Conformity Through Fear: A Multimodal Critical Discourse Analysis of COVID-19 Information Adverts

KYLE A. GILL

Independent Scholar

kylegill97@outlook.com

HENRY LENNON

University of Derby

h.lennon@derby.ac.uk

Abstract

The UK Government has produced an array of televised information adverts or 'campaigns' to increase public awareness of COVID-19 and promote compliance with its subsequent policy. Research has shown that compliance with public health policy is influenced by fearful visual-verbal campaign messaging strategies, and that emotive representations of 'risk' are generally perceived to be more effective than non-emotive discourse. However, how the Government has semiotically constructed and utilised fear within their COVID-19 campaigns to nudge public compliance remains unexplored. Preliminary analysis of seventeen COVID-19 adverts revealed four sequential phases to the Government's pandemic response: responsibility, management, mitigation, and reflection. An in-depth Multimodal Critical Discourse Analysis of four selected adverts (one screenshot per advert, per phase), revealed that fear was constructed using less conventional meaning potentials in favour of more implicit multimodal semiotic interactions. By portraying a 'good' pandemic subject as one who makes 'moral' and 'rational' decisions to comply with COVID-19 policy, pre-existing societal inequalities which might hinder compliance, particularly for the socioeconomically disadvantaged groups of society, were reduced and problematised. This raises ethical concerns over notions of 'expertise' and the 'rationalising' of 'irrational' lifestyles. Future research should further explore multimodal nudges in public health campaigns to hold producers accountable.

Key words: *Multimodal Critical Discourse Analysis, COVID-19, nudge, fear, semiotics*

1. Introduction

> Will you still say that the means do not matter?
> —Mahatma Ghandi, *Non-violent Resistance*

Considerable global effort has gone into controlling the spread of the Coronavirus disease 2019 (COVID-19) through non-pharmaceutical interventions (NPIs), such as lockdowns and face coverings, under the pretext of limiting transmission, protecting bodies, and alleviating pressures on healthcare systems (Harris, 2020). England's own response has sought to

promote compliance with NPIs via delineating behaviours deemed 'essential' and 'non-essential', partly through televised Government information adverts, or 'campaigns' (Sidley, 2021). By the end of 2020, the Government had spent over £160 million on advertisement (a 238% increase from 2019) (Fletcher, 2021), producing over triple the number of televised adverts in March–April 2020 alone compared to March–April 2019 (ASA, 2020), which has had an apparent effect on conformity (De Coninck et al., 2020).

Television adverts instantiate multimodal discourses, meaning they have the capacity to use and combine diverse semiotic modes (e.g., imagery, language, colour), to construct meaning (Kress & van Leeuwen, 2006). However, most campaigns have focused on emotional connotations of COVID-19, like death and anxiety (Basch et al., 2020), whereas empirical epidemiological discourse has received little interest, raising the question of how informative these campaigns really are (Venuleo et al., 2020). Indeed, Dias and Deluchey (2020) criticise the rhetoric used within the COVID-19 information campaigns for semiotically inciting a civil war between those who can comply with COVID-19 policy (who are celebrated as moral paragons) against those who cannot (labelled 'daring and uncaring') (see Howard, 2021).

1.1 Neoliberal Construction of Risk

Within these adverts, several 'nudge' interventions have reportedly been interwoven, including fear and peer pressure, to encourage compliance with NPIs (Dodsworth, 2021; Sidley, 2021). This, however, was intentional as SAGE (2020) advised the Government to use 'persuasion' and 'coercion' via 'hard-hitting emotional messaging' to achieve behavioural change (pp. 1–2). This 'nudging', or 'choice architecture' (Thaler & Sunstein, 2009) utilises insights from behavioural psychology to 'nudge' our decision-making (e.g., through fearful rhetoric; Dodsworth, 2021). Such tactics could be considered 'a form of governmentality which uses subtle semiotic techniques to secure voluntary compliance with policy goals' (Mulderrig, 2018, p. 39). Thus, nudge theory is based on the idea that by understanding how people think and behave, we can nudge them to make decisions which are considered best for them, for others, and for society in general. This semiotic construction of risk, however, seeks to 'create a space for fear' (Massumi, 1993), by, for example, evoking a sense of danger and potential loss (Mulderrig, 2018). Concurringly, Bakioğlu et al. (2020) found a positive correlation between fear of COVID-19 and feelings of uncertainty. Thus, the degree to which one can volunteer in nudge-induced behaviours, and engage in autonomous decision making, is debatable (Fage-Butler, 2020). Indeed, Leggett (2014) suggests that nudging may present a threat to democracy and accountability by removing the discursive spaces within which to stimulate rational deliberation (see also Mulderrig, 2018). Nudging, therefore, may also weaken a person's right to informed consent.

This blending of the medical and political is consistent with a neoliberal *governmentality* perspective of risk (Lupton, 2006). Neoliberalism, as a political *philosophy* (rather than political/economical *system*), is concerned with governing ontological individualism (i.e., reducing collective phenomena, like discrimination and well-being); responsibilisation (blame); and disentangling the 'deserving' from the 'undeserving' (Adams et al., 2019; Brown, 2019). COVID-19 information campaigns thus have a biopedagogical

communicative function (Lupton, 2015), by encouraging the public to be risk-knowledgeable and responsible choice-makers in the face of a threat (O'Malley, 2012). Risk avoidance could thus come to mean a 'moral duty' whereby 'good' citizens assume responsibility for complying with expert advice and 'voluntarily' self-regulate (Lupton, 2006, 2013). In fact, public shaming, (non-COVID) deaths and illnesses, and police abuse of power have all been rated as morally acceptable when perceived as COVID-19 control measures as opposed to efforts unrelated to COVID-19 (Graso et al., 2021).

However, the notion that COVID-19 policy should be both designed and enforced indiscriminately is dangerous as it risks the Government trivialising those most socially and economically deprived (Patel et al., 2020). For example, people of low-socio-economic status are more likely to live in overcrowded accommodation, have poorer housing conditions, have limited access to outdoor space, and are often employed in occupations which are unable to work from home (all of which can exacerbate poor health), yet were expected to behave in the exact same way as people of high-socio-economic status (Patel et al., 2020). As a technique of persuasion then, COVID-19 information campaigns endeavour to motivate a *generalised* behavioural change by using multimodal means to leverage the primitive nudge functionality of risk perception: the greater the perceived risk, the more fear can be amplified (Durner, 2018).

1.2 Neoliberal Construction of Fear

Harper et al. (2020), for instance, found that as fear of COVID-19 increases, so too does conformity, and they allude to using functional fear to nudge people toward complying with NPIs (see also Bughin et al., 2020; Degerman et al., 2020). From this perspective, the discourse of fear seemingly compels individuals to behave in accordance with the fear appeal's protective instructions (Durner, 2018), aligning with a neoliberal governmentality perspective of risk (van Nguyen & Gruba, 2019). However, lockdown measures have not been universally followed, as shown by the high number of police-issued fines (NPCC, 2021). This line of thinking thus reveals a shared, albeit potentially incorrect, assumption that conformity increases monotonically with fear (Ruiter et al., 2014).

Extreme fear appeals, for instance, have been noted to lead to fatalism and a demotivation to act (Lawson et al., 2016). Limiting COVID-related news and Government messaging intake, for example, have been identified as coping mechanisms for frontline healthcare workers to reduce stress (Aughterson et al., 2021). Therefore, fear appeals could lead to health-defeating behaviours and thus prove counterproductive as a public health intervention (e.g., Kok et al., 2018; Montemurro, 2020; Peters et al., 2013; Sasaki et al., 2020; Slavin et al., 2007). Fear of COVID-19, for instance, has meant that many who needed medical care did not always access services until they reached a crisis point (NHS Providers, 2020), partly due to fear of contracting/transmitting COVID-19, wanting to avoid burdening the NHS, and/or because of reduced referrals (Baggio et al., 2021; Singh & Newby, 2020). This then indicates a generalised avoidance of health care services which has seemingly led to a greater backlog of people with more complex medical and psychological needs (Adlan et al., 2020; Kwok et al., 2020; Santi et al., 2020; Wu et al., 2020). Using fear in

public health campaigns is thus an ethically dubious public health intervention (Lupton, 2015).

