



SOCIETYNOW

**COMMUNICATING
COVID-19**

Everyday Life, Digital Capitalism,
and Conspiracy Theories in
Pandemic Times

Christian Fuchs

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Capitalism, and Conspiracy
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INTRODUCTION: PANDEMIC TIMES

1.1 COMMUNICATING COVID-19

This book is a contribution to the analysis of the COVID-19 pandemic on society. It takes a sociological and communication studies approach for analysing the following question: How have society and the ways we communicate changed in the COVID-19 pandemic crisis?

This main question was broken down into a series of sub-questions. There is one chapter in this book dedicated to each sub-question:

- Chapter 2: How have everyday life and everyday communication changed in the COVID-19 crisis? How has capitalism shaped everyday life and everyday communication during this crisis?
- Chapter 3: What is a conspiracy theory? How do conspiracy theories matter in the context of the COVID-19 crisis?

- Chapter 4: How do COVID-19 conspiracy theories about Bill Gates work?
- Chapter 5: How do Internet users react to COVID-19 conspiracy theories spread on social media?
- Chapter 6: How has Donald Trump communicated about COVID-19 on Twitter? How have conspiracy theories influenced his Twitter communication about COVID-19?

The book is organised in the form of seven chapters. The introduction sets out the societal context of the study. Chapters 2–6 address the mentioned questions. Chapter 7 draws conclusions for the future of communication and society.

1.2 SARS-COV-2 AND COVID-19

In 2020 and 2021, the pandemic crisis that emerged from the SARS-CoV-2 virus and the coronavirus disease (COVID-19) this virus causes shook the world. The virus originated in bats. It was most likely transmitted to humans by the pangolin (Andersen et al. 2020), a subdomain of the mammal clade of Ferae, to which besides the pangolin also carnivorans (e.g. dogs, bears, cats, big cats) belong. The virus first appeared in December 2019 on a food market in Wuhan, the capital of the Chinese province of Hubei, and spread worldwide.

Table 1.1 shows some data about COVID-19 infections and deaths. Until mid-March 2021, one year after the World Health Organization (WHO) had declared the disease a global pandemic, there were more than 120 million infections worldwide with 2.7 million individuals who had died from the disease. This means an average mortality rate of 2.2%.

Table 1.1. COVID-19 Infection and Death Statistics.

Country	Total Cases	Country	Total Deaths	Country	Total Cases per 1 million	Country	Deaths per 1 million	Country	Mortality Rate (%)
US	30,288,789	US	550,537	Czechia	133,077	Czechia	2,229	Yemen	23.5
Brazil	11,693,838	Brazil	284,775	Slovenia	97,431	Belgium	1,942	Mexico	9.0
India	11,473,946	Mexico	195,119	US	91,129	Slovenia	1,899	Sudan	6.7
Russia	4,418,436	India	159,249	Israel	89,608	UK	1,847	Syria	6.7
UK	4,274,579	UK	125,831	Portugal	80,149	Hungary	1,807	Egypt	5.9
France	4,146,609	Italy	103,432	Panama	79,904	Bosnia and Herzegovina	1,737	Ecuador	5.1
Italy	3,281,810	Russia	93,364	Lithuania	76,760	Italy	1,712	China	5.1
Spain	3,206,116	France	91,437	Bahrain	76,395	Bulgaria	1,695	Bolivia	4.6
Turkey	2,930,554	Germany	74,677	Sweden	72,170	US	1,656	Afghanistan	4.4
Germany	2,610,769	Spain	72,793	Belgium	69,936	Portugal	1,643	Liberia	4.2
Global	121,773,470	Global	2,691,030	Global	15,622.4	Global	345.2	Global	2.2

Source: WHO, <https://www.worldometers.info/coronavirus/>. Accessed on 18 March 2021. Included are only countries that have at least 1 million inhabitants.

