in full and he makes the claim that the “government has lost control of COVID-19” (ibid.).

These statements mirror the findings of Getchel et. al., who attribute the inclusion of divergent narratives in the news media to the journalistic norm of balance, which encourages a ‘both sides’ approach to reporting, resulting in statements by the opposition being granted “more substance than it might otherwise have warranted” (2018:31). Boykoff and Boykoff claim that this notion of balance is problematic in the reporting of scientific matters, and can actually produce a distortion of reality, whereby science represented as up for debate and minority oppositional views are amplified merely on the basis of their oppositional nature (2004; Petersen, Vincent, and Westerling, 2019). Statements by O’Brien in the news articles are consistent with this claim, as the empirically determined interventions and recommendations devised by public health experts are contrasted with statements from a sole political actor—with overt self-serving motivations—claiming that the “government has lost control”.

Ratcliff et al. suggest that competing frames in reporting on science can impact the perceived credibility of scientific sources (2018:163). A framing effects experiment by Wise and Brewer demonstrated the dangers of this in relation to public health communication (2010). Using the issue of trans fat regulation, they found that while public health framing fostered support for the ban of trans fat, and anti-ban business framing reduced support for the ban, “exposure to competition between these frames mitigated the effects of each” (ibid:450). In this way, although stemming from a notion of balance, inclusion of oppositional statements can be assumed to complicate the messaging present in the news articles. The government that is taking action to prevent the spread of COVID-19 is represented as the very same government which precipitated the spread of COVID-19. The ideas that the Labor Government has ‘lost control’, and that Victorian’s ‘don’t deserve’ restrictions, works to delegitimise the authority of the government to make decisions in the interest of the public. In these articles, the norm of balance may impact the perceived

credibility of the State Government, and mitigate the effects of the dominant narrative in which public health intervention and compliance is represented as not only necessary, but also morally beneficial (ibid.; Getchel et al. 2018; Wise and Brewer, 2010).

In addition to critique from the opposition, towards the end of the Victorian second wave, there was mounting pressure from the Australian Federal Government for Victoria to lift restrictions. Victoria was the only state in Australia that was fully locked down, and the Federal Government were financially supporting the economic stimulus packages for citizens and businesses in the state. Statements released by the Federal Government which called for an end to lockdown received wide coverage across the outlets, as the sources—the Prime Minister, Treasurer, and Health Minister—were so credible. This exemplifies the news outlets' function as “conduits for partisan frames developed by politicians and activists who advocate specific issue positions” (Brewer and Gross, 2010:159). As in statements by the opposition, these public statements by the Federal Government strategically shifted the narrative produced by the Victorian State Government:

NEWS70609: political-treatment recommendation: “*A joint statement from Prime Minister Scott Morrison, Treasurer Josh Frydenberg and Health Minister Greg Hunt described the news as "crushing", and said it "will come at a further economic cost".*” (News.com.au, 2020b)

While Andrews in the press conferences consistently framed the restrictions predominately in terms of public health, these statements by O'Brien and the Federal Government shift the framing towards the efficacy of the management of the pandemic by the State Government. In these cases, the State Government is attributed for the spread of the virus, as well as the imposition of restrictions, and the consequences are spelled out in terms of economic damage and human impact. It is important, however, to recognise the potential motivations behind these statements and their inclusion in the news articles (Entman, 2010b). Both of these sources are from the Liberal party—with which News Corp outlets are typically aligned—and while O'Brien is motivated to critique the Labor Government for his own political gain, the Federal Government is making efforts manage the broader national economic crisis, to which Victoria is one of the primary contributors.

4.2.2. Quantitative analysis (n=128)

In the qualitative analysis, the sample was balanced to include nine articles from each of the four publications, offering insight into how COVID-19 restrictions were presented in tabloid, public service, and regional news. All publications were weighted equally. For the quantitative analysis, to improve the scope and reliability of the findings, all articles by the four outlets published on the nine dates matching the search criterion were downloaded. This resulted in a sample of 128 articles (News.com.au [n=71], Daily Mail [n=26], ABC News [n=22], Bendigo Advertiser [n=9]), in which the more prolific outlets naturally dominated. This disparity in quantity is reflective of the business models and size of the different publications, but it was also reflected in the content produced. Where ABC News and The Bendigo Advertiser produced articles which summarised announcements, the Daily Mail, and even more so, News.com.au, would break information up into numerous focused articles, reflecting their size and commercial imperatives.

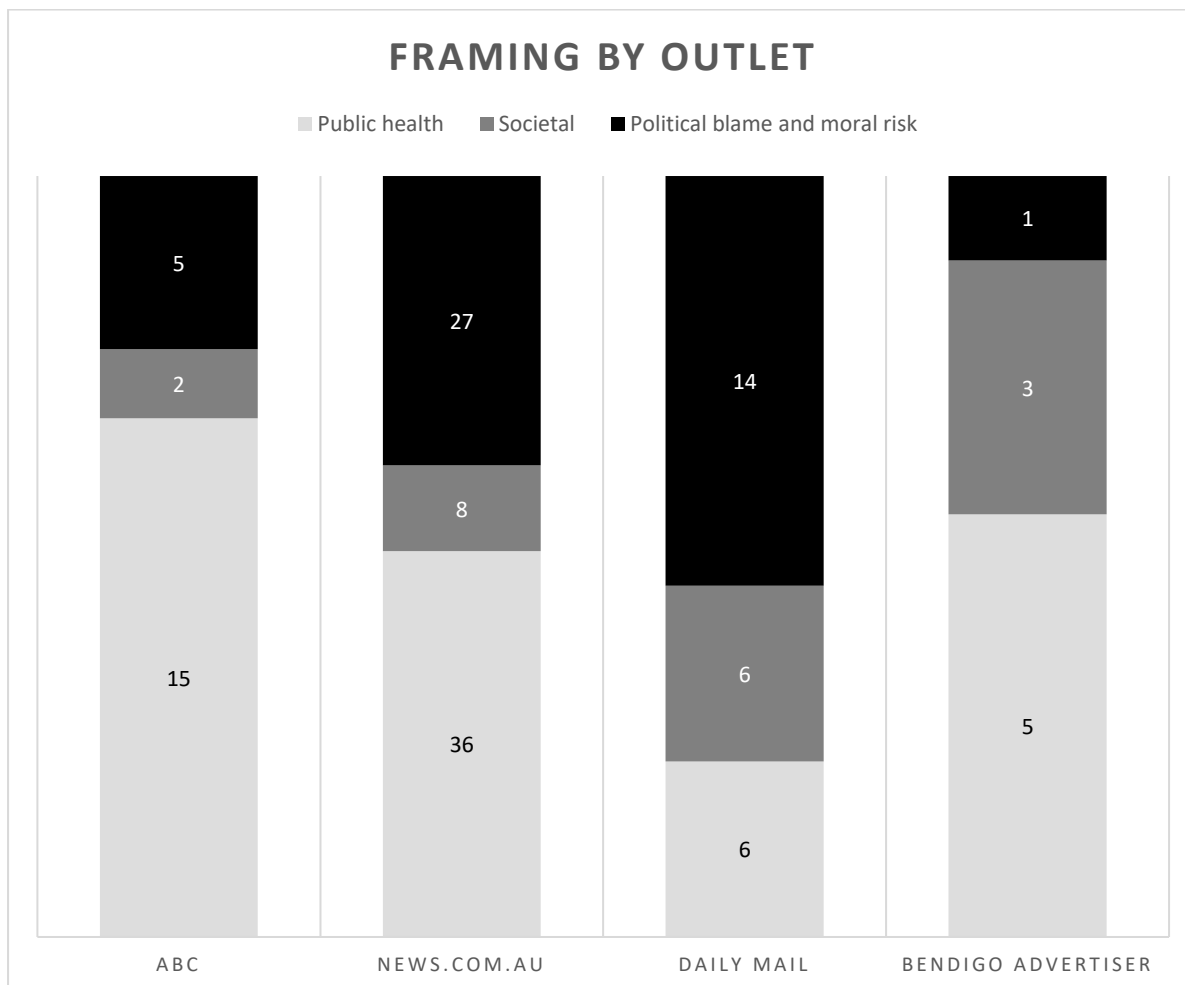
This larger sample (n=128) was coded according to the coding scheme (app. 1) with the results imported into SPSS and run through a hierarchical clustering process. The ‘elbow method’ was used to produce a 3-cluster solution, which was additionally compared with alternative cluster solutions, and found to produce the most clear and interpretable results (app. 7; Yim and Ramdeen, 2015; Matthes and Kohring, 2008).