Moreover, though such fear-provoking efforts might be construed as public safeguarding, it runs the risk of stigmatising 'non-conforming citizens' as producers of risk, which may normalise de-humanising objectification (López, 2020). Indeed, lives which have been disproportionately impacted by COVID-19 policy have been righteously defended on this *socially* realised perception that doing so saves other lives 'worth' preserving (Dias & Deluchey, 2020). For example, social groups negatively affected by COVID-19 restrictions (such as increased unemployment, lost income, and poverty) have typically been low-income, younger, single parent (primarily female), and Black, Asian, and ethnic minority households (JRF, 2021; ONS, 2021a, 2021b). These same groups, however, also make up a large proportion of 'frontline key workers' (e.g., groceries, social care, transport, utilities, and education) (ONS, 2019, 2020a, 2020b). This then implies that the bodies most exposed to the collateral damage of COVID-19 policy are 'preferably' the bodies of populations considered 'subordinate' (Dias & Deluchey, 2020). The pandemic has thus seemingly exposed how the hierarchization and disposability of bodies considered subordinate is tolerated and, potentially, encouraged through neoliberal fear-inducing nudges (Dias & Deluchey, 2020).

Similar neoliberal *biopolitical* tactics are observable in the Brexit (fear) campaigns. For example, Abbas (2020) argues that Brexit was constructed on fears relating to national security and immigration, which presented a politically fashioned ideological dilemma (see also Lennon & Kilby, 2021). The solution, according to neoliberal governance, would be a 'calculation' in which individuals weigh the costs and benefits of pursuing various strategies to address a known 'risk' (Douglas & Wildavsky, 1982). However, both 'leavers' and 'remainers' used fearful sinking ship analogies to nudge such calculations (Lennon & Kilby, 2021).

Seen in this light, risk (and fear of said risk) is formulated discursively, external to the self, regardless of individual risk-profiles, and regardless of functionality. For example, Millroth and Frey (2021) found a weak correlation between participant demographics (e.g., age, income, education) and fear of COVID-19, whereas perceived vulnerability, social isolation, and increased consumption of COVID-related news have been noted to significantly predict heightened COVID-related fear, depression, and anxiety (Boyraz et al., 2020; Bu et al., 2020). Moreover, even individuals who have tested positive for anti-SARS-Cov-2 antibodies have been shown to self-report similar levels of fear and risk avoidance behaviour compared to those without antibodies (Baggio et al., 2021). Indeed, fear of COVID-19 has become so pervasive that there are now multiple COVID-specific psychometric scales being used, including (but not limited to): the Coronavirus Anxiety Scale, Obsession with COVID-19 Scale, Fear of COVID-19 Scale, COVID Stress Scales, and the Perception of COVID Threat questionnaire (see Ransing et al., 2020 for a review). This then suggests that there is a socially shared fearful perception of COVID-19 regardless of clinical vulnerability. Thus, although fear can be considered an evolutionary response to a perceived threat, fearful representations are socially constructed. However, how the UK Government has semiotically represented the 'risk' of COVID-19 within their televised information campaigns and nudged viewers to comply with its subsequent policy remains

empirically unexplored, and thus their role in the production of fear remains unaccountable.

1.3 Current Study

It is pertinent, therefore, that the COVID-19 information campaigns are understood in the broader context of health communication and governmentality. Thus far, current studies have been limited to theoretical debates of morality, and to quantitative analyses of (functional) fear. These approaches are insensitive to the different modes of image-text rhetoric used within the COVID-19 information campaigns which epistemologically undermines their complex interplay. Following on from similar research (Brookes & Harvey, 2016; Gbadegesin & Onanuga, 2018; Gibson et al., 2015; Hansen et al., 2018; Ho, 2019; Ma & Stahl, 2017; Mulderrig, 2018), the current study will pursue an in-depth qualitative analysis to better evaluate the role of neoliberal nudging in COVID-19 fear appeals from a multimodal critical discourse perspective. Due to the simultaneous discursive nature of picture and text, visual–verbal speech acts in televised Government COVID-19 information adverts will be explored for their representation of fear.

2. Methodology

2.1 Data Sample

Television adverts were included for analysis if they addressed the COVID-19 pandemic and were produced by the current UK Government. Adverts produced by bodies outside central government were excluded to ensure only Government-initiated material about COVID-19 and subsequent policy were involved. These televised adverts were sourced from YouTube as it can serve as a convenient 'database' to retrieve archival (television) data (Proulx & Shepatin, 2012). Data saturation was reflexive in nature (Braun & Clarke, 2019), as Government rhetoric is likely to change throughout a pandemic (Gislason, 2013). Consequently, seventeen potential adverts were collated (released 20 March 2020–20 February 2021).

In a first step, the authors took static screenshots of each advert - 80 in total (3–5 per advert depending on advert length) - and conducted a 'pilot' analysis assessing the type of argument contained in each. Rather than taking screenshots at regular intervals, key narrative moments (in terms of discourse of fear) were chosen instead (McKenna et al., 2017). Preliminary analysis revealed semantic differences in political prioritisation. For instance, from initially protecting the NHS to the eventual reopening of society. Four different sequential 'phases' (Department of Health and Social Care, 2020) to Government fear campaigns were identified: responsibility, management, mitigation, and reflection. Each advert was analysed within the context of their respective phase which helped delineate the pragmatic politics behind each advert and thus the construction and utilisation of fear *in situ* (e.g., Mulderrig, 2018). Out of this large corpus, one advert was selected from each phase (4 in total, see Appendix for full list of chosen adverts) for a more in-depth analysis paying attention to variance regarding represented visual-verbal content. Afterwards, one screenshot from each of these 4 adverts were

selected for the final analysis dependent on their content and overall ideological representation of their respective phase.

2.2 Analytical Method

Multimodal Critical Discourse Analysis (MCDA) focuses on how the interplay between different social semiotic resources create meaning (Kress & van Leeuwen, 2006). The way producers construct adverts, therefore, is not meaning*less,* but dependent on their objectives and values (Hansen et al., 2018). Adverts, as multimodal artifacts in the public sphere, can thus be understood as nudging fearful and moralised perceptions of COVID-19 and subsequent 'risk'. Adopting a MCDA method helps capture rhetorical constructions of meaning (Lennon & Kilby, 2021).

Adverts were coded inductively from a social constructivist epistemological stance, with a relativist focus on both semantic and latent constructions (van Dijk, 2012). This open coding avoids taking hegemonic public health arguments for given and allows for ethical discussions beyond strategic intervention (Hansen et al., 2018). This is important because contemporary health discourse receives little scrutiny (e.g., Brookes & Harvey, 2016). Data was coded according to Kilby and Lennon's (2021) recommended structure for unpacking multimodal features. Specifically, the codes were organised into five meta-functions: composition, colour, represented participants (RP), perspective and angles, and textual components (Kilby & Lennon, 2021).

2.3 Ethical Considerations

The study was ethically approved by the University of Derby. The research complied with the BPS Code of Ethics (2018) and their guidance for internet-mediated research (BPS, 2017).

3. Analysis and Discussion

The chosen adverts span March 2020–February 2021. Each presented the context of their respective time as a threat, but depictions varied depending on the (bio)politics of the time. As such, the basis for compliance with NPIs was differentially constructed throughout to nudge semiotically-produced notions of utilitarian decision making. However, whilst fear was not necessarily explicit in each advert, implicit semiotic interactions were able to construct new meanings in a likely attempt to nudge social judgements using pre-existing fears without necessarily referencing them directly. These multimodal signifiers will be explored presently. Whether such constructions were efficacious in motivating behavioural change is not the focus of the analysis, but rather the meaning potentials conveyed. Note that due to space constraints, only the meta-functions considered most relevant to the construction of fear will be addressed in each screenshot.
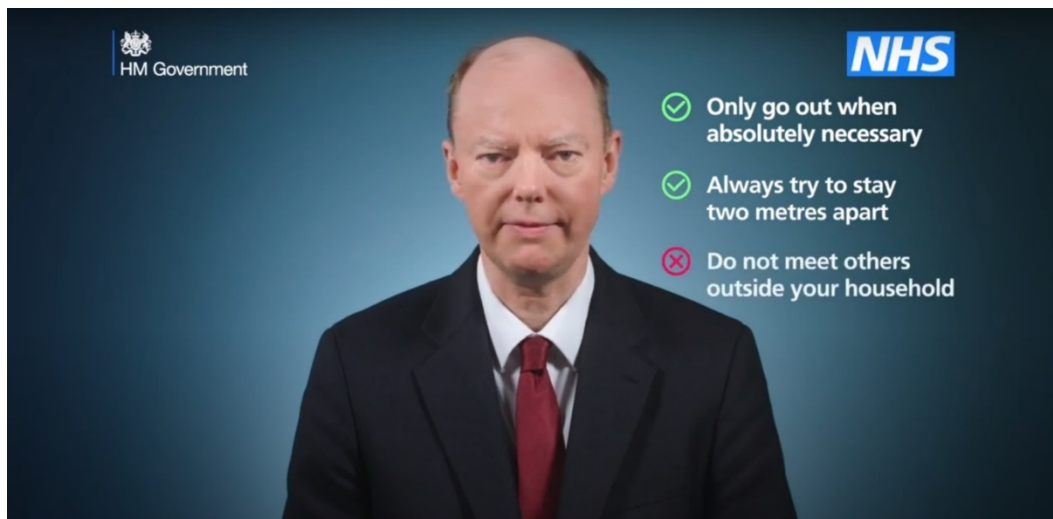
3.1 Phase 1: Responsibility

Figure 1. Professor Chris Whitty ('Stay Home, Protect the NHS, Save Lives')

Composition

The Government and NHS logos together connotatively signify a biopolitical discourse (Brookes & Harvey, 2016). Both logos are positioned at the top of the image, signifying a sense of ideological superiority by being 'above' the rest (i.e., the desired ideology is govern-health) (Kress & van Leeuwen, 2006). Previously in the advert, the RP is identified as Professor Chris Whitty suggesting that who he 'represents' has symbolic importance. Here, Professor Whitty is positioned between the two logos, possibly portraying him as a mediator. Moreover, being both centrally positioned and compositionally 'big', Whitty is framed as being highly salient, likely to focus the viewer's attention (Kopytowska, 2020).