Although not as deadly as SARS or MERS, COVID-19's currently guesstimated 2% mortality rate is comparable to the Spanish flu, and like that monster it probably has the ability to infect a majority of the human race unless antiviral and vaccine development quickly come to the rescue

(Davis 2020b, 14)

Countries governed by right-wing leaders such as the United States (Donald Trump), India (Narendra Modi), Brazil (Jair Bolsonaro), Russia (Vladimir Putin), Turkey (Recep Erdoğan) and the United Kingdom (Boris Johnson) are among those with the highest absolute number of COVID-19 cases. Partly these leaders did not take the virus seriously enough, implemented only half-hearted lockdown measures, or underestimated or downplayed the seriousness of the disease. Countries with the highest mortality rates are predominantly developing countries in Africa, Asia and Latin America. The underdevelopment of the Global South means not only high levels of poverty but also the lack of basic public services, including a well-developed health-care system. Poor countries and countries where neoliberal governments privatised or cut public support for hospitals or intensive care have been particularly affected by COVID-19.

With a death rate of 2.2% until March 2021, COVID-19 is not comparable to a mild flu. Using global data for the years from 2002 until 2011, Paget et al. (2019) calculated that there was an average of 389,213 annual deaths from seasonal influenza. The World Health Organization (2019) estimates that each year around 1 billion individuals worldwide catch the flu. Based on these data, the average mortality rate of seasonal influenza is 0.04%, which means that as an approximation one can say that COVID-19 is at least 55 times deadlier than seasonal influenza.

The twenty-first century has thus far been a century of multiple crises. At its start, 9/11 in 2001 created a *political crisis* that set off a vicious cycle of terror and war. In 2008, a new *world economic crisis* unfolded that had its origin in the systematic crisis proneness of capitalism and the financialisation of the economy since the 1970s as response to falling profit rates. Many governments bailed out failing banks and corporations, which increased national debt so that they implemented austerity measures, from which workers and the poor suffered. In 2015, a *humanitarian refugee crisis* emerged in Europe that has been the consequence of war, natural disasters and global inequalities. Following the world economic crisis, in a significant number of countries right-wing authoritarian political leaders came to power or strengthened their share of the vote, including Donald Trump in the United States. A *crisis of democracy* unfolded. In 2020, COVID-19 hit the world and created a simultaneous *health crisis, economic crisis, political crisis, cultural crisis, moral crisis and global crisis*.

1.3 HEALTH CRISIS, ECONOMIC CRISIS, POLITICAL CRISIS, CULTURAL CRISIS, MORAL CRISIS

In order to prevent the pandemic getting out of control, many governments introduced lockdowns so that at times most people had to stay at home and all, but absolutely essential shops and institutions had to stay closed. The result was a politically created economic crisis in the context of a major global health crisis. In 2020, the global gross domestic product shrunk according to estimations by 4.4% (data source: IMF World Economic Outlook, October 2020). At the political level, governments had to increase national debt in order to guarantee the survival of humans during lockdown phases. At the political and cultural level, difficult debates emerged

about what sectors of society should remain opened or should be closed during COVID-19 waves. These debates affected realms such as education (schools, nurseries, universities), arts and culture, tourism and gastronomy. In some countries, hospitals' intensive care units reached their limits, which required that society and those taking decisions on medical ethics formulated guidelines in order to decide who should and who should not get an intensive care bed when there is a shortage. Social distancing increased feelings of loneliness and depression. At the level of ideology, COVID-19 conspiracy theory movements emerged that question the existence of the pandemic, the need for countervailing measures (social distancing, wearing masks, lockdown) and spread anti-vaccination propaganda. In turn, the danger emerged that fewer people get vaccinated against COVID-19 and that the health crisis is prolonged.

The United Nations Committee for the Coordination of Statistical Activities (2020) documented the effects of the pandemic on world society with the help of statistics. It summarises some of these effects:

- ‘The pandemic is pushing an additional 71–100 million people into extreme poverty;
- Globally, the first quarter of 2020 saw a loss of the equivalent to 155 million full-time jobs, a number that increased to 400 million in the second quarter, with lower- and middle-income countries hardest hit;
- Simulations suggest a steep and unprecedented decline in the Human Development Index (HDI), undermining six years of progress; [...]
- Even before the pandemic, women did three times more unpaid domestic and care work than men; since the

pandemic, however, data from rapid gender assessment surveys indicate that women in some regions are shouldering the extra burden of an increased workload, particularly in terms of childcare and household chores. [...]