The results of this clustering can be interpreted by looking for the frame elements which are the most and least salient within a cluster (ibid.). The significant results are shown in bold in the table below, and indicate the ways in which different sets of news articles within the sample consistently applied similar frame elements, promoting a particular interpretation of public health interventions (fig. 4).

Fig. 4 Final cluster centres for news sample (n=128)

Variables	Public health (n = 62), <i>M (SD)</i>	Political blame and moral risk (n=47), <i>M (SD)</i>	Societal (n=19), <i>M (SD)</i>
Topic: Medical	1.00 (0.00)	.96 (0.20)	.95 (0.23)
Topic: Political	.11 (0.32)	.49 (0.50)	.26 (0.45)
Topic: Economic	.24 (0.43)	.42 (0.50)	.26 (0.45)
Topic: Social	.35 (0.49)	.43 (0.50)	.80 (0.42)
Actor: Medical experts	.40 (0.50)	.23 (0.43)	.10 (0.31)
Actor: Politicians	.98 (0.13)	.92 (0.28)	1.00 (0.00)
Actor: Business	.03 (0.13)	.34 (0.48)	.16 (0.38)
Actor: Media/Public opinion	.08 (0.27)	.38 (0.49)	.74 (0.45)
Benefit attribution: Medical experts	.39 (0.49)	.04 (0.20)	.10 (0.31)
Benefit attribution: Politicians	.06 (0.25)	.06 (0.25)	.31 (0.48)
Benefit attribution: Public	.53 (0.50)	.19 (0.40)	.53 (0.51)
Risk attribution: Medical experts	.02 (0.13)	.23 (0.43)	.05 (0.23)
Risk attribution: Politicians	.10 (0.29)	.87 (0.34)	.68 (0.48)
Risk attribution: Public	.73 (0.45)	.43 (0.50)	.58 (0.51)
Benefits: Health	.82 (0.39)	.51 (0.51)	.63 (0.50)
Benefits: Economy	.15 (0.35)	0.00 (0.00)	.26 (0.45)
Benefits: Moral	.73 (0.45)	.11 (0.031)	.79 (0.42)
Risks: Moral	.16 (0.37)	.79 (0.41)	.37 (0.50)
Risks: Health	.08 (0.37)	.36 (0.48)	.10 (0.31)
Risks: Economy	.16 (0.37)	.60 (0.50)	.10 (0.31)
Judgement: Positive	.52 (0.50)	0.00 (0.00)	.52 (0.50)
Judgement: Negative	.01 (0.13)	.83 (0.40)	.06 (0.23)
Judgement: Neutral	.47 (0.50)	.17 (0.40)	.42 (0.51)
Biomedical authority model	.97 (0.17)	.06 (0.25)	.05 (0.23)
Public sphere model	.03 (0.17)	.94 (0.25)	.95 (0.23)

Figure 5: Allocation to clusters by news source



Results

Public health

The dominant frame package, the public health frame (n=62; 48.4%), is closely aligned with that of the press conferences. This package included medical experts and attributed the benefits of the restrictions to them significantly more than other frame packages. It attributed both risks and benefits to the public. It stressed health and moral benefits significantly, being generally more focused on the benefits of the public health interventions than the risks. These articles were predominately positive or neutral in judgement on the restrictions, and were almost exclusively presented through the biomedical authority biocommunicable model. These articles, as the press conferences, foregrounded expertise and tended towards representation of public health interventions as morally beneficial and positive. The key departure from the press conference framing in this frame package is the high neutral

judgement, which is likely attributable to the journalistic norm of objectivity (Hallin and Mancini, 2004:34).

Political blame and moral risk

The second most common frame package in this cluster analysis (n=47; 36.7%) was characterised by a distinctly negative stance on the public health interventions and was dominated by the public sphere biocommunicable model. In this frame package, business actors were at their most salient compared with other groupings, as was the focus on the political topic. Risk attribution was highly targeted at politicians, with a focus on moral risks, and, to a lesser extent, risks to the economy and to health. Notably, the health benefits of the restrictions were still regularly mentioned, and the attribution of risk to the public was not at all uncommon. This frame package reflects many of the findings of the qualitative analysis above, in that the risks of public health interventions were amplified, the benefits were muted, and political actors were attributed with the majority of the blame. Previous research suggests divergent frame packages such as this are in part a product of journalistic norms of balance and ‘political game’ framing, in which the news media acts as a ‘watchdog’ and a conduit for partisan issue-positions (Getchel et al. 2018; Brewer and Gross, 2010). Additionally, the amplification of health, moral, and economic risks reflect the focus on human impact and tendency towards the sensationalism and dramatization in the news media. This frame package was dominant among the Daily Mail (54%) and News.com.au (38%), compared with ABC News (23%) and The Bendigo Advertiser (11%). Notably, this mirrors the work of Chaua et al. (2019) who found that characterisations of public health action under a ‘nanny state’ framing was dominant among News Corp outlets, as well as previous studies which identify a focus on human interest and political critique in tabloid outlets (King and Street, 2005:130; Rossman, Meyer, and Schulz, 2018:370).