Structurally, a Symbolic Attributive Process is at work because symbolism is being attributed 'onto' Whitty (Kress & van Leeuwen, 2006). For example, his shirt and tie (associated with credibility), and notched lapel (associated with business), on his dark suit jacket (associated with authority) represent stereotypically 'expert' Possessive Attributes (PA) (Ceballos et al., 2020; Lightstone et al., 2011; Maran et al., 2021). Moreover, ticks are often used in the UK as a sign of 'correctness' and approval, whereas crosses have opposite connotations (Worthington & van Oers, 2017). This may reinforce the (bio)pedagogical function of the adverts. This suggests that meaning has been constructed using 'the multifunctional nature of signs' (Valsiner, 2001, p. 92), to potentially nudge an 'educational' (as opposed to authoritarian) interpretation of what the rules *mean*.

Colour

The blue background has cultural and contextual significance by echoing the blue in the NHS logo (Brookes & Harvey, 2016). The blue is also modulated, being brightest 'around' Whitty, framing him as an angelic-like figure, which could portray him as a protective or guiding symbol (Kuczok, 2020). The modality (which is concerned with textual 'accuracy' and

'credibility') of the image is low, as it is merely a blue background, meaning the priority is on symbolism over realism (Yao & Zhuo, 2018). This then reaffirms the pragmatic meaning potentials mentioned regarding protecting/controlling (public) health and heralding Whitty as a 'mouthpiece' for superior beings (namely, the Government and NHS). Furthermore, green is ideationally associated with safety (e.g., first-aid equipment), whereas red is typically used to sign danger (e.g., fire protection) (Kress & van Leeuwen, 2002). These ideational associations likely aid viewers' (bio)pedagogical interpretation regarding 'safe and unsafe' behaviour.

Perspective and Angles

The frontal angle signifies a sense of involvement by perspectivally incorporating the viewer 'into' the scene (Kress & van Leeuwen, 2006). This immersion informs viewers that they are expected to take an active role in protecting both themselves and others (and in the wider context, the NHS). The viewer is also subjectively positioned at eye-level with Whitty, which simulates a sense of equal power, potentially countering the authoritarian complex of being 'lorded over' (Kress & van Leeuwen, 2006). However, the 'expert breast pocket shot', which shares visual similarities with, for example, an interview, redefines how viewers may interpret this power exchange as the viewer is positioned as a subordinate/uneducated person (Brunsdon & Morley, 2005). It also denotes a sense of connection between Whitty and the viewer rather than representing a disengaged RP (Kress & van Leeuwen, 2006). With no possible chance of deliberation, Whitty has power over the viewer regardless of this semiotically constructed equilibrium.

Textual Components

The on-screen text acts as an 'illustration' for what Whitty says, thus creating a direct link between the visual and verbal symbolism (Kress & van Leeuwen, 2006). Semantically, the language signifies a demand goods-and-services speech act – or speech 'function' (Halliday, 1985) – as the producers are demanding an obedient response. That is, the text has been syntactically arranged to form a command, meaning that the 'expected' response is for viewers to undertake whatever service they have been asked to do (Kress & van Leeuwen, 2006) – in this case, comply with NPIs. As such, the first two could be interpreted as conditional imperatives as the viewer is afforded 'exceptions' to the rules (e.g., 'necessary', 'try'), whereas the third could be interpreted as an unconditional imperative as the use of negation ('Do not') demands the specific avoidance of 'others' (Kaufmann & Schwager, 2009). In conjunction with the red cross, avoiding others is thus signified to be an aversive behaviour (i.e., for personal benefit) rather than a prosocial 'green ticked' behaviour which protects other people. As such, 'risk' is being constructed as a threat to the individual as opposed to others.

Multimodal Implications

The image is not explicitly threatening *per se*. However, by attributing stereotypical PAs and drawing the viewer's attention through compositional salience, Whitty is portrayed as an expert worth the viewer's time and trust.

Through implication, self-regulation was depicted as *the* solution despite no evidence being provided, instead relying on a familiar (bio)pedagogical format to nudge viewer judgement. By presenting health governance as a supposedly superior ideology to strive for (thus contextualising the scene within a biopolitical discourse), the producers were able to demand compliance with self-regulation through the imperative mood and by portraying 'others' as a potential threat. These semiotic interactions likely nudged viewers toward compliance by trusting Whitty's judgement to fear others.

3.2 Phase 2: Management

Figure 2. Participant opens window shutter ('Enjoy Summer Safely')

Composition

At the time, bookshops were either closed or subject to restrictions (Cabinet Office, 2021). Thus, this choice of (commercial) location portrays a supposed return to (economic) normality (Hunter, 2016). The location, within the context, and with prior knowledge regarding 'allowed' and 'disallowed' behaviours, suggests that it is 'safe' to go outside once more. The vector formed by the RP's left arm connects the RP (the 'Actor') with the window shutter (the 'Goal'), depicting a Unidirectional Transactional Action (Kress & van Leeuwen, 2006, p. 74). This narrative structure signifies the *active transaction* of reopening shops, and by extension, of society. It also presents an 'ordinary' person as being responsible for reopening, not a government agent or healthcare practitioner. This is typified by the RP's 'casual wear' PAs (Eriksson, 2015). This could reflect the burden of public responsibility noted previously, thus depicting self-regulation as successfully suppressing the virus, which paradoxically associates the reopening of society (i.e., freedom) with this suppressive conditionality (Arminjon & Marion-Veyron, 2021). It also implies that 'ordinary' bodies should be exposed to the virus for the benefit of the (market) community.

The eyeline vector from the RP (the 'Reacter') is directed toward a 'Phenomenon' which the viewer cannot see, thus making a Non-Transactional Reaction (NTR) (Kress & van Leeuwen, 2006, p. 75). One could argue that the

direction of the glance forms a Transactional Reaction (TR) with the Phenomenon being the window shutter; however, because the RP is facing away from the viewer, the visual meanings could suggest that the restricted field is less 'aimed at' anyone or anything but represents a more metaphorical meaning (Moustafa, 2018). For example, facing to the right is often associated with power, but also with looking 'toward' the future (Champagne, 2016; Mendonça et al., 2020). This could portray ordinary citizens as having the power to reopen society. Further, looking 'toward' the future, toward an unfamiliar 'New' (which polarises with the left side, or the familiar 'Given') (Kress & van Leeuwen, 2006, p. 209), could signify a metaphorical nudge away from the Given familiarity of pre-COVID society and toward a 'New normal' where *individuals* are responsible for keeping not just themselves safe, but society also.

Represented Participants

Unlike Whitty, the RP here is not the object, but subject of the image and of the viewer's scrutiny. The viewer is an invisible onlooker, in quiet and impersonal contemplation of the RP and their actions. This kind of image is an 'offer' as it 'offers' the RP as an item of information (Kress & van Leeuwen, 2006, p. 119). It erects a barrier between the viewer and the RP, who is believed to not know that they are being looked at. The fact that the RP is almost facing away further emphasises that the viewer should focus more on the RP's actions and who they are represented to 'be', such as a 'self-regulator' (Ly & Jung, 2015). Earlier in the advert, the viewer is shown another RP put on a face mask, which may have primed the viewer (Busch et al., 2020), because, even though the RP here is depicted as being alone, she is still wearing a face mask. This normalises using them in shops ('even when alone') and associates their use with the reopening of society.

