Fear and Coughing in Toronto: 
SARS and the Uses of Risk

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Abstract: The 2003 SARS outbreak in Toronto offers an opportunity to study the ways risk has come to form a rhetorical basis for public discussions of morality in contemporary Canadian society. This paper combines Ewald's precautionary description of risk functionality with Douglas' pollution theories to analyze quantitative and qualitative data taken from a print media content analysis. Precautionary conceptions are pre-eminent at the outset of the story, while pollution formulations become more important when the international community accuses Toronto of hosting a plague. This shift in emphasis between the two risk formulations is linked to a change in story frames from a public-health focus to an economic one. The paper concludes that risk is defined, redefined, and deployed as a moral tool and agent of social control by members of Canada's information elite.

Résumé: La flambée de SRAS a Toronto offre l'opportunité d'étudier la façon dont le langage du risque est devenu la base de discussion sur la moralité dans la société moderne canadienne. Cet article rassemble les théories du risque précautionneux d'Ewald avec les théories de la pollution de Douglas afin de procéder à une analyse d'une analyse de contenu quantitative et qualitative de journaux. Quand les journaux Canadiens présentent les premières discussions sur le SRAS, c'est en termes précautionneux. La discussion se fait ensuite de plus en plus en termes de pollution lorsque la communauté internationale accuse Toronto d'héberger une peste. Le changement entre ces deux formulations du risque est lié au fait que ce qui débute comme une histoire à propos de la santé publique devient une histoire économique. Cet article fini par conclure que le risque est défini, redéfini, et utilisé à la fois comme un outil moral et un agent de contrôle social par les membres de l'élite de l'information Canadienne.

Keywords: Content analysis; Newspapers; Agenda setting; Mass media effects; Institutional knowledge management

Toronto’s outbreak of severe acute respiratory syndrome (SARS) in the early spring of 2003 was unprecedented in a number of ways. The virus that attacked the city was entirely unknown—a medical mystery. Both local and international reactions to this mystery were unusually ferocious. Toronto health officials quar-
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The World Health Organization (WHO) issued the first travel advisory of its kind, adding Toronto to a list that included Hong Kong, Vietnam, Taiwan, Beijing, and the Chinese province of Guangdong. Five months later, at the end of the outbreak, 44 people had died in a city of over 2.5 million (Statistics Canada, 1999): a number slightly less than the traffic fatalities in the city during the same period (Toronto Police, 2003). In the larger news context, the story and disease arrived in Toronto as Baghdad was surrounded and fell to U.S. forces, yet by the second week of coverage, SARS was sharing space with, or displacing, Iraq stories from the front page. Indeed, media analysts have suggested that the Toronto newspaper coverage of the virus reached “saturation levels” during this period.1 At critical points in the outbreak the papers printed as many as 25 SARS articles in a day (Drache, Feldman, and Clifton, 2003).

In hindsight—always a privileged position—it is easy to dismiss the radical uncertainty of the moment as hysteria, and so to discount the media coverage and medical response as overreactions. A less anachronistic reading, however, not only recalls the unknown terror of the time, but takes into account the plague’s symbolic value. As a public-health crisis, SARS resonated with ongoing debates over the contours and content of Canadian society. It was an iconic story in that it recounted an assault on Canada’s hospitals. These totems of the government’s role in health care provision are central to Canadian narratives of community and identity (Hacking, 2003). Their pollution, that is to say their shift from being places of healing to sources of disease, attacked the Canadian sense of self as expressed through medical institutions and health policy. As a risk to the physical and symbolic health of the community, then, SARS was indeed a major news event.

Tracing how the Globe and Mail dealt with these physical and moral dimensions—which story frames were chosen and which individuals or groups were held accountable—reveals the complex political and social functions risk has acquired in contemporary Canadian society. The following pages present a case study in the risk discourses deployed by journalists and their sources as they attempted to shape community actions and reactions to the disease. I identify two distinct approaches to the reporting of risk during the SARS outbreak: namely, the logics of precaution and pollution. These two ways of thinking about risk ebbed and flowed as the media reported the virus’s effects on the city’s health system, its private corporations, and the lives of its citizens.