Societal

In third and final frame package identified in the cluster analysis, the societal frame (n=19; 14.8%), the social topic and media/public opinion actors dominated. As in the public health frame, risk was attributed to the public and benefits were health oriented. Judgements were mostly positive and neutral, and the public sphere biocommunicable model predominated. Articles in this frame were typically supportive of the public health interventions, but included voices from the public in that support. This high level of media/public opinion

actors is likely the reason for the higher focus on moral and economic benefits than in the public health frame, and higher attribution of risks and benefits to political actors than to medical actors. While members of the media/public do not have the expertise to motivate behaviour in terms of health, they can make statements of morality and motivate behaviour in terms of economic benefits. The high attribution of both risk and benefits to politicians reflects this, as trust in governance acts as a heuristic for laypeople in accepting the legitimacy of the public health interventions (Ratcliff et al. 2018:158). This frame package was relatively uncommon, but is reflected in the qualitative analysis in the editorial articles in the Bendigo Advertiser, the authors of which hewed close to official lines, but did so from a non-expert perspective, encouraging people to ‘play by the rules’ and ‘look ahead to better days’. It demonstrates that, in the sample, the public sphere model is not necessarily a precursor for negative judgements on public health interventions (Briggs and Hallin, 2016).

5. Discussion and Conclusion

The findings of this research indicate significant differences between the framing of public health interventions by the Victorian State Government in press conferences and Australian digital news outlets. While frames operationalised by the Victorian State Government were consistent throughout the press conferences, the analysis of news articles revealed a more heterogeneous framing of public health interventions.

In the press conferences, the framing of public health interventions reflected the values, norms, and ethics of public health. Speakers framed the interventions, and compliance with them, as irrefutably necessary, morally just, and scientifically determined (Bowen and Li, 2018; Lupton, 2003:35). The utilitarian consequence-based definition of ‘public interest’ predominated, with the health of the public as the primary concern (ibid.). Speakers emphasised non-partisanship and the collective threat COVID-19 represented, with political games deemed irrelevant and unproductive, and impacts to the economy and social life described as necessary sacrifices (Briggs and Hallin, 2016; Lupton, 2013:153). This emphasis on compliance and collectivism attributed responsibility, risks, and benefits to the public, and represented the public health interventions and compliance with them as the only option to return to normalcy in both a social and economic sense. This framing involved biomedical authority biocommunicability, through which medical experts were granted authority over the definition of risk and the necessary course of action to mitigate risk (ibid.). Audiences were encouraged to accept this biomedical authority, passively listen, and comply with government action and public health advice.

In the news article sample, three distinct frame packages were identified which characterised reporting on public health interventions: (1) public health; (2) societal; and (3) political blame and moral risk. Each of the three frame packages can be seen, in different ways, as reflective of the ethics, norms, and practices of journalism, as well as the Australian media system. The different framing practices between the news outlets demonstrate that journalistic norms and definitions of ‘public interest’ are not immutable, and “appear to shift depending on the context in which reporters are working” (Lawrence, 2010:267).

The dominant frame package, the public health frame, largely mirrored the official public health framing of the State Government. In these articles, the role of journalists was to amplify the “views put forth by those in positions of power” (Lawrence, 2010:277). The journalists composing these articles did precisely what the government intended them to: positively framing the restrictions, emphasising the health and moral benefits of adherence to

them, and compelling audiences to act through attributing both risk and benefit to their behaviour (Getchel et al 2018; Hallin and Mancini, 2004: 44; Abeysinghe and White, 2010; Macy-Ayotte, 2018; Ting Lee and Basnyat, 2013). A number of authors have observed the ways in which, during times of crisis, news reporting shifts towards “sphere-of-consensus reporting, where officials speak for “the nation” as debate and criticism are minimized.” (Briggs and Hallin, 2016:134; Lupton, 2013:138). In the public health frame package, journalists did exactly this, respecting the authority of public health expertise and governmental power, and accepting their position as conduits for the official frame package. The ‘public interest’ orientation of journalism, in these cases, functions predominately through the news media as a platform for amplifying the public health messaging of the government and medical experts. The high presence of neutral judgement is likely a reflection of journalistic norms of accuracy and objectivity (Hallin and Mancini, 2004:34; Herman and Chomsky, 1988:84; Lawrence, 2010; 265).

The societal frame package similarly supported the restrictions and replicated key messages about health benefits and public responsibility, however, it did so through a public sphere biocommunicable model. This entailed a higher focus on social topics, political actors, and moral and economic benefits than in the public health frame. It reflects the findings of Ratcliff et al. (2018), in that the health risks are navigated by lay actors through a trust in authority and acceptance of the official narrative. Contrary to the public health framing, however, the social/societal elements of risks were foregrounded, with the interventions supported not through the expert definition of risk, but through the more “political, moral and aesthetic judgements on risk” (Lupton, 2013:55; Briggs and Hallin, 2016:39; Getchel et al. 2018). This is not a particularly robust frame package, as most of its characteristics fall somewhere between the two other identified frame packages; however, it’s presence reflects the more non-scientific sentiments found in qualitative analysis of the press conferences and news articles, in which actors are ‘all in this together’, are compelled to ‘do the right thing’, and play their part in ‘repairing the damage’. It reflects the public sphere ethos of journalism and the idea that framing devices such as these serve as important tools for presenting complex issues to lay audiences, playing to existing values, beliefs and cognitive schemas (Scheufele and Tewksbury, 2007:12; Van Gorp, 2010: 88; Ting Lee and Basnyat, 2013).

The political blame and moral risk frame package reflected many aspects of journalistic professionalism, as well as commercial trends towards sensationalised and dramatized news media. Articles in this frame package typically adopted a public sphere biocommunicable model, amplifying the voices of those affected by public health