Textual Components

The 'OPEN' sign is positioned in the foreground, whereas the 'CLOSED' sign on the door and the 'SOCIAL DISTANCING' sign on the wall are both in the background and compositionally 'smaller', signifying that the former is more salient than the latter two. Moreover, the letters were capitalised, symbolising shouting, graphologically assigning emphasis and drawing attention (Serafini & Clausen, 2012). Further, 'OPEN' is coloured red, which can also attract viewer attention and, according to Bellizzi and Hite (1992), entice consumers to enter a particular store. The focus is thus on the explicit reopening of society. As all three are declaratives, which can imply a 'changed' reality (e.g., society is open*ing*), the producers may be presenting this New reality as truth (Gbadegesin & Onanuga, 2018).

Multimodal Implications

The supposed success of self-regulation is demonstrated through narrative structures signifying an 'ordinary' citizen having the power to actively reopen society. By metaphorically looking toward a New normal, the RP is normalising NPIs, particularly face masks, in non-essential activities even when alone. This semiotically reinforces the maintenance of self-regulation

and the manageability of COVID-19. However, unlike the previous advert, the RP does not demand the viewer's attention, nor obedience, but is 'offered' as an exemplar. Such exemplary behaviour is further offered through literal signs which compositionally prioritise the reopening of the shop over social distancing. However, as it is included, it serves as an implicit nudge. Overall, though not explicitly fear*ful*, the semiotic interplay manages to use people's existing fears to continue to nudge compliance.
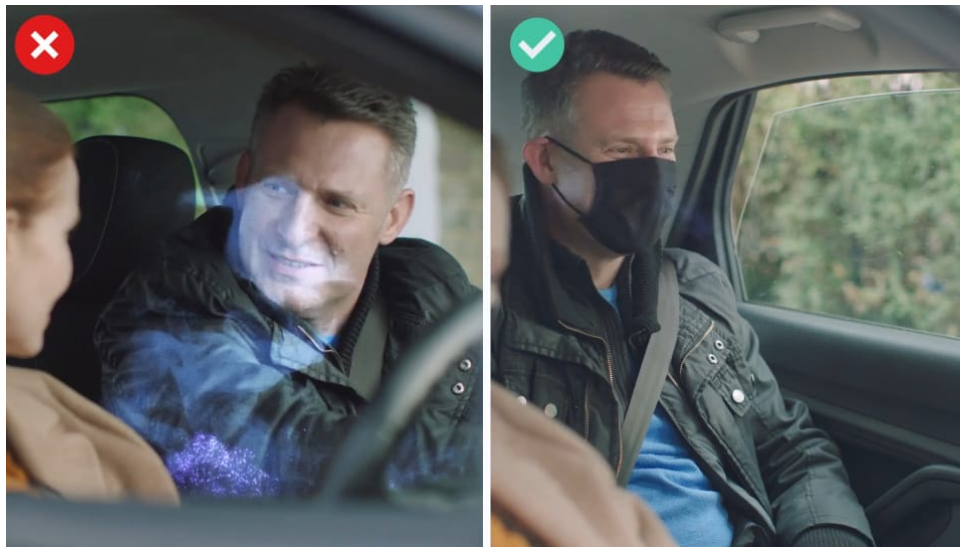
3.3 Phase 3: Mitigation

Figure 3. Participant exhaling 'COVID-19 aerosols' (left) and wearing a face mask (right) ('Hands. Face. Space.')

Composition

The central vertical line frames the scene as a contrasting 'right and wrong' constructed reality (Hullman & Diakopoulos, 2011). The left side represents the Given (i.e., no mask, closed window in Winter) whilst the right side presents the New (i.e., mask and ventilation). The blue mist (representing exhaled COVID-19 aerosols) in the left image is somewhat 'consciously' moving toward the female RP, arguably anthropomorphically alluding to a predator seeking its prey (Delbaere et al., 2011). Moreover, the bidirectional TR between the two RPs (as both are looking at one another) creates an empathic link between them for the viewer (Hu & Luo, 2016). This is further reinforced through the male RP's happy facial expression (Hu & Luo, 2016**).** The male RP is thus portrayed as putting someone they supposedly care about 'at risk'.

In the right image, the 'mist' is less salient, barely visible, but is instead signified to be 'moving' toward the open window, suggesting that mitigation is possible and attributable to mask wearing/ventilation. Further, the NTR contrasts the constructed empathy in the left image, as the eye-line vector emanating from the male RP points to a Phenomenon which the viewer cannot see, potentially signifying that the danger to the female RP has been removed. This may lessen the viewer's anxiety and signify that they 'can' protect others (Ho, 2019).

Like before, the producers make use of (bio)pedagogical signs to construct meaning via a red cross and green tick. These marks are positioned in the top-left of their respective image which signifies a Given-Ideal (Nikolaou, 2017). That is, the viewers are presumed to know what the implied producers (the Government) consider (un)desired behaviour. As such, because a face mask and open window are featured only in the right image, this indicates that such mitigatory behaviours are not only 'correct', but in conjunction with the NTR, is the 'safest' option also.

Colour

Like the previous advert, but contrastingly with the first, the current image attempts to imitate a realistic situation, which is reflected by the high naturalistic modality (i.e., somewhat less than full colour saturation) (Kress & van Leeuwen, 2006). The 'COVID mist', despite constituting an abstract 'entity', maintains similar modality with the rest of the scene (though, more transparent), which suggests that it is being portrayed as a natural part of the environment (Ibrahim, 2021). Its 'realistic' construction reaffirms the notion that COVID-19 is a present, *real*, threat which viewers *can* 'interact' with and subsequently mitigate against. The image thus depicts COVID-19 using less scientifically 'accurate' modality in favour of characterising it as a palpable entity (Kress & van Leeuwen, 2006).

Represented Participants

Like the previous advert, the image is set up as an 'offer' whereby viewers are shown '(in)correct' behaviours. Intriguingly, the left scene is shot at a medium-close distance whilst the right at a medium distance. Both shots seemingly immerse the viewer 'within' the car with the RPs (Biggio, 2020). This use of relational distancing in the former positions the viewer 'closer' to the threat, which is likely quite fear-evoking, whereas the latter somewhat prevents full immersion as the viewer is positioned 'further' away, or at the distance of the 'stranger' (Hu & Luo, 2016). This may nudge viewers into accepting the purported relative ease, and supposed efficacy, of mask wearing, ventilation *and* social distancing in mitigating risk.

Multimodal Implications

Once more, the advert signifies self-regulation as 'correct'. Through Westernised 'storytelling' (e.g., reading left-right) and (bio)pedagogical (e.g., green tick) conventions, the producers were able to construct a naturalistic reality in which the same RP is presented as either morally reprehensible or morally celebrated. The former is portrayed as directly putting people 'at risk', signified by the presence of an abstract COVID 'entity' and TR structure. Whereas in the latter, this entity is shown to be easily mitigated against by the introduction of NPIs which 'removes' the risk to others (implied via a NTR). As such, mitigation, and by implication safety of *others*, is represented as a personal choice. Consequently, where viewers were once explicitly told to avoid others for fear of personal-risk, and then were encouraged to venture outside due to the successful suppression of risk, viewers are now being depicted as a potential threat *to* others.

3.4 Phase 4: Reflection

Figure 4. COVID-19 Patient ('Look Them in the Eye')

Colour

The lighting has relatively high naturalistic modality, signifying an 'accurate' depiction of a COVID-19 patient. The scale of 'value' (i.e., the grey scale), however, has been manipulated to partially hide the RP's face (also known as 'Rembrandt's lighting') (Kress & van Leeuwen, 2006). This lighting effect is often used in cinematography to construct a serious mood and sometimes evoke a sense of impending doom (Landau, 2014). Furthermore, the partial light on the left side of the RP's face forms a tilted triangle (popularised by Rembrandt) which is seemingly directing the viewer's gaze to the RP. Triangles represent mechanical, technological order as it is a shape not found in nature, which attracts meanings of progress and power, like the Pyramids (Kress & van Leeuwen, 2006). The lighting could thus imply that the New normal (represented by the technological triangular lighting) can 'shine a light on' or 'overpower' the Given darkness.

Represented Participants

Like with Whitty, the RP here creates direct eye-contact with the viewer, 'demanding' their attention (Kress & van Leeuwen, 2006). The RP's dishevelled look, such as her messy hair and weathered expression, symbolises an informality and fatigue, which reinforces the supposed 'realism' of the situation (Damayanti & Febrianti, 2020). This is further reinforced by the (stereotypical) representation of illness via the oxygen mask and hospital gown PAs (King & Watson, 2005). As no perspectival barrier has been erected between the viewer and the RP, and because of the health-related signifiers, the producers are seemingly trying to nudge an empathic response from the viewers. The close camera shot reinforces such a response as it signifies a close personal distance 'between' the viewer and the RP. That is, the viewer is positioned at a distance from the RP which is primarily reserved for intimate others. The proximity thus constructs a close-like relationship with the RP.