Globe and Mail journalists defined SARS events as not only newsworthy, but risky, based on their membership in a social and information elite (cf. Ericson, Baranek, & Chan, 1987). They negotiated authoritative risk definitions and story frames within the closed circle of their relationships with government institutions and private enterprise. A frame focuses “on what will be discussed, how it will be discussed, and above all, how it will not be discussed” (Altheide and Michalowski, 1999, p. 478). Like its metaphoric model, a story frame forms the borders of a news story, telling reporter and audience who should be consulted for facts, and what sorts of facts and solutions those sources should offer. During the course of the SARS coverage the dominant story frame shifted from precautionary to pollu-
tion logics, reflecting contests within the network of reporters and sources over just what risks SARS really posed.

After the WHO issued a worldwide travel advisory against Toronto, the virus remained newsworthy, but it was no longer framed as a mysterious medical emergency against which precautions might be taken. Instead, SARS was re-imagined as a threat to Canada’s economic machine. In this new form, medical precautions were downplayed, and pollution narratives, emphasizing in-groups and out-groups, came to the fore. Group solidarity, achieved through economic activity, came to be the preferred solution to a plague attacking not hospitals, but the hospitality industry. As the contests within the information elite shifted concerns from public health to restoring consumer confidence, so too did the way SARS was conceptualized in the media. Both before and after the advisory, the media coverage sought to define risky places, people, and behaviours as part of an emergent project to create community consensus and order in the face of a plague. This flexibility in the form and function of risk thinking as a tool of social governance is the central topic in the argument that follows.

**Methodology: Interacting risk logics**

A multifaceted analytic model is required in order to untangle the concepts of purity, group membership, epidemiology, and morality that are entwined in the SARS coverage. What I will call precautionary and pollution logics originate with Mary Douglas’ observation that “sin/taboo rhetoric is more often used to uphold the community, vulnerable to the misbehaviour of the individual, while the risk rhetoric upholds the individual, vulnerable to the misbehaviour of the community” (1992, p. 28).

In my model, what Douglas terms “risk rhetoric” becomes precautionary logic. Precautionary logic, the bedrock of epidemiological approaches to disease, is interested in the eradication of risk. It is concerned primarily with policing individuals by encouraging or coercing them to internalize risk management schemes and precautionary norms. On the reverse of the coin, I have renamed what Douglas calls “sin/taboo rhetoric” as pollution logic. Pollution logic is interested in containment and primarily concerned with building a sense of solidarity when the community is threatened with pollution.

Precautionary risk logic demands that individuals self-diagnose and regulate their behaviour for the good of the community. To do otherwise is to behave immorally. Pollution risk logic, on the other hand, establishes who is moral and therefore a group member. By focusing on membership as enacted through cleansing rituals or claims about the cleanliness of other groups, pollution logic defines outsiders by their risky and thus immoral actions and opinions. Pollution risk logics co-existed with calls for increased precautionary measures throughout the coverage. From the beginning, the media employed risk logics and rhetoric that both set out individual responsibilities (precaution) and defined group membership (pollution).

To better comprehend how precautionary and pollution risk logics operated during the plague, I performed a detailed quantitative and qualitative analysis of
the Globe and Mail coverage of SARS. Drache et al. (2003) compare the Globe’s coverage to that of its rival broadsheet the National Post and the local daily broadsheet the Toronto Star. Their assessment that the Globe apportioned blame between federal and provincial agencies more equitably than its rivals suggests that, for the SARS story, it is a middle ground example of print coverage. Given its centrist editorial position regarding political responsibility for SARS and its general reputation as Canada’s newspaper of record, the Globe and Mail presented the best possible choice for a single source analysis.