- Global foreign direct investment is now projected to fall by as much as 40% in 2020;
- Global manufacturing output fell by 20% in April 2020 compared to the same period of the previous year, accelerating an already declining trend' (Committee for the Coordination of Statistical Activities 2020, 3)

1.4 COVID-19 AND CAPITALISM

Capitalism is not the direct cause of SARS-CoV-2. COVID-19 conspiracy theories construct such a direct link by claiming that Bill Gates and pharmaceutical companies have secretly engineered the virus in order to make profits from vaccines. We will analyse such crude economic ideology as part of this book. Such conspiracy theories have been appropriated and advanced by the far-right and the anti-vaccination movement. Capitalism is not the direct cause but a context of COVID-19. Capitalist society has acted as context in several respects, namely:

- Agricultural capitalism;
- The global spread of SARS-COV-2;
- Points of change;
- Governance;
- Ideology;
- Globalisation and de-globalisation;

- Class relations in pandemic times;
- Vaccine capitalism and vaccine nationalism.

1.4.1 Agricultural Capitalism

The global activities of capitalist agribusinesses and their expropriation of cheap land have destroyed natural habitat, have had negative impacts on humans, animal species and plants, and created the foundations of SARS-CoV-2 (Davis 2020b, Foster and Suwandi 2020, Malm 2020, Wallace 2016, 2020). The result has been the loss of biodiversity, which has brought wild animals such as bats into closer contact with humans and has in turn increased the chance of the ‘the contraction of zoonotic diseases from wild to domestic animals to humans’ (Foster and Suwandi 2020). Bats carry many pathogens. Capitalist deforestation and urbanisation has resulted in ‘opening the forests to global circuits of capital’ (Wallace 2016, 327), which has brought bats and other wild animals into closer contact with humans. Eating wild animals has become fashionable among parts of the new bourgeoisie, has turned pangolins, lemurs, bats, racoons, squirrels, rats, badgers, etc., into luxury commodities and has created the job of wild animal hunters as wage labour. The Wuhan ‘wet market’ was one of the places in the world where wild animals were traded and the place where the zoonotic spillover that caused the outbreak of COVID-19 took place.

The Marxist political economist and geographer David Harvey points out the negative effect of capitalism on nature:

Capital modifies the environmental conditions of its own reproduction but does so in a context of unintended consequences (like climate change) and against the background of autonomous and independent evolutionary forces that are perpetually

re-shaping environmental conditions. There is, from this standpoint, no such thing as a truly natural disaster. Viruses mutate all of the time to be sure. But the circumstances in which a mutation becomes life-threatening depend on human actions. [...] If I wanted to be anthropomorphic and metaphorical about this, I would conclude that COVID-19 is Nature's revenge for over forty years of Nature's gross and abusive mistreatment at the hands of a violent and unregulated neoliberal extractivism
(Harvey 2020, 180, 183–184)

In his book *Epidemics and Society*, the historian Frank M. Snowden (2019, 478–480) uses Ebola as a case that shows the link between epidemics and agricultural capitalism:

The oil palm is native to West Africa [...] What was new in the late twentieth century was the project to cut down the forests by clear cutting to establish a monoculture of large oil palm plantations. [...] Palm oil was appealing to agrobusiness because it met a gamut of industrial and consumer uses. [...] It is estimated that half of the items for sale in a modern supermarket contain palm oil as an important component. [...] Palm oil companies comprehensively transformed the landscapes they encountered, and in ways that were not conducive to the health of the population or the environment. They began by destroying the existing primary forest by fire and bulldozer. Having cleared the land, they then established a monoculture of oil palm cultivated in large plantations. [...] negative features [...] included the loss of biodiversity, the contribution of deforestation to the greenhouse effect and global warming, population displacement, the low wages

and harsh working conditions of plantation workers, the unfavorable long-term position of nations that develop on the basis of producing raw materials in the global market, and the inability of perennial crops like palm oil to respond to market fluctuations. [...] The areas where Ebola outbreaks have occurred since 1976 map perfectly onto the geography of deforestation in Central and West Africa. The link between Ebola and deforestation is the fact that the fragmentation of African forests disrupts the habitat of fruit bats. Before the arrival of agrobusiness, the bats normally roosted high in the forest canopy, far from human activities. In the wake of clear-cutting, however, these 'flying foxes', as they are known locally, forage ever closer to human settlements and grow dependent on household gardens with their scattered trees and crops. [...] This transformation allowed Ebola to 'spill over' from bats to humans in West Africa in the wake of deforestation

1.4.2 The Global Spread of SARS-COV-2

The globalisation of capitalism and society has made the world more interconnected and networked, which is why the COVID-19 pandemic is a global pandemic and crisis.