Textual Components

The identifying process (Kress & van Leeuwen, 2006) informs the viewer that 'Lorna' *is a* 'COVID-19 patient'. The emphasis is thus placed on the RP's health status as she is identified as, and reduced to, a patient. The RP's name is positioned above her patient 'status' signifying that her name is the Ideal information whereas her status is the Real information (i.e., her status is used to ground the viewer in 'reality') (Kress & van Leeuwen, 2006). However, the white used for 'COVID-19 Patient' is duller (not maximal value) than 'Lorna'. Moreover, 'Lorna' is in bolder text than 'COVID-19 Patient'. Such graphological differences signify that the RP's name is more salient (Dada & Ogunrinde, 2020), possibly because drawing attention to her name helps humanise the RP, creating an empathic link.

The inclusive pronouns 'we' and 'our' construct a close relationship between speaker and listener (Chou, 2020). Inclusive pronouns may increase the likelihood that other people 'join in the rallying call' and voice their concerns, possibly leading to a social conformity effect (i.e., it leads to more people voicing their concern for an overburdened NHS which thus puts greater pressure on conformity/obedience and greater disdain for those who dissent) (Weiss et al., 2018). Moreover, 'owe' has honourable connotations (Blandeau, 2017). Meaning, complying with NPIs to help 'protect' the NHS (and repay 'our' supposed debt to the NHS) is thus the 'honourable' thing to do.

Multimodal Implications

The producers created an eerie tone by selectively highlighting only one side of the RP's face. Moreover, by framing the RP (through health-related signs, naturalistic lighting, and lexical salience) as vulnerable, and through constructing a subjective intimate relationship between the viewer and the RP, the viewer is being nudged toward an empathic response. This is likely to further nudge viewers toward self-reflection in which, within the wider context of the 'look them in the eye' advert discourse, the viewer is asked to consider whether they, individually, are doing 'enough' to repay their supposed debt to the NHS. The constructed inclusivity ('we', 'our') by implication condemns dissent and subsumes all bodies into a national debt to which the only appropriate *honourable* response is to protect the NHS at all costs.

4. General Discussion

At the start of the campaign, health governance – which involved the explicit avoidance of 'others' – was presented as an 'expertly' recommended ideology to strive for by demanding viewers to be 'responsible'. As cases fell, supposedly due to the success of self-regulation, 'ordinary' citizens were portrayed as having the power (and freedom) to actively, and safely, reopen society by managing their own behaviour. However, when cases started rising again, mitigation was depicted as a more salient ideology through Westernised 'storytelling' conventions, such as by presenting a 'realistic' world in which a person's decision making either 'puts' others at risk or protects them. When

cases continued to rise though, this was attributed to a failure in 'rational' and 'moral' decision making, resulting in the viewer's 'loyalty' to the NHS (acting as a politically usurped symbol of compliance) being questioned.

Whilst the rules themselves have been made explicit, e.g., stay-at-home mandates, the Government has used a combination of explicit and implicit fear-evoking semiotic interactions within their COVID-19 information campaigns to 'nudge' compliance. That is, fear was evoked using less conventional depictions (e.g., a weapon), instead focusing on pragmatic representations, like the NHS being under pressure. To portray infection control as a matter of risk by making an *individual's* actions responsible for it, diverse social groups were subsumed into the public fold vis-à-vis pandemic control and homogenised to make individual bodies more complicit and manageable. In essence, individuality and diversity were filtered, indicating that the kind of 'subject' (Foucault, 2017) desired under this neoliberal form of governance is one who can withstand the ensuing pandemic fallout. The Government has thus semiotically encouraged 'good' pandemic citizenship via the adoption of a self-regulatory, risk-conscious 'pandemic subject' (Maunula, 2017).

Although one could argue that such an approach aims to promote the similarities between people rather than their differences (e.g., Harper et al., 2020), it reduces and problematises pre-existing societal inequalities to such an extent that the most marginalised groups are blamed for lockdown failures (Dias & Deluchey, 2020). The Government has thus arguably prioritised intervening with those considered to be *a risk* rather than those *at risk*. Consequently, compliance via 'contractual' obligation (to freedom) has been rhetorically rebranded by the Government as 'intelligent' risk-aversion. The socioeconomic disparity in the regulation of COVID-19 control behaviour implies that the strategies are generated by, and for, the socioeconomically privileged. That is, panoptical strategies for contagion surveillance and classification of bodies considered subordinate (Foucault, 2003) were developed, not under the pretence of public health, but rather to maintain the neoliberal status quo (Mattioni et al., 2021). This ideology reinforces the individualistic belief that illness can be removed if the public behave in a certain way, thus ignoring significant underlying social factors which drive illness, like poverty and economic inequality (Patel et al., 2020).

This biopolitical approach, however, raises concerns about the ethicality of 'expertise' since it legitimises policy makers pathologising citizens' every-day behaviours as inherently irrational and in need of 'rationalising' correction (Wilkins, 2013). Socially realised fears of COVID-19 have thus created a public space for 'experts' to dictate what *they* consider 'essential' and 'non-essential' behaviours/lifestyles. By implication, dissenters are pathologized as immoral and dangerous, as implied within the adverts. Such views have significant implications on how society perceives and governs its citizenry (Lemke, 2016). Indeed, mere *fear* of the *potential* for COVID-19 infection has become a matter of *law*, such is the extent of public fear of COVID-19. However, by introducing policy which has been purposively designed to nudge viewers toward behaviours considered 'in their best interest', rather than engage in the pluralistic debate about the efficacy, plausibility, and ethicality of NPIs, as well as the human cost of fear, the Government has instead problematised those who have been disproportionately affected by COVID-19 policy. Non-conformity has thus been represented as an 'irrational' *choice*. A choice which

contrasts with the paternalistic expertise of, primarily, middle class social elites, rather than – at least in part – because of the structural inequalities present within the UK. Such an endorsement therefore restricts the possibility of human resistance, thus removing an opportunity for those affected to speak out.

The scope of the current study was limited, however, and so not all meaning potentials were addressed. For example, the rainbow in advert two, which ideologically represents the NHS, as well as an interpersonal sense of 'community' (arguably [mis]appropriating the rainbow's association with the LGBT+ community), and the lexically constructed tenor in advert four (i.e., not mentioning the RP's surname, nor including a title prefix, e.g. 'Ms.'), amongst others. Moreover, the study was restricted to only four screenshots out of a large corpus. Thus, there is potential for the current study to extend its scope and consider these adverts - and collective phases - more holistically, which could allow for a more thorough exploration of the sequential constructions of governmentally produced fear.

Overall, nudging in COVID-19 information adverts is, as shown, multimodal and pragmatic, indicating that such fear-provoking tactics are at times difficult to identify. By framing COVID-dissent to be synonymous with a personal failure in rational and moral decision making, the Government has disseminated a punitive fear-inducing discourse on the naturalisation of ongoing societal inequality under the guise of a utilitarian-esque normality. Such a depiction fails to acknowledge, however, that some people are exempt from, or unable to comply with, certain policies. Therefore, some, including already marginalised groups, are implicated to be 'immoral' and 'irrational' decision makers. The Government's insistence on utilitarian-framed restrictions of freedom have thus far refused to acknowledge that what ultimately matters in pandemic control is not simply the will to comply, but the practicality – and ethicality – to do so. Future MCDA research concerned with public health would benefit from considering these increasingly present psychological techniques of health governance, particularly when they take hold of public life, to hold the legitimacy and ethical ramifications of governmental policy accountable.

References

Abbas, T. (2020). Islamophobia as racialised biopolitics in the United Kingdom. *Philosophy & Social Criticism*, *46*(5), 497-511. https://doi.org/10.1177/0191453720903468

Adams, G., Estrada-Villalta, S., Sullivan, D., & Markus, H. R. (2019). The psychology of neoliberalism and the neoliberalism of psychology. *Journal of Social Issues*, *75*(1), 189-216. https://doi.org/10.1111/josi.12305

Adlan, A., Lim, V., Sastry, S., Dhillon, G., Kurdi, H., Doolub, G., ... & Davis, G. (2020). Impact of COVID-19 on primary percutaneous coronary intervention centres in the UK: a survey. *The British Journal of Cardiology*, *27*, 49-52.