The analyzed period ran continuously from Monday, March 17, 2003, to Sunday April 27, 2003. These seven weeks represent the initial phase of the story, following it from the first deaths through hospital closures and ending after the WHO lifts its travel advisory against the city. It is critical to examine both the beginning of the news cycle and the travel advisory, for my analytic hypothesis predicts different conceptions of risk will be invoked as the media deals with these developments.

In total, 242 stories were analyzed. Stories containing the text “SARS” or “atypical pneumonia” were selected from all sections of the newspaper, including letters to the editor. The articles were found using the online Canadian Periodical Index (CPI) Infotrac system. Random samples from the story lists generated out of CPI were then verified against microform originals to confirm the lists were complete. The Toronto edition of the paper was taken as the standard. My coding system tracked a number of technical and thematic elements in the stories: specifically, the number of political, medical, business, bureaucrat, and private sources directly quoted in each story. Instances of accountability, pollution, hand washing, and qualification were also tracked.

**SARS and the framing of risk**

Risk is a concept manifestly associated with diseases such as SARS, and epidemiology generally. Epidemiologists and public-health workers spend their days calculating the risk of infection and trying to minimize it. In this medical setting, risk is conceived of as a calculable entity, a knowable number generated by multiplying the frequency, or likelihood, of an untoward event occurring, by the severity of the consequences of that event. Epidemiology’s association with science, and the deadly severity of the diseases it deals with, have guaranteed that its assessments are taken seriously by the media, if not by individual citizens (cf. Irwin, 2006). Epidemiological calculations of infection probabilities represent the overt, precautionary, connection between SARS and risk. This is not, however, the only tie between the virus and risk. Risk is both capable of and used to accomplish much heavier social work than simply predicting infection patterns and chains of transmission.

In a broader sense, sociologist Ulrich Beck (1999) contends that risk has become our contemporary era’s primary social and economic commodity, and that risk definition has become the epoch’s major political flashpoint. Anthropologist Mary Douglas (1992) has characterized risk as a pervasive modern code, a rhetorical substitute for activities and things a community considers dangerous or
morally polluting. Recent work drawing on these two perspectives suggests that risk has come to function as the basis of contemporary moral discourse (Ericson & Doyle, 2003; Ewald, 2002). This pollution discourse is seen as operating at a number of levels to produce social order and community consensus. Risk is, among other things, a framing device that defines contemporary society’s moral issues, setting a rhetorical format for the presentation and discussion of solutions (Adams, 1995; Garland, 2003; Hunt, 2003).

When the word “risk” entered the English language in the first half of the seventeenth century it was a neutral noun, an expression of mathematical chance associated with the hazards of commercial navigation (Douglas, 1992). As merchant mariners took up the term for use in business, they were charting a course into a new era of prudence and insurance (Hacking, 2003). From a neutral assessment of a particular voyage’s odds of success, the term “risk” shifted to include a sense of moral obligation to think ahead and make contingency plans. This is the course we continue to hold in the contemporary era. Now risk is rarely neutral, and thinking ahead and buying insurance have become the norm. Where risk’s original definition “excluded the idea of human fault and responsibility” (Lupton, 1999, p. 5) today the term is wielded with a near universal negativity, and an eye to assigning blame and responsibility. We do not, as Garland notes, “talk of people being ‘at risk’ of winning the lottery” (2003, p. 67). To define a risk, to give it voice, is generally to make a negative moral assessment about someone or their actions.

The statement “Leaving your home during an epidemic is risky” is easily reformulated as “Leaving your home during an epidemic is wrong.” As an example, the Globe quotes a senior public-health bureaucrat delivering a positive version of the same statement: “‘Staying isolated is the right thing to do for anyone who is feeling unwell for any reason,’ said James Young, Ontario’s Commissioner of Public Safety” (Galloway & Perkins, 2003; emphasis added).