1.4.3 Points of Change

Lockdowns of the economy have created points of change and transition where the future of society and capitalism is open.

1.4.4 Governance

Neoliberal cuts in the hospital sector have increased death rates. The COVID-19 crisis has shown how damaging

neoliberal privatisations and cuts to public health care have been, which has made the question acute if the politics of privatisation, austerity, commercialisation, commodification and marketisation should be continued in the future. The immediate question in the near and middle future is who should cover the main burden for reducing national debts.

Public authorities and healthcare systems were almost everywhere caught short-handed. Forty years of neoliberalism across North and South America and Europe had left the public totally exposed and ill-prepared to face a public health crisis of this sort, even though previous scares of SARS and Ebola provided abundant warnings as well as cogent lessons as to what should be done. In many parts of the supposed 'civilized' world, local governments and regional/state authorities, which invariably form the front line of defense in public health and safety emergencies of this kind, had been starved of funding thanks to a policy of austerity designed to fund tax cuts and subsidies to the corporations and the rich
(Harvey 2020a, 183)

Giving the failures of neoliberalism, it might no longer be so easy to impose a new neoliberal regime that makes the working class pay and suffer. Debates about the increased taxation of capital and wealth are likely to be more on the public agenda in the years to come.

1.4.5 Ideology

Existential crises of humans and society create fears. The history of class society and capitalism is, therefore, also a history of ideology and conspiracy theories that have emerged and intensified in phases of crisis. Ideology gives

short-circuited, polarising answers to the question, who caused a crisis and how it can be solved. It often scapegoats particular groups and individuals and neglects the systemic and structural aspects of crises. In crises, ideology is often used for distracting attention from the real causes of the crisis and the progressive political conclusions that can be drawn in such situations. Ideology is a means used by the dominant class for trying to secure its class power in the situation of profound crisis.

1.4.6 Globalisation and De-globalisation

In the pandemic crisis, economies have turned inwards and focused on national economies and politics. We have experienced a rupture that brought a certain de-globalisation of the world economy during the pandemic crisis. This rupture poses the question of what role global capital and trade should play in the future and if economies will in the future be more or less global, more or less regulated by the nation state, more or less public, more or less commodified, etc.

1.4.7 Class Relations in Pandemic Times

The poor, those conducting precarious, low-paid jobs and those working in key infrastructures cannot shield and distance themselves as much from the virus as others and are, therefore, more likely to contract and die from COVID-19. The rich, chief executive officers (CEOs), manager and corporations can buy themselves out of high-risk pandemic areas by moving to other parts of the world and moving capital along with them. The poor and workers are less globally mobile and are stuck in localities, which means they cannot escape from local dangers and outbreaks of diseases.

David Harvey (2020) points out the class character of the pandemic's effects and the interaction of class, racism and gender in this context:

the workforce that is expected to take care of the mounting numbers of the sick is typically highly gendered, racialized, and ethnicized in most parts of the world. It mirrors the class-based workforces to be found in, for example, airports and other logistical sectors. This 'new working class' is in the forefront and bears the brunt of either being the workforce most at risk from contracting the virus through their jobs or of being laid off with no resources because of the economic retrenchment enforced by the virus. There is, for example, the question of who can work at home and who cannot. This sharpens the societal divide as does the question of who can afford to isolate or quarantine themselves (with or without pay) in the event of contact or infection. [...]

