

Kristian Bjørkdahl and Benedicte Carlsen, **Pandemics, Publics, and Politics: Staging Responses to Public Health Crises**, Basingstoke, UK: Palgrave Macmillan, 2019, 91 pp., \$69.99 (hardcover).

Reviewed by

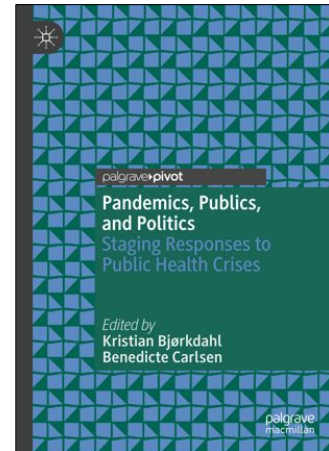
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Pandemics are potentially very destructive phenomena, and for that reason, they both fascinate and frighten us. Uncertainty amid pandemics concerns much more than the transmission of the infectious disease, and they often become sites of contestation and conflict. These new challenges can enable diseases to reach pandemic scales and, in the meantime, affect the ability to enact an appropriate response, in spite of more reliable provision of medical services, more effective means of communication, and a more educated public. The pandemic perception and response are a messy blend of epidemiology and culture, medicine and politics, and science and society. Against this backdrop, this book presents researches on the 2009 pandemic and other public health crises in an attempt to describe and analyze the distinctive challenges that such diseases pose today. To be more specific, this volume intends to suggest that the epidemiology of the disease (pandemic) will always be entangled with issues of public communication (public), as well as with systems and practices of governance (politics).



***Pandemics, Publics, and Politics: Staging Responses to Public Health Crises*** consists of six chapters, with one introductory chapter and five case studies. Chapter 1 by Kristian Bjørkdahl and Benedicte Carlsen serves as an introduction of this book and calls for a cross-disciplinary collaboration on the study of pandemics and other public health crises in order to prepare society for future pandemic events. Then, it offers a brief survey of the individual chapters in the collected work.

Given that novel strains of influenza can spread quickly across the globe, it means that swift decision making is required and the pandemic also necessitates the coordination of multiple actors. Pandemic events therefore exert great pressure on the cohesion and efficacy of the complex architecture of global health governance. The next chapter by Sudeepa Abeysinghe assesses the global health management of the 2009 H1N1 pandemic, focusing especially on the actions and criticisms of the World Health Organization (WHO), and assessing the strengths and limitations of the WHO's pandemic management process. After a brief introduction of the relevant research background, she draws on the analysis of qualitative documents from the WHO and Council of Europe to explore how the WHO sought to meet this challenge during the 2009 influenza pandemic, and then examines the organization's role in informing and coordinating diverse global health actors, and the tensions inherent in acting swiftly and effectively in managing a pandemic. Ultimately, it shows that a more critical reflection of the mismatches between

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institutional assumptions and other constructions of the problem may have strengthened the position of the WHO in managing the pandemic.

Uncertainty and immunity are deeply entangled with public communications on pandemic. Chapter 3 by Mark Davis deals with public communications about the 2009 influenza pandemics under conditions of uncertainty and immunity. It discusses implications for communications on more recent infectious disease outbreaks, based on research conducted on public engagements with the 2009 Australian influenza pandemic. After that, it proceeds to demonstrate how public health messages aim to achieve a workable balance of warning and reassurance and deflect problems of trust in experts and science. Finally, it points out the fact that individualized ideas of immunity in connection with uncertainties may limit the effectiveness of public health communications on the influenza pandemic and other contagious threats.

Pandemics and other public health crises typically attract a great deal of media attention; however, little is known about how pandemics are mediated and why they are mediated in that way. Chapter 4 by Kristian Bjørkdahl and Benedicte Carlsen explore how the dynamics between public health officials and media in Norway coproduced the 2009 H1N1 pandemic drama. They start from the idea that the making news of pandemics and other public health crises can usefully be viewed as a sort of drama. Then, they provide an interview-based study of why health authorities and media editors in Norway acted as they did during the episode. Finally, their study reveals that many of the decisions taken by the health authorities were motivated by a particular set of assumptions about how the media works, but at the same time, that the media editors deny the accuracy of these assumptions. The actors involved in the coproduction of this drama had somewhat different conceptions of the production, which may cause uncertainty and even confusion in the public as to the seriousness of the disease.

Since the 1990s, the threat of pandemics has gained increased prominence on policy makers' agendas due to the emergence and resurgence of infectious diseases and an increasingly interconnected world. In chapter 5, Antoine de Bengy Puyvallée and Sonja Kittelsen argue that this new risk environment has led to the rise of a new global health security regime. They begin by tracking the emergence of the contemporary global health security regime by placing it in historical context and examining how a changing risk environment came to inform current international efforts to manage the microbial world. Then, based on a paradigm of rapid detection and response to outbreak events, and a norm of collective action, they draw on examples from the Ebola epidemic of 2014–2015 to illustrate some of the tensions inherent in this new global health security regime, particularly the resistance of national interest, the privileging of containment over prevention policy, and of short-term, technology-based responses over longer-term engagements in strengthening health systems. It is found that sovereignty and national interests continue to hold powerful sway in collective pandemic preparedness and response efforts.

The use of digital media by government authorities has received growing attention in social studies, public health studies, and communication studies (Heldman, Schindelar, & Weaver, 2013; Neiger et al., 2012). The concluding chapter by Kristian Bjørkdahl and Tone Druglitrø examines how digital media changes pandemic preparedness and response and demonstrates how authorities leverage the media in their enactment of themselves as authorities. It begins with an introduction of the entwined relationship between digital communication and health expertise. Then, it uses the Norwegian health authorities' emergency

website as a case study to investigate its ways of establishing authority through the use of the website's various material possibilities. Specifically, it studies the layout, wording, and hyperlinks of the website to illustrate that health authorities take advantage of the affordances of digital media (Hutchby, 2001), arguing that the site somewhat paradoxically remained firmly within a traditional paradigm of public health communication. Ultimately, it is found that it failed to use the affordances of the medium to develop features that acknowledge the actual concerns and voices of the public. The chapter concludes with some suggestion that health authorities need to use digital media to adapt to the view of expertise emerging in society.

In short, pandemics are not only a medical phenomenon that threatens human culture and society but also a phenomenon that permeates and affects human culture and society in many unpredictable ways. In addition to the obvious globalization and commercialization of pandemic response systems, people often face the following issues: fragmentation of media, tribalization of "knowledge regimes," increasingly troubled status of scientific and political expertise, and growing cross-continental mobility. These distinctive complexities make the need to stage public action in response to pandemics and other public health crises a crucial problem, upon which thousands of human lives rest.

This book sheds light on the intricate relationship among pandemics, politics, and publics by adopting a critical case study methodology. First, it points out the fact that the capacity for pandemic response requires such expertise as transparent and accountable political systems and effective pandemic communication as well as expert knowledge in epidemiology, and highlights the attention from a much wider range of disciplines. Second, it makes a great contribution to the analysis of public responses to health crises by exploring their international aspects. Finally, the study of past pandemics can enable researchers to put forward some suggestions on how to make future preparedness plans or take intervention measures. All these merits make the volume an insightful and approachable reference for scholars, researchers, and teachers who are interested in the study of pandemics and pandemic communication. And meanwhile it serves as an excellent reference for master and doctoral students.

### References

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