Young delivers a moral assessment of how individuals should be managing their personal risk profiles. Readers are to internalize what is right and wrong in this particular situation and govern themselves accordingly. Placing the community at any risk by venturing out is not the right thing to do. This exhortation to proper behaviour is part of a larger moral mechanism with which the state and individual citizens judge one another’s behaviour in thinly veiled terms of risk (Lupton, 1999). Where the dominant discourse of moral persuasion was once danger, it is now risk. As Hunt notes, since the nineteenth century, “morality has come to function through proxies, not its own voice, but in and through other discursive forms, the two most important and closely related being the discourses of ‘harm’ and ‘risk’” (Hunt, 2003, p. 166).

**Shifting from precaution to pollution**

To many it seems intuitively true that most people, like epidemiologists, manage the risk they encounter in terms of probabilities. We add up the various factors, multiply the frequency by the severity, and make our decision. This rationalist numeric conception of risk works well for insurance agencies and government
departments who deal in statistics and the laws of large numbers. Individuals, however, often find themselves unable or unwilling to assign values (monetary or otherwise) to the loss of objects as diverse as an original work of art, the planet’s biodiversity, or a first-born child. When insurance companies or government agencies set values based on charts and tables, many people disagree with, or simply disregard proposed safety measures, using alternative knowledges to arrive at very different risk assessments. As Douglas notes, there are factors other than rational calculation involved in defining risk in a moment of uncertainty: “Anger, hope, and fear are a part of most risky situations” (Douglas, 1992, p. 12). In the absence of rational data, in the realm of uncertainty where most of us live, we are in a world “not of calculation, but of judgement” (Adams, 1995, p. 26). We often purposefully disregard institutional calculations of risk, relying instead on our own instincts, past experiences, and tolerances for what is, and is not, risky. The tension between the rational calculative definition of risk and its emotional, social form (cf. Adams, 2003) lies at the heart of what François Ewald (2002) has termed the precautionary principle.

On the surface, the precautionary principle assumes that risk is a calculable entity (see Lupton, 1999). It sees risks as existing independently in the world. It assures us they can be identified and to some extent quantified (Adams, 1995). It further promises that effective preventative programs can be instituted. However, despite its mathematical vocabulary, the precautionary principle is not grounded in rationalist, objective ways of seeing the world. One of its primary missions is to prevent the occurrence of incalculable severity, like the loss of a Van Gogh, the rain forest, or a child. The inevitable failure involved in applying mathematics to the incalculable requires the precautionary principle to acknowledge other emotional, judgmental ways of viewing the world. It admits evidence not just from objective reality, but from people’s fears, from the way they perceive their world to be risky.

Filtered back through the rhetoric of mathematic probabilities, this tendency to think apocalyptically becomes a search for worst-case scenarios. The principle demands that, when faced with risks, even (paradoxically) inconceivable ones, we deal with worst-case scenarios (Beck, 1999; Haggerty, 2003). This is an appeal to the subjective side of risk; this is the grey area where societal anxieties and fears attach themselves to an act or object and make it a risk (Hunt 2003, p. 175). We are, after all, speaking of the worst things the human imagination can conceive of.

The literature describes the precautionary principle as growing out of neoliberal fiscal and social policies (Garland, 2003; Simon, 2002). It is a bureaucratic model that emphasizes the elimination of risk. Under its auspices, the prevention of a disease, an accident, or a hazardous condition has become the new norm (Ewald, 2002). Following the norm, government agencies of all stripes have applied their bureaucratic muscle to creating precautionary programs. As associate deputy minister of defence Margaret Purdy formulates the principle: “[T]hinking the unthinkable has become mandatory” (Purdy, 2003). Success for
these programs is measured in lowered accident rates and, less tangibly, through improved levels of public caution and respect for precautionary thinking. Donald Low, chief microbiologist at Toronto’s Mount Sinai Hospital and a source the Globe quoted frequently when reporting on SARS, sums up the precautionary goal: “All I want to hear a month from now is how we over reacted” (Abraham, 2003b).