COVID-19 exhibits all the characteristics of a class, gendered, and racialized pandemic. While efforts at mitigation are conveniently cloaked in the rhetoric that 'we are all in this together', the practices, particularly on the part of national governments, suggest more sinister motivations. The contemporary working class in the United States (comprised predominantly of African Americans, Latinx, and waged women) faces the ugly choice of contamination in the name of caring and keeping key features of provision (like grocery stores) open or unemployment with no benefits (such as adequate healthcare). Salaried personnel (like me) work from home and draw their pay just as before while CEOs fly around in private jets and helicopters

(Harvey 2020, 186–187)

1.4.8 Vaccine Capitalism and Vaccine Nationalism

The pharmaceutical industry has played an important role in the COVID-19 pandemic because it has developed vaccines against the disease. The COVID-19 pandemic crisis brought along the rise of vaccine capitalism. BioNTech (Germany)/Pfizer (US), Moderna (US), AstraZeneca (UK and Sweden), Johnson & Johnson (US) or CureVac (US) were among the pharma corporations that have played an important role. They received large sums of state funding, which shows that pandemic capitalism and vaccine capitalism form a type of state capitalism where state power and capitalist corporations are intertwined by state funding of capitalist activities and a stricter regulation of the economy than under neoliberal capitalism. Some of these pharma corporations are among the world's largest corporations. In 2020, Pfizer was the world's 58th largest corporation, Johnson & Johnson the 34th largest, AstraZeneca the 161st largest and Moderna the 1590th largest.¹

These transnational pharmaceutical companies hold intellectual property rights on the vaccines they developed and the right to determine to whom they sell how much vaccines for what price. In 2021, when the pandemic crisis entered a stage that vaccines were rolled out, a vaccine war and vaccine nationalism emerged. Given vaccines have been treated as a commodity in the pandemic crisis, some countries ordered much more vaccines from certain pharma corporations than others and paid higher prices. This issue is a question of financial power and relations between governments and the pharma capitalism. Countries such as the United Kingdom

¹ *Forbes* Global 2000 List of the World's Largest Public Companies for the year 2021, <https://www.forbes.com/global2000>, accessed on 10 June 2021.

and the United States secured themselves access to large amounts of different vaccines and as a consequence were able to quickly vaccinate a large share of their population.

Developing countries and other countries have been disadvantaged in the access to vaccines because they lack economic power and political influence.

The commodity character of COVID-19 vaccines, the private property character of the scientific knowledge underlying these vaccines and the capitalist control of vaccine production have advanced nationalism. Vaccine capitalism turned into vaccine nationalism. Governments first and foremost have focused on their national interest first, which has undermined international solidarity. In a pandemic crisis, vaccines are goods of common and public interest that are crucial for securing the survival of human beings. Capitalism puts profit over humans and, therefore, in a pandemic crisis, favours the survival of the rich over the survival of the poor. In a pandemic crisis, vaccine production should be turned into a common good that is collectively owned. This can be done by enforcing laws that socialise pharmaceutical corporations and turn them into public organisations owned by public bodies such as the WHO. Another measure is to turn the scientific knowledge underlying vaccines from a private property that is secured by intellectual property rights into commons that is treated as knowledge available to and accessible to all, which enables organisations throughout the world to use this knowledge for producing vaccines. Only a political economy that stresses the public interest, public ownership and common goods is suited to properly secure the survival of humans in a pandemic crisis. The right answer to a pandemic is not vaccine capitalism and vaccine nationalism, but rather vaccine socialism and vaccine internationalism.

1.5 COMMUNICATION IN PANDEMIC TIMES

The COVID-19 pandemic has brought about phases of lock-down that have changed the way humans work, lead their everyday lives and how they communicate. Internet platforms have played an important role in this context. One aspect of *Communicating COVID-19* is the analysis of changes everyday life and everyday communication have been undergoing. Times of deep crises create fears, risks, uncertainties and changes. Crisis-ridden societies are, therefore, prone to the emergence of ideologies and conspiracy theories that instrumentalise such situations. In the COVID-19 pandemic crisis, right-wing ideology has joined together with conspiracy theories and anti-vaccination ideology for creating distinct COVID-19 conspiracy theories. *Communicating COVID-19* analyses how COVID-19 conspiracy theories have been communicated, received, spread and contested on social media. This book shows that times of deep crisis are not just times of social change but also times where communication and communication technologies matter in the production, dissemination and challenge of ideologies.