interventions, and challenging the official framing in which the public was represented as responsible for the risks (Briggs and Hallin, 2016). The journalistic norm of balance drove messaging which recognised the health benefits of the public health interventions, while also attributing blame and casting negative moral assessments on the interventions and those enforcing them (Getchel et al. 2018; Chaua et al. 2019). Political risk attribution dominated this framing, with Andrews as the locus of the blame. In the qualitative analysis, this political framing presented a narrative in which not only had the Victorian State Government catalysed the health crisis through their errors with hotel quarantine, but their insistence that the public was responsible for the risks involved represented an unjust shift of the locus of the blame. This framing adopted a deontological principle-based ethic, in which public health interventions were characterised by their ‘extreme’, ‘draconian’, and ‘unprecedented’ nature, and were represented as over-exertions of governmental control (Bowen and Li, 2018; Chaua et al. 2019; Herman and Chomsky, 1978). In this frame package, the government and medical experts were not granted full definitional control over the nature of risk, with the moral and economic risks associated with the imposition of restrictions amplified compared with the press conferences (Briggs and Hallin, 2016; Ting Lee and Basnyat, 2013; Rossman, Meyer, and Schulz, 2018). Consistent with previous research, this focus on human impact/interest was most evident in articles by the two tabloid news outlets in the sample—News.com.au and the Daily Mail (Hallin and Mancini, 2004:211; Arsenault and Castells, 2008; King and Street, 2005; Rossman, Meyer, and Schulz, 2018:370). In the qualitative text analysis, these outlets were characterised by sensationalism, political game frames, human impact frames, and a dramatization of the public health restrictions. Monahan’s public drama model was evident, with the public health interventions “simplified and often linked to long-standing moral values or contemporary social concerns” (Monahan, 2010:46). This frame package reflected the “tension between the ethics of journalistic professionalism and the pressures of commercialism” (Hallin and Mancini, 2004:247; Dahlgren, 2005:150) and the deprivileging of science and scientific voices (Christakis, 2020:238; Scheufele and Krause, 2018:2; Boykoff and Boykoff, 2004). In some ways, it mirrored research on climate change reporting, in that non-scientific voices were included in the discussion, and public health interventions were represented as a threat to the economy and vulnerable communities (Colvin, 2020:2; Djerf-Pierre, Cokley, and Kuchel, 2016; Bacon and Jegan, 2020; Petersen, Vincent, and Westerling, 2019).

There is clearly value in this framing package, as—particularly during the public housing tower lockdowns—it exposed the short-comings of the government and the impact of

the restrictions on vulnerable communities and workers. Framing articles in this way acted in the ‘public interest’ by holding the government accountable and offering a voice to those disempowered by the public health interventions (Reader, 2015).

However, when the ‘elite’, primary definers of information are governments and public health experts trying to combat a health crisis, the focus on balance, human impact, and principle-based ethics, may sully the clarity of the important health messages being conveyed, calling into question their legitimacy and ethicality. As explored in previous research, the framing of an issue in terms of its impositions on freedom can have a significant impact on public opinion (Nelson, Clawson, Oxley, 1997). Wise and Brewer’s study demonstrated that competing frames in the treatment of public health issues runs the risk of mitigating the effects of each frame (2010). The risk of this frame package, in this way, is that the emphasis on the risks posed by public health interventions mitigates the effects of the strategic public health framing pushed through the press conferences. It may divert attention away from the health advice, the substance of the policies, and towards the government and man who is communicating them.

Although the sample is not sufficiently large and the results are not statistically significant enough to identify systematic content bias, the dominance of the political blame and moral risk frame package among the News Corp tabloid news outlets may be considered indicative of the privatised nature of the outlets, the accompanying commercial imperatives, and political slant (Entman, 2010b). This aligns with previous studies which found tabloid news outlets were characterised by sensationalism, risk-amplification, dramatization, focus on human impact, attribution of blame, and challenges to medical authority (King and Street, 2005; Rossman, Meyer, and Schulz, 2018). The fact that the political blame and moral risk frame package was most common among the two tabloid news outlets, and that these outlets are both owned by News Corp, is indicative of the uniformity between the outlets, which has been systematically observed in relation to climate change (Bacon and Jegan, 2020), and anecdotally observed in relation to reporting on COVID-19 (The Listening Post, 2020; Rudd, 2020). These outlets frequently attributed blame to the Labor Government and challenged state intervention (Sandell, Sebar and Harris, 2013; Chaua et al. 2019). This mirrored previous research in which the neoliberal market ideologies of the news outlets were at times pitted against the public health ethic of collectivism and practices of state intervention (ibid. Jenkin, Signal and Thomson, 2011:1028; Lupton, 2013:138). This thesis is a frame analysis, rather than a framing effects study, so it is inappropriate to presuppose that the political

blame and moral risk frame package necessarily precipitates negative sentiments towards, or non-compliance with, public health interventions. However, it does identify patterns in the representation of public health interventions which undermine the legitimacy of their imposition and attribute blame to the government that is imposing them. Studies from the US investigating the effects of viewership of News Corp owned Fox News—which is similarly ideologically conservative and neoliberal—found that individuals who trusted and viewed Fox News exhibited significantly less adherence to COVID-19 public health advice than CNN viewers (Zhao et al. 2020; Simonov et al. 2020). At issue in this political blame and moral risk framing, therefore, is the use of the public sphere biocommunicable model and public drama news framework to focus not on the public health science, nor the moral imperative of health, but on the political drama, moral risks, and missteps of the State Government during a period in which solidarity and trust in government action is paramount. The denigration of the Labor Government, and the portrayal of public health interventions as posing risks to core liberal values of individualism, freedom, and agency, is indicative of political slant among the News Corp outlets, and may be counterintuitive to the aims of public health practitioners. In articles operationalising the ‘political blame and moral risk’ framing—as in the Ebola crisis in the US—“public health responses were thrust into the middle of partisan politics” (Briggs and Hallin, 2016:134).

The dialectic between public health and journalism at the core of the literature review was reflected in the results of the analysis. It mirrors the age-old question of freedom vs. order; the ethical battle between deontology (principles) and utilitarianism (consequences) (Nelson, Clawson, Oxley, 1997:569; Bowen and Li, 2018; Lupton, 2003:35; Foucault, 1978: 86; Chaua et al. 2019; Bayer, 2007; Gelfand, 2018). It is the position of this research that, particularly in contexts where individual behaviour impacts the health of the broader public, expert knowledge systems should be respected and abided by. However, there is undoubtedly value in the news articles in the sample which challenged governmental control. If we accept the statements of public housing residents as truth, then these individuals have been mistreated by government action. The news media challenged this, acting in the public interest by giving these vulnerable people a platform through which their voice was heard and the broader public was motivated to support them. To increase the regulation of news content in the interests of health would mean that injustices such as these would not be aired. Further, it would set a precedent for the control of information by the political elite.

This kind of precedent—that of controlling the flow of information—is one of the key

reasons COVID-19 became a global pandemic in the first place. The Chinese Government was aware of the existence of a novel coronavirus before the rest of the world, and it suppressed the voices of doctors who tried to warn people (Christakis, 2020:133). One of these voices, Dr. Li, who later died of COVID-19, “told a Chinese magazine from his hospital bed, “I think there should be more than one voice in a healthy society, and I don’t approve of using public power for excessive interference.” (ibid.). In Communist China, the suppression of information forestalled action to prevent the spread of COVID-19. In liberal democracies, freedom of information has allowed the amplification of voices which have impeded the efforts of public health professionals acting to prevent the spread of COVID-19.