In the case of SARS, we see this kind of logic applied by public-health bureaucracies to the eradication of an unknown virus. Early in Toronto’s experience with the disease, the local public-health authority’s approach to SARS matched the international response. Toronto’s medical officer of health, Dr. Sheela Basrur, told a news conference: “In order to preserve the integrity of public services, we need to stamp this bug out, and in order to do that, we have to put a ring of containment around areas where we know these transmissions have occurred” (Priest, 2003). Along with Basrur’s visualization of SARS as a threat to public services, and therefore to the community itself, we hear the hard line of the precautionary principle demanding that risk be stamped out.

Early in the outbreak, the Toronto office of Public Health (TPH) shares this precautionary goal with the World Health Organization (WHO). A month further into the story we see a softening of the TPH position as pollution risk logic comes to the fore. One of the Globe’s senior public-health reporters, André Picard, asks:

Is SARS here to stay, or can it be eradicated?

This is not only a key scientific question, it is a philosophical difference that, in large part explains why the World Health Organization has issued an unprecedented warning about travel to Toronto.

WHO officials remain convinced that severe acute respiratory syndrome can be eradicated and, as a result, feel that they need to pull out all the stops.

Officials at Health Canada and the U.S. Centers for Disease Control and Prevention, on the other hand, have taken the view that SARS is a new disease that is here to stay, but that can nonetheless be controlled. (Picard, 2003)

The passage illustrates not just the rhetoric that accompanies precautionary risk logic, but the stress that SARS puts on bureaucracies operating under a precautionary mandate. The near impossibility of controlling knowable risks, and the absurdity of eliminating incalculable risks, weighs heavily on bureaucracies devoted by their precautionary missions to accomplishing just these tasks. Placed under enough stress by their tasks, even agencies like the public-health units will retreat from exclusively precautionary reasoning. Picard’s article notes a shift from eradication to containment in the positions of Canadian public-health agencies, reflecting a shift from precautionary to pollution risk logics. Indeed, Picard shifts to portray the WHO as alarmist for continuing to follow a robustly precautionary program. Risk is still the primary discourse, but the logic and rhetoric underlying its formulation have changed. The article advocates drawing containment circles around risky groups of polluted people, not direct precautionary actions by individuals to eradicate the threat.
In noting the shift to pollution logic I am not implying a dichotomy. The *Globe* article reminds us that, even as we acknowledge containment as the more appropriate strategy, the new virus can “nonetheless be controlled.” On the one hand there are pollution claims that disease is an unavoidable part of life and that we can only do our best to contain its more virulent forms, minimizing the harm it does. On the other are precautionary claims that diseases such as polio or smallpox can be controlled, tamed, or even eliminated completely. To precautionary thinkers, disease and its harms need not be part of human experience. Both logics, pollution and precaution, are present in the article. However, in a time when the city is threatened with contagion, pollution logics and the rhetoric of containment take precedence over those of eradication.

Creating and fostering a sense of community is the primary emphasis of pollution risk logic. When threatened with pollution, the group responds by emphasizing its margins, making sharper delineations of who is, and who is not, a member. As it is concerned with containment, not eradication, pollution logic looks to who is polluted, to shoring up the group’s sense of solidarity when faced with a threat. In contrast, precautionary logic focuses on what is to be done, on the individual’s responsibilities given the existing threat and a worst-case scenario. Both ways of thinking about risk are implicated in emergent social control programs. While precautionary logic looks to eradicate risk by policing the actions of individuals, pollution logic builds consensus around risks, drawing a charmed circle of containment around the group.

A nosocomial outbreak of atypical pneumonia unleashed exhortations to “wash your hands” in the form of public-health advertisements, editorials, news stories, and signs taped to restroom mirrors across the city. These constant acts of purification, along with a couple of days off work in voluntary quarantine for anybody with flu-like symptoms (Saunders, Partridge, and McNish, 2003), take on the appearance of a ritual exorcism of the pollution. They can have no real bearing on the course of a disease confined to hospitals, but they are about group cleanliness and solidarity. Who would dare not comply with the rituals? Only those, as Douglas (1992) reminds us, who don’t care for the community.