Advertising Standards Authority. (2020, October 8). *Covid-19: Trends in Advertising.* https://www.asa.org.uk/news/covid-19-trends-in-advertising.html

Arminjon, M., & Marion-Veyron, R. (2021). Coronavirus biopolitics: the paradox of France's Foucauldian heritage. *History and Philosophy of the Life Sciences*, *43*(1), 1-5. https://doi.org/10.1007/s40656-020-00359-2

Aughterson, H., McKinlay, A. R., Fancourt, D., & Burton, A. (2021). Psychosocial impact on frontline health and social care professionals in the UK during the COVID-19 pandemic: a qualitative interview study. *BMJ open*, *11*(2), e047353. https://doi.org/10.1136/bmjopen-2020-047353

Baggio, S., Vernaz, N., Spechbach, H., Salamun, J., Jacquerioz, F., Stringhini, S., ... & Gétaz, L. (2021). Vulnerable patients forgo health care during the first wave of the Covid-19 pandemic. *Preventive Medicine*, *150*, 106696. https://doi.org/10.1016/j.ypmed.2021.106696

Bakioğlu, F., Korkmaz, O., & Ercan, H. (2020). Fear of COVID-19 and positivity: Mediating role of intolerance of uncertainty, depression, anxiety, and stress. *International Journal of Mental Health and Addiction*. https://doi.org/10.1007/s11469-020-00331-y

Basch, C. H., Hillyer, G. C., Meleo-Erwin, Z., Mohlman, J., Cosgrove, A., & Quinones, N. (2020). News coverage of the COVID-19 pandemic: Missed opportunities to promote health sustaining behaviors. Infection, *Disease & Health*, *25*(3), 205-209.

Bellizzi, J. A., & Hite, R. E. (1992). Environmental color, consumer feelings, and purchase likelihood. *Psychology & marketing*, *9*(5), 347-363. https://doi.org/10.1002/mar.4220090502

Biggio, F. (2020). Semiotics of Distances in Virtual and Augmented Environments. *img journal*, *3*, 82-103. https://doi.org/10.6092/issn.2724-2463/12249

Blandeau, A. (2017). Various Meanings of Debt and Indebtedness in Dives and Pauper. *E-CRINI-La revue électronique du Centre de Recherche sur les Identités Nationales et l'Interculturalité*, (9). https://hal.archives-ouvertes.fr/hal-01874642/

Boyraz, G., Legros, D. N., & Tigershtrom, A. (2020). COVID-19 and traumatic stress: The role of perceived vulnerability, COVID-19-related worries, and social isolation. *Journal of Anxiety Disorders*, *76*, 102307. https://doi.org/10.1016/j.janxdis.2020.102307

Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health*, *11*(4), 589-597. https://doi.org/10.1080/2159676X.2019.1628806

British Psychological Society. (2017). Ethics Guidelines for Internet-Mediated Research (2017). *BPS*. https://www.bps.org.uk/news-and-policy/ethics-guidelines-internet-mediated-research-2017

British Psychological Society. (2018). Code of Ethics and Conduct. *BPS*. https://www.bps.org.uk/news-and-policy/bps-code-ethics-and-conduct

Brookes, G., & Harvey, K. (2016). Opening up the NHS to market: Using multimodal critical discourse analysis to examine the ongoing commercialisation of health care. *Journal of Language and Politics*, *15*(3), 288-302. https://doi.org/10.1075/jlp.15.3.04bro

Brown, W. (2019). *In the ruins of neoliberalism: the rise of antidemocratic politics in the West*. Columbia University Press.

Brunsdon, C., & Morley, D. (2005). Everyday Television: Nationwide. In D. Morley & C. Brunsdon (Eds.), *The Nationwide Television Studies* (pp. 19-116). Routledge.

Bu, F., Steptoe, A., Mak, H. W., & Fancourt, D. (2020). *Time-use and mental health during the COVID-19 pandemic: a panel analysis of 55,204 adults followed across 11 weeks of lockdown in the UK*. medRxiv. https://www.medrxiv.org/content/10.1101/2020.08.18.20177345v1

Bughin, J. R., Cincera, M., Reykowska, D., Żyszkiewicz, M., & Ohme, R. (2020). Perceptive risk clusters of European citizens and NPI compliance in face of the covid-19 pandemics. *Available at SSRN 3749926*. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3749926

Busch, J., Madsen, E. K., Fage-Butler, A. M., Kjær, M., & Ledderer, L. (2020). Dilemmas of nudging in public health: an ethical analysis of a Danish pamphlet. *Health Promotion International*, daaa146. https://doi.org/10.1093/heapro/daaa146

Cabinet Office. (2021, March 22). Closing certain businesses and venues in England. *GOV.UK*. https://www.gov.uk/government/publications/further-businesses-and-premises-to-close/closing-certain-businesses-and-venues-in-england

Ceballos, L. M., Hodges, N., & Watchravesringkan, K. (2020). Decoding typicality in apparel products: an investigation of consumer perceptions. *International Journal of Fashion Design, Technology and Education,* 37-47. https://doi.org/10.1080/17543266.2020.1850884

Champagne, M. (2016). Diagrams of the past: How timelines can aid the growth of historical knowledge. *Cognitive Semiotics*, *9*(1), 11-44. https://doi.org/10.1515/cogsem-2016-0002

Chou, H. Y. (2020). Effects of pronoun use in campaign advertisements on young Taiwanese voters. *Chinese Journal of Communication*, *13*(2), 165-186. https://doi.org/10.1080/17544750.2019.1626750

Dada, S. A., & Ogunrinde E. D. (2020). A stylistic analysis of Nigeria Centre for Disease Control (NCDC) COVID-19 sensitization advertisements on social media. *Journal of African Studies and Sustainable Development, 3*(6), 153-176.

Damayanti, I. L., & Febrianti, Y. (2020). Multimodal literacy: Unfolding reading path in children's picture book and its potential for EFL classrooms. *Indonesian Journal of Applied Linguistics*, *9*(3), 616-627. https://doi.org/10.17509/ijal.v9i3.23212 616

De Coninck, D., d'Haenens, L., & Matthijs, K. (2020). Perceived vulnerability to disease and attitudes towards public health measures: COVID-19 in Flanders, Belgium. *Personality and Individual Differences*, *166*, 110220. https://doi.org/10.1016/j.paid.2020.110220

Degerman, D., Flinders, M., & Johnson, M. T. (2020). In defence of fear: COVID-19, crises and democracy. Critical *Review of International Social and Political Philosophy*. https://doi.org/10.1080/13698230.2020.1834744

Delbaere, M., McQuarrie, E. F., & Phillips, B. J. (2011). Personification in advertising: Using a visual metaphor to trigger anthropomorphism. *Journal of Advertising*, *40*(1), 121-130. https://doi.org/doi:10.2753/JOA0091-3367400108

Department of Health and Social Care. (2020). Coronavirus action plan: a guide to what you can expect across the UK. *GOV.UK*. https://www.gov.uk/government/publications/coronavirus-action-plan/coronavirus-action-plan-a-guide-to-what-you-can-expect-across-the-uk

Dias, B. L., & Deluchey, J. F. Y. (2020). The "Total Continuous War" and the COVID-19 Pandemic: Neoliberal Governmentality, Disposable Bodies and Protected Lives. *Law, Culture and the Humanities*, 1743872120973157. https://doi.org/10.1177/1743872120973157

Dodsworth, L. (2021). *A State of Fear*. Pinter & Martin Ltd.

Douglas, M., & Wildavsky, A. (1982). *Risk and culture: An essay on the selection of technical and environmental dangers*. University of California Press.

Durner, V. (2018). *Can Threats and Fear Foster Security? Cognitive and Emotive Forces of Fear Appeals on Information Security Behavior* [Doctoral thesis, University of Houston]. https://uh-ir.tdl.org/bitstream/handle/10657/4035/DURNER-DISSERTATION-2018.pdf?sequence=1

Eriksson, G. (2015). Ridicule as a strategy for the recontextualization of the working class: A multimodal analysis of class-making on Swedish reality television. *Critical Discourse Studies*, *12*(1), 20-38. https://doi.org/10.1080/17405904.2014.962067

Fage-Butler, A. (2020). Health-related nudging: A critical multimodal approach using Foucault and Habermas. *Communication & Language at Work*, *7*(1), 15-27. https://doi.org/10.7146/claw.v7i1.123248

Fletcher, M. (2021, March 22). Nielsen confirms £164 million government ad spend for 2020. *Mediatel News.* https://mediatel.co.uk/news/2021/03/22/nielsen-confirms-164-million-government-ad-spend-for-2020/

Foucault, M. (2003). *Abnormal: lectures at the Collège de France, 1974-1975* (Vol. 2). Macmillan.

Foucault, M. (2017). *Subjectivity and truth: lectures at the College de France, 1980-1981*. Springer.