Although commenting on a vastly different situation, Li’s statement can be applied to this case study. The high concentration of media ownership in Australia creates the opportunity for one voice to predominate, granting media conglomerates and their owners’ huge amounts of power with which they can influence public opinion and political actors alike. The solution cannot be increased regulation of media content, as that merely shifts the balance of power from one elite group (media conglomerates) to another (the state). Perhaps, instead, the solution is regulation and funding to support media diversity and quality journalism. A more diverse media landscape means more voices and perspectives in the public sphere, more journalistic autonomy, and more consumer choice. This recommendation is not new: in 2020, two former Australian Prime Ministers came out in criticism of the lack of media diversity in Australia and one started a petition for a Royal Commission into media diversity, which garnered over 500,000 signatures—the most of any petition in Australian history (Meade, 2020).

Both public health and journalism act the public interest, albeit in different and at times oppositional ways. A more diverse Australian media landscape will not eradicate the issues of risk amplification in the news, journalistic balance in science/health reporting, or political game frames, but these issues will no longer be organised around a particular political ideology or set of commercial interests. As Foucault wrote, the process is necessarily complex and unstable, and while the power of the state and expert knowledge systems is crucial in protecting the health of the public, a diverse media landscape represents a similarly crucial point of democratic resistance, granting the public the opportunity to expose and challenge this power (1978:101; Jordens, Lipworth, and Kerridge, 2013).

6. Limitations and Critical reflections

The primary limitation of this research is its scale. Although the selection of nine key dates was appropriate for the requirements and aims of this project, the second wave of the virus in Victoria lasted over four months. There were over 100 press conferences and thousands of news articles which addressed the issue and contributed to the construction of the issue in the eyes of the public. As a case study, it identified key framing devices, frames, and frame packages that characterised both the State Government and the four news outlets' representation of the public health interventions. However, due to the size of the sample, the findings related to particular news outlets cannot be considered proof of systemic content bias. They demonstrate slant, but further research is required to determine the extent to which this slant is representative of a broader trend of media bias or an intentional effort to exert influence over public opinion (Entman, 2010a).

As this research was conducted by one individual, the reliability of the content analysis may be called into question. A collaborative coding process with multiple trained coders and the inclusion of an intercoder reliability measure would bolster the legitimacy of the findings of the research, but this opportunity was unavailable due to individual nature of the thesis-writing project. In spite of this, however, the coding of separate frame elements and the computer-assisted clustering of these elements was a crucial element to reduce the subjectivity through which the results were produced. Coding individual elements meant that the researcher was blinded to their grouping into frame packages, which means that the results are empirically—rather than heuristically—determined (Matthes and Kohring, 2008; Van Gorp, 2010). Nonetheless, further research should involve multiple coders.

The final key limitation of this research is related to the extreme nature of the public health crisis being investigated. Few, if any, public health events in recent decades have had as wide an impact and received as much media attention as those connected the COVID-19 pandemic. In this way, the reflections on the relationship between public health and journalism in this research may be considered unique to the nature of this crisis. This is a legitimate consideration, and one that should be taken into account in the interpretation of the findings of this thesis. COVID-19 represents an extreme example of the ways in which public health and journalism are both symbiotic and antagonistic, but the insight of a frame analysis approach is that one can connect frames and frame packages to a large body of research. The event is new, but the features that characterise its construction are anything but new. The conflict between moral risks and health risks, or economic risks and health risks, for example, are present in public health framing analyses on a wide range of issues, from food regulation

and obesity (Henderson, et al. 2009; Jenkin, Signal and Thomson, 2011), to Mad Cow disease (King and Street, 2005), to climate change and poverty (Nisbet, 2010). Situating the findings of this thesis in the body of existing research demonstrates both the power of the example, and how individual cases are linked to culturally embedded practices (Flyvberg, 2001). The case study is, therefore, at once context-dependent, and illustrative of broader trends (ibid.).

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8. Appendices

8.1. Appendix 1. Coding scheme for binary content analysis

Frame element	Variables	Description
<i>Problem definition</i>	Topic: Medical	Restrictions and regulations, public health response, COVID-19 data, risk, research on virus and spread, recommendations, medical advice
	Topic: Political	Political commentary, critique, collaboration, controversy
	Topic: Economic	Economic impacts, economic support, economic recovery
	Topic: Social	Social impacts, education, mental health, protests, entertainment
	Actor: Medical experts	Government health experts, as well as experts from Universities and hospitals
	Actor: Politicians	Numerous political actors, at a federal, state, opposition, and district level
	Actor: Business	Numerous business actors, such as tourism and industry
<i>Causal attribution</i>	Actor: Media/Public opinion	News media (editorial journalists), members of the public and public opinion
	Benefit attribution: Medical experts	Medical experts are responsible for benefits
	Benefit attribution: Politicians	Political actors are responsible for benefits
	Benefit attribution: Public	The public is responsible for benefits
	Risk attribution: Medical experts	Medical experts are responsible for risks
	Risk attribution: Politicians	Political actors are responsible for risks
	Risk attribution: Public	The public is responsible for risks
<i>Moral Evaluation</i>	Benefits: Health	Public health response as a benefit for health
	Benefits: Economy	Public health response as a benefit for the economy (long-term)
	Benefits: Moral	Health of public as primary good, restrictions are morally beneficial
	Risks: Moral	Public health response as imposing on freedoms, unfair, unbalanced, posing moral risk
	Risks: Health	Public health response as risk to public health, mental health
<i>Treatment</i>	Risks: Economy	Public health response as risk to economy
	Judgement: Positive	Public health response is necessary and working
	Judgement: Negative	Public health response is negative and could be better
	Judgement: Neutral	No stance/neutral stance on public health response

<i>Biocommunicable model</i>	Public sphere	Arbiters include the public, business actors, or politicians not involved in the public health response
	Biomedical authority	Arbiters include only medical experts and political actors involved in the public health response

8.2. Appendix 2. Press Conferences Hierarchy chart

Press Conferences	Problem definition	Causal attribution	Moral evaluation	Treatment recommendation
Medical	Increasing cases Mystery cases Infected health workers Delayed surgeries and hospital capacities Non-cooperation with contact tracing	Family-to-family transmission Workplace transmission Movement of people People not following recommendations and restrictions	Rule breaches are selfish Testing is a service to the community Restrictions are in the interest of the public	Lockdowns Restrictions Masks Social distance Hand-washing Contact tracing Get tested if sick Follow advice Follow the data
Social	COVID fatigue Complacency Vulnerable communities Struggle to reach citizens Impact on education Impact on entertainment and leisure Protests Family violence	Education from home Cancelling sporting events Length of restrictions Vulnerable communities Restrictions on social interactions	Don't blame individuals Share the public health advice Support frontline workers Gratitude to community	Online schooling Special needs children allowed to attend schools Community leaders speaking up Media getting message out Working together
Political	Other states handling pandemic better Opposition leader speaking out against Labor Hotel quarantine and contact tracing issues	Political opportunism Media exacerbating political tensions	Politics are not relevant Health is not a partisan issue	Not focusing on politics Constant communication with Prime Minister and State Leaders Not focusing on popular decisions Separate inquiry into hotel quarantine
Economic	Job losses Business closures Exports and industry	Lockdowns Restrictions Coronavirus	Economy is secondary to public health Optimism for	Hardship payments Jobkeeper and Jobseeker Support for businesses

	Border closures Long-term damage Long-term benefit		post-lockdown	COVID-safe business plans Post Second wave job-creation
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Shading of cells represents relevant frequency of frame elements (white=uncommon, light grey=few instances, dark grey=common, black=very frequent occurrence)

8.3. Appendix 3. News articles hierarchy chart

All News	Problem definition	Causal attribution	Moral evaluation	Treatment recommendation
Medical	Spread of virus Specific outbreaks Mystery cases Risk Refusal to test Increasing cases	Quarantine breaches Individual behaviours Family transmission Workplace transmission Contact tracing	Restrictions necessary Testing is a service to the community Rule breaches are selfish Restrictions are amoral	Lockdowns Restrictions Borders Masks State of disaster/emergency Follow advice Follow the data Policing Stop international flights
Social	Social impact Mental health Education COVID fatigue Protests Vulnerable communities	Education from home Cancelling sporting events Length of restrictions Vulnerable communities Restrictions on social interactions	Public opinion: critical Public opinion: supportive Protests are wrong Public housing lockdown too harsh Do not panic buy More attention should be paid to regional Victoria	Support each other Engaging community leaders and translators Better visitation rights Specialist schools to remain open More support for vulnerable communities Ease restrictions for social life
Political	Changes to initial plans Confusing communication Other states handling pandemic better	Bad decisions and management by govt. Overcautiousness in opening up Hotel quarantine mistakes	Federal support/critique Oppositional critique Editorial support/critique Labor Govt. responsible for lockdown/deaths Andrews over exerting control	Hotel inquiry launched Resignation of responsible parties Federal financial and governmental support

Economic	Economic impact Job losses Low-paid workers Delaying budget Border closures Regional impact	Lockdowns Restrictions Coronavirus	Optimism for post-lockdown Economy secondary to health Support insufficient Regional communities mistreated	Govt. funding Balance between economy and public health Restoring economy COVID-safe businesses Regional Victoria to should earlier
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Figure 2: Shading of cells represents relevant frequency of themes (white=uncommon, light grey=few instances, dark grey=common, black=very frequent occurrence)

8.4. Appendix 4. Results of binary content analysis of press conferences

Variables	Mean	Std. Deviation
Topic: Medical	1.0000	.00000
Topic: Political	.7778	.44096
Topic: Economic	1.0000	.00000
Topic: Social	1.0000	.00000
Actor: Medical experts	1.0000	.00000
Actor: Politicians	1.0000	.00000
Actor: Business	.0000	.00000
Actor: Media/Public opinion	1.0000	.00000
Benefit attribution: Medical experts	1.0000	.00000
Benefit attribution: Politicians	.3333	.50000
Benefit attribution: Public	1.0000	.00000
Risk attribution: Medical experts	.0000	.00000
Risk attribution: Politicians	.5556	.52705
Risk attribution: Public	1.0000	.00000
Benefits: Health	1.0000	.00000
Benefits: Economy	.4444	.52705
Benefits: Moral	1.0000	.00000
Risks: Moral	.5556	.52705
Risks: Health	.0000	.00000

Risks: Economy	.7778	.44096
Judgement: Positive	1.0000	.00000
Judgement: Negative	0.000	.00000
Judgement: Neutral	0.00	0.00
Biocommunicable model: Public sphere	0.00	0.00
Biocommunicable model: Biomedical authority	1.00	0.00

8.5. Appendix 5. Development of codes

The development of codes and categorisation of materials for this thesis involved an iterative process. The first stage involved reading the 9 press conferences and 36 news articles and taking thorough notes and memos on themes, framing devices, sources, and potential categories. This note taking process is shown in the image below (fig. 1).

All texts were then imported into NVIVO, where they were inductively coded with reference to the original notes. This process produced 65 codes for the 9 press conferences, and 110 for the 36 news articles (fig. 3). These codes were reviewed with reference to previous literature, and were grouped into one of four categories: medical, social, political, economic. These four categories were then divided into Entman's four elements of a frame: problem definition, causal attribution, moral evaluation, and treatment recommendation. This produced 16 overarching categories into which the initial codes were organised (as can be seen in the hierarchy charts above). Once organised into these categories, the data was reviewed again, to check for the relevance of the units of analysis to their allocation in the coding scheme. Minor changes were made. Fig. 2 is a summary of this process and includes the actors and framing devices observed. Fig. 3 is a screenshot of the coding from NVIVO. Hierarchy charts were developed in NVIVO and edited in Microsoft word to improve their interpretability. These hierarchy charts acted as a useful tool to demonstrate the areas in which the two samples were similar and disparate (app. 2; app. 3).

For description of the press conference results, the most salient codes and key framing devices were focused on. For the description of the news article results, focus was placed on the areas where the news articles were significantly different from their source material.

This inductive-deductive qualitative coding scheme was used to develop the coding

scheme used for the content analysis (app. 1).