Gbadegesin, V., & Onanuga, P. (2018). A multimodal interaction analysis of selected 2015 Nigerian election campaign adverts. *Communicatio*, *44*(2), 41-66. https://doi.org/10.1080/02500167.2018.1464042

Gibson, A. F., Lee, C., & Crabb, S. (2015). Reading between the lines: Applying multimodal critical discourse analysis to online constructions of breast cancer. *Qualitative Research in Psychology*, *12*(3), 272-286. https://doi.org/10.1080/14780887.2015.1008905

Gislason, M. K. (2013). West Nile virus: the production of a public health pandemic. *Sociology of health & illness*, *35*(2), 188-199. https://doi.org/10.1111/j.1467-9566.2012.01535.x

Graso, M., Chen, F. X., & Reynolds, T. (2021). Moralization of Covid-19 health response: Asymmetry in tolerance for human costs. *Journal of experimental social psychology*, *93*, 104084. https://doi.org/10.1016/j.jesp.2020.104084

Halliday, M. A. K. (1985). *An Introduction to Functional Grammar*. Edward Arnold.

Hansen, S. L., Eisner, M. I., Pfaller, L., & Schicktanz, S. (2018). "Are you in or are you out?!" Moral appeals to the public in organ donation poster campaigns: A multimodal and ethical analysis. *Health communication*, *33*(8), 1020-1034. https://doi.org/10.1080/10410236.2017.1331187

Harper, C. A., Satchell, L. P., Fido, D., & Latzman, R. D. (2020). Functional fear predicts public health compliance in the COVID-19 pandemic. *International journal of mental health and addiction*. https://doi.org/10.1007/s11469-020-00281-5

Harris, L. C. (2020). Breaking Lockdown during Lockdown: A Neutralization Theory Evaluation of Misbehavior during the Covid 19 Pandemic. *Deviant Behavior*, 1-15. https://doi.org/10.1080/01639625.2020.1863756

Ho, J. (2019). Heroes or criminals: discursive representation of cancer patients in health awareness advertisements. *Visual Communication*. https://doi.org/10.1177/1470357219887521

Howard, M. C. (2021). Who wants to reopen the economy during the COVID-19 pandemic? The daring and uncaring. *Personality and Individual Differences*, *168*, 110335. https://doi.org/10.1016/j.paid.2020.110335

Hu, C., & Luo, M. (2016). A Multimodal Discourse Analysis of Tmall's Double Eleven Advertisement. *English Language Teaching*, *9*(8), 156-169. https://doi.org/10.5539/elt.v9n8p156

Hullman, J., & Diakopoulos, N. (2011). Visualization rhetoric: Framing effects in narrative visualization. *IEEE transactions on visualization and computer graphics*, *17*(12), 2231-2240. https://doi.org/10.1109/TVCG.2011.255

Hunter, W. C. (2016). The social construction of tourism online destination image: A comparative semiotic analysis of the visual representation of Seoul. *Tourism management*, *54*, 221-229. https://doi.org/10.1016/j.tourman.2015.11.012

Ibrahim, W. (2021). Persuasion in Anti-Smoking Advertisements: A Multimodal Approach. *Cairo Studies in English*, *2020*(1), 42-66. https://cse.journals.ekb.eg/article_147188_4817aaf869ce3e9b6cde819ad766dc32.pdf

Joseph Rowntree Foundation (JRF). (2021). *UK Poverty 2020/21*. JRF. https://www.jrf.org.uk/report/uk-poverty-2020-21

Kaufmann, S., & Schwager, M. (2009). A unified analysis of conditional imperatives. In E. Company, I. Satoshi & D. Lutz (Eds.), *Proceedings of Semantics and Linguistic Theory* (Vol. 19, pp. 239-256). SALT. https://semanticsarchive.net/Archive/TYzZWYyM/kaufmann_schwager_salt09.pdf

Kilby, L., & Lennon, H. (2021). When words are not enough: Combined textual and visual multimodal analysis as a Critical Discursive Psychology undertaking. *Methods in Psychology*, *5*, 100071. https://doi.org/10.1016/j.metip.2021.100071.

King, M., & Watson, K. (2005). *Representing health: Discourses of health and illness in the media*. Palgrave Macmillan.

Kok, G., Peters, G. J. Y., Kessels, L. T., Ten Hoor, G. A., & Ruiter, R. A. (2018). Ignoring theory and misinterpreting evidence: the false belief in fear appeals. *Health Psychology Review*, *12*(2), 111-125. https://doi.org/10.1080/17437199.2017.1415767

Kopytowska, M. (2020). Proximization, prosumption and salience in digital discourse: on the interface of social media communicative dynamics and the spread of populist ideologies. *Critical Discourse Studies*. https://doi.org/10.1080/17405904.2020.1842774

Kress, G., & van Leeuwen, T. (2002). Colour as a semiotic mode: notes for a grammar of colour. *Visual communication*, *1*(3), 343-368. https://doi.org/10.1177/147035720200100306

Kress, G., & van Leeuwen, T. (2006). *Reading Images: The grammar of visual design* (2nd ed.). Routledge.

Kuczok, M. (2020). The Interplay of Metaphor and Metonymy in Christian Symbols. *Metaphor and Symbol*, *35*(4), 236-249. https://doi.org/10.1080/10926488.2020.1809313

Kwok, C. S., Gale, C. P., Kinnaird, T., Curzen, N., Ludman, P., Kontopantelis, E., ... & Mamas, M. (2020). Impact of COVID-19 on percutaneous coronary intervention for ST-elevation myocardial infarction. *Heart*, *106*(23), 1805-1811.

Landau, D. (2014). *Lighting for cinematography: a practical guide to the art and craft of lighting for the moving image*. Bloomsbury Academic.

Lawson, S. T., Yeo, S. K., Yu, H., & Greene, E. (2016, May). The cyber-doom effect: The impact of fear appeals in the US cyber security debate. In *2016 8th International Conference on Cyber Conflict* (CyCon) (pp. 65-80). IEEE.

Leggett, W. (2014). The politics of behaviour change: Nudge, neoliberalism and the state. *Policy & Politics, 42*(1), 3-19. http://dx.doi.org/10.1332/030557312X655576

Lemke, T. (2016). *Foucault, governmentality, and critique*. Routledge.

Lennon, H., & Kilby, L. (2021). A Multimodal Critical Discourse Analysis of 'Brexit': Flagging the Nation in Political Cartoons. In M. A. Demasi, S. Burke, & C. Tileagă (Eds.), *Political Communication Discursive Perspectives (Palgrave Studies in Discursive Psychology)* (pp. 115-146). Palgrave Macmillan.

Lightstone, K., Francis, R., & Kocum, L. (2011). University faculty style of dress and students' perception of instructor credibility. *International Journal of Business and Social Science*, *2*(15), 15-22.

López, R. M. (2020). Discursive de/humanizing: A multimodal critical discourse analysis of television news representations of undocumented youth. *Education Policy Analysis Archives*, *28*(47). https://doi.org/10.14507/epaa.28.4972

Lupton, D. (2006). Sociology and risk. In G. Mythen & S. Walklate (Eds.), *Beyond the Risk Society: Critical Reflections on Risk and Human Security* (pp. 11-24). Open University Press.

Lupton, D. (2013). *Risk* (2nd ed.). Routledge.

Lupton, D. (2015). The pedagogy of disgust: the ethical, moral and political implications of using disgust in public health campaigns. *Critical public health*, *25*(1), 4-14. http://doi.org/10.1080/09581596.2014.885115

Ly, T. H., & Jung, C. K. (2015). Multimodal discourse: a visual design analysis of two advertising images. *International Journal of Contents*, *11*(2), 50-56. https://doi.org/10.5392/IJoC.2015.11.2.050

Ma, J., & Stahl, L. (2017). A multimodal critical discourse analysis of anti-vaccination information on Facebook. *Library & Information Science Research*, *39*(4), 303-310. https://doi.org/10.1016/j.lisr.2017.11.005

Maran, T., Liegl, S., Moder, S., Kraus, S., & Furtner, M. (2021). Clothes make the leader! How leaders can use attire to impact followers' perceptions of charisma and approval. *Journal of Business Research, 124*, 86-99. https://doi.org/10.1016/j.jbusres.2020.11.026

Massumi, B. (1993). *The Politics of Everyday* Fear. University of Minnesota Press.

Mattioni, F. C., Nakata, P. T., Dresh, L. C., Rollo, R., Brochier, L. S. B., & Rocha, C. F. (2021). Health Promotion Practices and Michel Foucault: A Scoping Review. *American Journal of Health Promotion*, 0890117721989222. https://doi.org/10.1177/0890117721989222

Maunula, L. (2017). *Citizenship in a Post-Pandemic World: A Foucauldian Discourse Analysis of H1N1 in the Canadian Print News Media* [Doctoral dissertation, University of Toronto]. https://tspace.library.utoronto.ca/handle/1807/80683

McKenna, B., Myers, M. D., & Newman, M. (2017). Social media in qualitative research: Challenges and recommendations. *Information and Organization*, *27*(2), 87-99. https://doi.org/10.1016/j.infoandorg.2017.03.001

Mendonça, R., Garrido, M. V., & Semin, G. R. (2020). Social inferences from faces as a function of the left-to-right movement continuum. *Frontiers in psychology*, *11*, 1488. https://doi.org/10.3389/fpsyg.2020.01488

Millroth, P., & Frey, R. (2021). Fear and anxiety in the face of COVID-19: Negative dispositions towards risk and uncertainty as vulnerability factors. *Journal of Anxiety Disorders*, *83*, 102454. https://doi.org/10.1016/j.janxdis.2021.102454

Montemurro, N. (2020). The emotional impact of COVID-19: From medical staff to common people. *Brain, behavior, and immunity*, *87*, 23-24. https://doi.org/10.1016/j.bbi.2020.03.032

Moustafa, M. A. M. (2018). A multimodal analysis of the depiction of Sisi in the 2014 presidential elections campaign in Western online newspapers. *Middle East Research Journal*, *44*(2), 1-20.

Mulderrig, J. (2018). Multimodal strategies of emotional governance: A critical analysis of 'nudge' tactics in health policy. *Critical Discourse Studies*, *15*(1), 39-67. https://doi.org/10.1080/17405904.2017.1382381

National Police Chief's Council. (2021, February 25). Update on Coronavirus FPNs issued by police. *NPCC*. https://news.npcc.police.uk/releases/update-on-coronavirus-fpns-issued-by-police

NHS Providers. (2020). The Impact of COVID-19 on Mental Health Trusts in the NHS. https://nhsproviders.org/media/689590/spotlight-on-mental-health.pdf

Nikolaou, A. (2017). Mapping the linguistic landscape of Athens: The case of shop signs. *International Journal of Multilingualism, 14*(2), 160-182. https://doi.org/10.1080/14790718.2016.1159209

Office for National Statistics. (2019). Occupation at UK level by sector, industry, age and ethnicity. https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/adhocs/10663occupationatuklevelbysectorindustryageandethnicity

Office for National Statistics. (2020a). Coronavirus and employment for parents in the UK: October to December 2019. https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/coronavirusandemploymentforparentsintheuk/octobertodecember2019

Office for National Statistics. (2020b). Employee earnings in the UK: 2020. https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/earningsandworkinghours/bulletins/annualsurveyofhoursandearnings/2020

Office for National Statistics. (2021a). Employment in the UK: March 2021. https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/bulletins/employmentintheuk/march2021

Office for National Statistics. (2021b). Personal and economic well-being in Great Britain: January 2021. https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/bulletins/personalandeconomicwellbeingintheuk/january2021

O'Malley, P. (2012). *Risk, uncertainty and government*. Routledge.

Patel, J. A., Nielsen, F. B. H., Badiani, A. A., Assi, S., Unadkat, V. A., Patel, B., ... & Wardle, H. (2020). Poverty, inequality and COVID-19: the forgotten vulnerable. *Public health*, *183*, 110-111. https://doi.org/10.1016/j.puhe.2020.05.006

Peters, G. J. Y., Ruiter, R. A., & Kok, G. (2013). Threatening communication: a critical re-analysis and a revised meta-analytic test of fear appeal theory. *Health psychology review*, *7*(sup1), S8-S31. https://doi.org/10.1080/17437199.2012.703527

Proulx, M., & Shepatin, S. (2012). *Social TV: how marketers can reach and engage audiences by connecting television to the web, social media, and mobile*. John Wiley & Sons.

Ransing, R., Ramalho, R., Orsolini, L., Adiukwu, F., Gonzalez-Diaz, J. M., Larnaout, A., ... & Kilic, O. (2020). Can COVID-19 related mental health issues be measured?. *Brain, behavior, and immunity*, *88*, 32-24. https://doi.org/10.1016/j.bbi.2020.05.049

Ruiter, R. A., Kessels, L. T., Peters, G. J. Y., & Kok, G. (2014). Sixty years of fear appeal research: Current state of the evidence. *International journal of psychology*, *49*(2), 63-70. https://doi.org/10.1002/ijop.12042

SAGE. (2020, March 22). Options for increasing adherence to social distancing measures. *GOV.UK*. https://www.gov.uk/government/publications/options-for-increasing-adherence-to-social-distancing-measures-22-march-2020

Santi, L., Golinelli, D., Tampieri, A., Farina, G., Greco, M., Rosa, S., ... & Ferrari, R. (2021). Non-COVID-19 patients in times of pandemic: emergency department visits, hospitalizations and cause-specific mortality in Northern Italy. *Plos One*. https://doi.org/10.1371/journal.pone.0248995

Sasaki, S., Kurokawa, H., & Ohtake, F. (2020). *Short-term responses to nudge-based messages for preventing the spread of COVID-19 infection: Intention, behavior, and life satisfaction*. Graduate School of Economics and Osaka School of International Public Policy (OSIPP) Osaka University Discussion Papers In Economics And Business, 20, 1-31.

Serafini, F., & Clausen, J. (2012). Typography as semiotic resource. *Journal of Visual Literacy*, *31*(2), 1-16. https://doi.org/10.1080/23796529.2012.11674697

Sidley, G. (2021, March 23). A year of fear. *The Critic*. https://thecritic.co.uk/a-year-of-fear/

Singh, T., & Newby, D. E. (2020). Is the fear of disease worse than the disease itself? *Heart*, *107*(2), 91-92.

Slavin, S., Batrouney, C., & Murphy, D. (2007). Fear appeals and treatment side-effects: An effective combination for HIV prevention?. *AIDS care*, *19*(1), 130-137. https://doi.org/10.1080/09540120600866473

Thaler, R., & Sunstein, C. (2009). *Nudge: Improving Decisions About Health, Wealth and Happiness*. Penguin.

Valsiner, J. (2001). Process structure of semiotic mediation in human development. *Human Development*, *44*(2-3), 84-97. https://doi.org/10.1159/000057048

van Dijk, T. A. (2012). A note on epistemics and discourse analysis. *British Journal of Social Psychology, 51*(3), 478-485. https://doi.org/10.1111/j.2044-8309.2011.02044.x

van Nguyen, H., & Gruba, P. (2019). Construction of risk in government advertising: A case study of Operation Sovereign Borders video advertisement. *Discourse, Context & Media, 30*, 100298. https://doi.org/10.1016/j.dcm.2019.04.004

Venuleo, C., Gelo, C. G. O., & Salvatore, S. (2020). Fear, affective semiosis, and management of the pandemic crisis: COVID-19 as semiotic vaccine. *Clinical Neuropsychiatry*, *17*(2), 117-130. https://doi.org/10.36131/CN20200218

Weiss, M., Kolbe, M., Grote, G., Spahn, D. R., & Grande, B. (2018). We can do it! Inclusive leader language promotes voice behavior in multi-professional teams. *The Leadership Quarterly*, *29*(3), 389-402. https://doi.org/10.1016/j.leaqua.2017.09.002

Wilkins, A. (2013). Libertarian paternalism: policy and everyday translations of the rational and the emotional. *Critical Policy Studies*, *7*(4), 395-406. https://doi.org/10.1080/19460171.2013.784622

Worthington, M., & van Oers, B. (2017). Children's social literacies: Meaning making and the emergence of graphical signs and texts in pretence. *Journal of Early Childhood Literacy*, *17*(2), 147-175. https://doi.org/10.1177/1468798415618534

Wu, J., Mamas, M. A., Mohamed, M. O., Kwok, C. S., Roebuck, C., Humberstone, B., ... & Gale, C. P. (2020). Place and causes of acute cardiovascular mortality during the COVID-19 pandemic. *Heart*, *107*(2), 113-119.

Yao, Y., & Zhuo, Y. (2018). A Multimodal Discourse Analysis of the Promotional Video of Hangzhou. *English Language Teaching*, *11*(10), 121-131. https://doi.org/10.5539/elt.v11n10p121

Appendix

List of the four adverts selected for analysis:

Phase 1:
The Telegraph (2020, March 25). *Stay home, save lives' government advert urges Britons to protect NHS*. YouTube.
https://www.youtube.com/watch?v=_cK02XwU0gM

Phase 2:
Department of Health and Social Care (2020, July 6). *Enjoy summer safely*. YouTube.
https://www.youtube.com/watch?v=jiYx2L3yTu0

Phase 3:
Department of Health and Social Care (2020, December 5). *Hands. Face. Space. | Sliding Doors*. YouTube.
https://www.youtube.com/watch?v=saLX0R_wVKg

Phase 4:
Department of Health and Social Care (2021, February 2). Stay At Home | Stop the Spread. YouTube.
https://www.youtube.com/watch?v=g1VRA9rMmFY