Figure 1: Photograph of initial notes

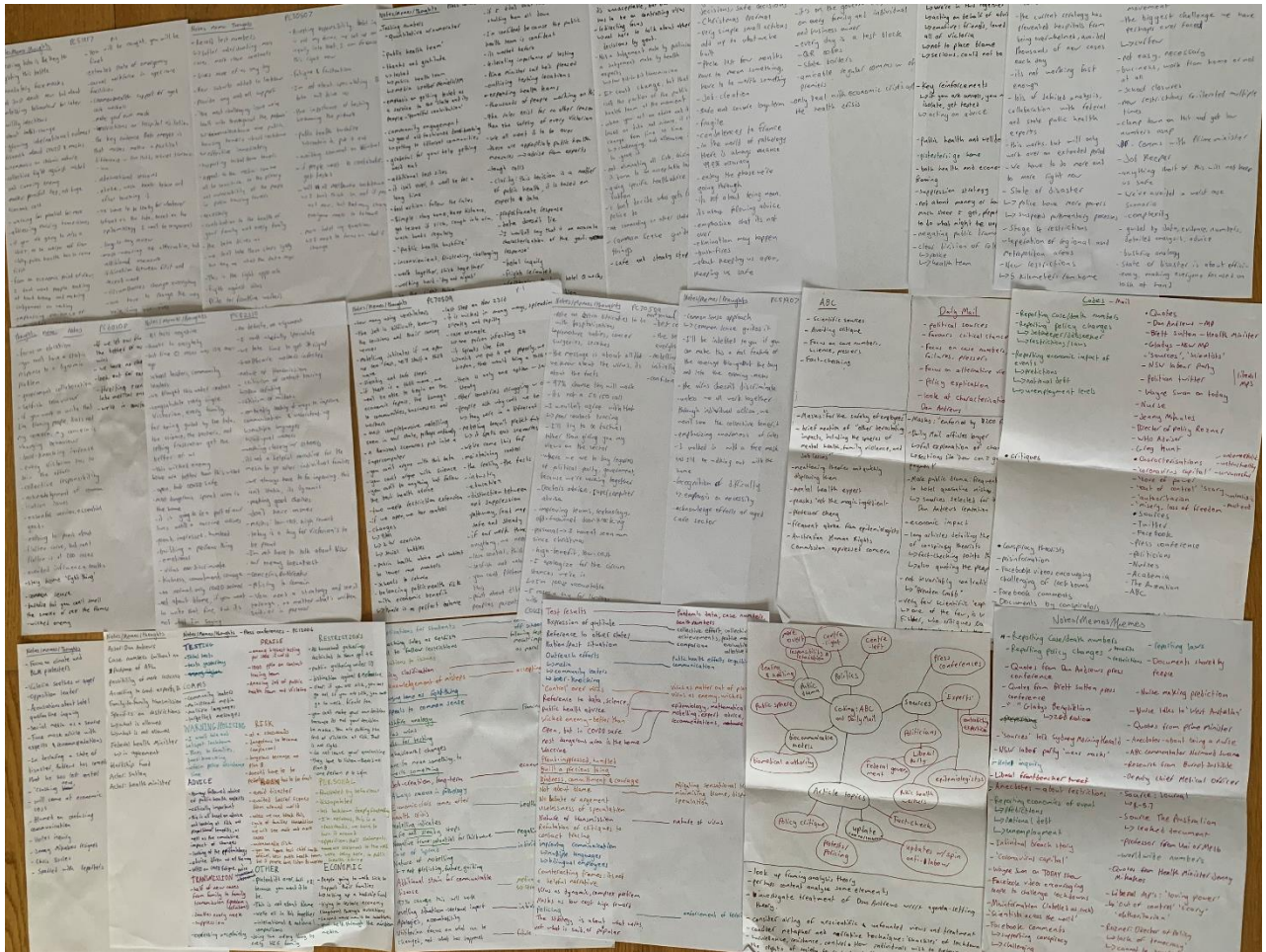


Figure 2: Summary of topics, actors, and framing devices from initial review of data, organised in terms of their categorisation

Topic	Actor	Key framing devices
MEDICAL	Medical Actors	Medical
[CA] [advice] COVID fatigue	[medical actor]	'public health bushfire'
[CA] [advice] Refusal to test	Australian Medical Association president	
[CA][data/research] Case numbers	Omar Khorshid	'testing key to winning this battle'
[CA] [data/research] Govt. waiting on more data	[medical actor]	
[CA] [data/research] Only killing older people	Professor Mary-Louise McLaws	
[CA] [data/research] Regional case numbers	[medical actor]	
[TR] [restrictions] Potential for more		

<p>restrictions</p> <p>[TR] [restrictions] Specifics on restrictions</p> <p>[TR] [restrictions] Suburbs go into lockdown</p> <p>[TR] [advice] Common sense</p> <p>[TR] [advice] COVID-safe plans</p> <p>[TR] [advice] Emphasise that it is not over</p> <p>[TR] [advice] Safe and steady steps</p> <p>[TR] [advice] Govt. public health advice</p> <p>[TR] [advice] Do the right thing: follow directives</p> <p>[TR] [advice] Regional support health</p> <p>[TR] [advice] Follow the advice/data/science</p> <p>[TR] [data/research] Vaccine</p> <p>[TR] [restrictions] Life will change for Victorians</p> <p>[TR] [restrictions] Public housing towers</p> <p>[TR] [restrictions] Removing restrictions</p> <p>[TR] [restrictions] Roadmap</p> <p>[TR] [restrictions] State of disaster</p> <p>[TR] [restrictions] Increased govt. powers</p> <p>[TR] [policing] Policing and fines</p> <p>[TR] [restrictions] Separation of regional and metropolitan</p> <p>[TR] [restrictions] borders</p> <p>[TR] [risk] Opening up too fast as a risk</p> <p>[TR] [risk] Risk minimal, not zero</p> <p>[TR] [risk] Risk of second wave</p> <p>[TR] [risk] The alternative to lockdown is too dangerous</p> <p>[TR] [risk] Threat to public health</p> <p>[PD][spread of virus] Differences in regional communities</p> <p>[CA][spread of virus] Mystery cases</p> <p>[PD][spread of virus] Specific clusters</p> <p>[CA][behavioural] Family-to-family transmission</p> <p>[CA][quarantine breaches]</p> <p>[PD][spread of virus] Outbreaks</p> <p>[PD][spread of virus] wastewater testing</p> <p>[PD][spread of virus] public health bushfire</p> <p>[TR][non-govt. medical source] Research has found</p> <p>[TR][non-govt. medical source] Family clusters, quarantine hotel staff, health providers</p> <p>[TR][non-govt. medical source] multicultural communication</p> <p>[TR][flights] International flights suspended</p> <p>[TR][hotel inquiry] Hotel quarantine inquiry</p> <p>[ME] [advice] Breaking rules selfish</p>	<p>Professor Sutton, (Chief Health Officer)</p>	<p>‘Restrictions are a necessary sacrifice’</p> <p>‘Do the right thing’</p> <p>‘All in this together’</p> <p>‘Common sense’</p> <p>‘Coronavirus capital’</p> <p>‘Scientists across the world’</p> <p>‘Can’t argue with science’</p> <p>‘We built a precious thing’</p> <p>‘Safe and steady steps out of lockdown’</p> <p>‘Wicked enemy’</p> <p>‘Focus on what can be done right now’</p> <p>‘No plan B’</p> <p>‘Best public health team useless if people don’t listen’</p> <p>‘Can’t pretend this is over’</p>
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<p>[ME] [advice] Following rules a public service</p> <p>[ME] [moral risk] restrictions amoral</p>		
<p>POLITICAL</p> <p>[ME] [political critique-opp] ‘Victorians don’t deserve this’</p> <p>[ME] [political critique] fault of bad govt.</p> <p>[ME][political critique-media] Andrews’ incompetent</p> <p>[PD][political comparison] Comparison to NSW</p> <p>[PD] [political comparison] Comparison with Europe</p> <p>[PD] [political critique] Commonwealth criticism</p> <p>[TR] [political collaboration] Confirmation of federal support</p> <p>[TR] [political critique] Contact tracing is not up to standard, could be alternative to restrictions</p> <p>[CA][political critique] The result of hotel quarantine ‘failure’, blame Dan Andrews</p> <p>[ME] [political critique] Conflict with desires of public/others</p> <p>[political commentary] Andrews first day off</p> <p>[ME] [political collaboration] Gratitude to other premiers and prime minister for support</p> <p>[TR] [political collaboration] Political solidarity: ‘all in this together’</p> <p>[ME] [(a)political] won’t play silly games</p>	<p>Political Actors</p> <p>[state govt.] Dan Andrews</p> <p>[state govt.] Brett Sutton</p> <p>[state govt.] Police Minister Lisa Neville</p> <p>[state govt.] Deputy Chief Health Officer Allen Cheng</p> <p>[state govt.] Education Minister James Merlino</p> <p>[state govt.] Department of Health and Human Services</p> <p>[state govt.] Treasurer Tim Palls</p> <p>[state govt.] Deputy chief health officer Annaliese van Diemen</p> <p>[regional govt.] Member for Northern Region Wendy Lovell</p> <p>[public servant] Police</p> <p>[public servant] Assistant Commissioner Mick Hermans</p> <p>[public servant] ADF</p> <p>[federal govt.] Federal Health minister Hunt</p> <p>[federal govt.] Scott Morrison</p> <p>[federal govt.] Acting Federal Chief Medical Officer Paul Kelly</p> <p>[federal govt.] Treasurer Josh Frydenberg</p> <p>[federal govt.] Commonwealth Deputy Chief Medical Officer Michael Kidd</p> <p>[NSW state govt.] Gladys Berejiklian</p> <p>[Opposition govt.] Opposition Leader Michael O’Brien</p>	<p>Political</p> <p>‘Don’t deserve this’</p> <p>‘Govt. has failed/lost control’</p> <p>‘Partnership’</p> <p>‘Not a Victoria problem, an Australia problem’</p> <p>‘Andrews incompetent’</p> <p>‘Draconian’</p> <p>‘Echoes of Wuhan’</p> <p>‘Not about blame’</p> <p>‘All working together’</p>

<p>SOCIAL [PD][education]Educational impact [ME] [public/media opinion] interventions too strict [ME-PD] [public opinion] social media posts [ME] [media opinion] Virus figures ‘made up’ [ME][opinion] safety first is admirable [ME][opinion] cruel blow [ME-TR] [opinion] soft-take on BLM protests [ME][opinion] let’s do the right thing [ME] [human impact] impact on vulnerable communities [ME] [human impact] people upset, angry, frustrated [ME] [human impact] conflict [TR] human impact] Public housing towers too strict, not well-executed [ME] [human impact] necessary sacrifice [TR-ME] all in it together, working together, all responsible [PD][mental health] Mental health impact [TR][mental health] Removal of restrictions positive for mental health [PD-ME] [protest] Protests ‘selfish, not safe, not smart, unlawful’ [ME] [protest] climate protests [rumour] leaked document [TR][education]Recommendation to contact school for specifics [CA][education] Decisions about education [PD][education] higher school certificate</p>	<p>Media/public opinion [Social Services actor] Victorian Council of Social Service Chief executive Emma King [media actor] journalists [media actor] The Australian [media actor] Sky News, Alan Jones [public actor] protest spokesperson [public actor] social media post [public actor] community leader [public actor] social media posts [public actor] affected party [Legal actor] Former judge (inquiry)</p>	<p>Social ‘Not about what’s popular’ ‘Vic seethes with anger’ ‘Vulnerable communities struggling’ ‘Sadness, frustration, anger, disappointment’ ‘Gratitude to Victorians doing the right thing’ ‘Avoid complacency’</p>
<p>ECONOMIC [PD] [economic impact] Businesses frustrated by roadmap [PD] [economic impact] Debt of state [PD] [economic impact] Devastating for families and jobs [PD] [economic impact] State budget delayed [TR] [economic impact] Vitally important to reopen economy and restore liberties [ME] [economic impact] We can’t let this virus get in the way of jobs [TR] [economic impact / support] Vulnerable</p>	<p>Business Actors [Business actor] Public tenants Association officer Mark Feenane [business actor] Victorian Chamber of Commerce and Industry chief executive Paul Guerra [business actor] Australian Hotels Association President David Canny</p>	<p>Economic ‘necessary sacrifice’ ‘repair the damage’ ‘communities smashed’ ‘Not your choice to make’</p>

communities [TR] [economic impact] disproportionate impact on regional communities [TR] [economic impact] necessary sacrifice [TR] [economic recovery] Restrictions about sustainable economic recovery [TR] [economic recovery] Roadmap: in best interest of health and economy [TR] [economic recovery] Repair the damage [TR] [business opinion] time for businesses to open again [TR] [economic support] Hardship fund [TR] [economic support] Grants for businesses [sport] Postponement of AFL [tourism] tourism impact	[business actor] Tourism Industry Council President Felicia Mariani [business actor] Restaurant and Catering Industry Association President Wes Lambert [business actor] Small business owner	‘We will support you’ ‘comes at large economic cost’
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Figure 3: Screenshot of NVIVO coding process

Medical	36	343	J.T.	23/03/2021 8:20 AM
Causal attribution	30	59	J.T.	23/03/2021 8:22 AM
Moral evaluation	24	45	J.T.	23/03/2021 8:22 AM
Problem definition	26	91	J.T.	23/03/2021 8:22 AM
Treatment recommendat	31	148	J.T.	23/03/2021 8:22 AM
Political	18	42	J.T.	23/03/2021 8:20 AM
Causal attribution	1	1	J.T.	23/03/2021 8:22 AM
Moral evaluation	10	25	J.T.	23/03/2021 8:22 AM
Problem definition	5	5	J.T.	23/03/2021 8:22 AM
Treatment recommendat	8	11	J.T.	23/03/2021 8:22 AM

8.6. Appendix 6. Interest in ‘Press Conference’ in Victoria, June 18-November 1, 2020
 (Google Trends, 2021; available at: <https://trends.google.com/trends/explore?date=2020->



8.7. Appendix 7. Clustering in SPSS

The three-cluster solution was developed in SPSS following the guide outlined by Yim and Ramdeen (2015). First, all variables were programmed through the hierarchical clustering function in SPSS using the Ward method. The coefficients in the agglomeration schedule were assessed for large jumps in distance in the clustering process, indicating high heterogeneity. Here, a large increase in coefficients was shown in stage 125 (fig. 4). This indicates the clustering process should be stopped after 125 stages, eliminating stages 126 and 127. This produced a three-cluster solution. There can be no single perfect cluster solution, however, this hierarchical clustering process allowed for the estimation of an appropriate cluster value for the hierarchical analysis, which was computed for this thesis.

While two-cluster, four-cluster, five-cluster, and six-cluster solutions were trialled, the three-cluster solution was supported by a hierarchical clustering validation process and produced the most clear and interpretable result (Yim and Ramdeen, 2015; Matthes and Kohring, 2008).

Figure 4: Agglomeration schedule—coefficients (news articles)