**Reporting risk**

Recent history has seen precautionary risk logics come to dominate not just bureaucratic agencies, but the media that reports on them. Precautionary principle stories, like the opening phase of SARS, revolve around the media’s hunt for culpable parties and accountability from authorized agencies (Ericson et al., 1987; Fishman, 1980). Douglas aptly summarizes the media stance as it pursues accountability in an era of risk and precaution: “How much risk [exists] is a matter for the experts, but on both sides of the debate it has to be taken for granted that the matter is ascertainable. Anyone who insists that there is a high degree of uncertainty is taken to be opting out of accountability” (1992, p. 30). Opting out is unacceptable by media standards, given that one of their primary tasks is to call for accountability from various social actors. The primary targets of these calls for reform are existing bureaucracies (Ericson et al., 1987).
The form this accountability reporting takes is strongly influenced by precautionary approaches to risk. Both bureaucracies and the media that report on them prefer to think of risk in probabilistic terms. For the bureaucracies, scientific rhetoric and numbers fulfill their requirements for standardization and precise quantities. For the media, precautionary formulations yield the numbers required to generate the binaries of good and bad, righteous and unrighteous, equitable and arbitrary that populate their morality play accounts of the world. With precise probabilities comes the ability to target calls for reform and accusations of blame. For the media, “[t]he charge of causing risk is a stick to beat authority, to make lazy bureaucrats sit up, to exact restitution for victims. For those purposes danger would once have been the right word, but plain danger does not have the aura of science or afford the pretension of a possible precise calculation” (Douglas, 1992, p. 24; original emphases).

Analysis of the Globe confirms a predictable pattern of media demands for governmental accountability and reform at all levels. Drache et al. note in their study that various news outlets covering SARS tended to censure the actions or reactions of one level of government more than another. While other print outlets were shown to have consistently criticized a single tier of politicians, “[t]he Globe and Mail apportioned the blame more equally between the Provincial and Federal governments” (Drache et al., 2003, p. 10). Although my work supports this general conclusion, it is important to note that the Globe also censured international and local governments and bureaucracies. The newspaper’s demands for accountability from international entities, such as the central government of the People’s Republic of China and the WHO, highlight the tensions between pollution and precautionary logics.

Figure 1 tracks Globe and Mail stories containing criticism or advocating for reform of the Chinese government and the WHO. The data indicate a low-level but continuous effort on the newspaper’s part to police the actions of the Chinese government. Over the same period, there is a single spike in criticism of the WHO. Unsurprisingly, the spike coincides with the imposition of the WHO’s travel advisory against Toronto; but why a spike from nothing? We could posit an explanation based on Canada’s yearly $10.3-million contribution to the WHO (WHO, 2003). Perhaps the newspaper, true to media form, is attempting to discipline the WHO on behalf of its taxpaying readership. This is a tenuous start given the limited scope and period of the disciplining. It also leaves us with little explanation for the ongoing efforts at disciplining China. Although Canadian aid money does reach projects in China, it seems unlikely this would motivate coverage.

Media studies literature suggests the Globe is too tenuously linked to either entity for it to be performing its routine accountability work. The literature posits that the media construct for the governing elite “a version of ‘the public’ who are addressed and invoked, but never actually consulted” (Critcher, 2003, p. 138). That is to say, routine media calls for accountability and reform are conceived of and published out of a closed circle encompassing the bureaucracy and the media. The public is invoked in name only, and is in fact a visualization of the media, pre-
sent to an offending bureaucracy. In this mediated way, the government comes to know of “public” concerns and initiates reforms to deal with them.

Risk, accountability, and censure
To develop this argument, it will be helpful to examine the cases separately, beginning with China. From a precautionary risk logic perspective, disciplining China confirms yet again that there are right ways and wrong ways of dealing with plagues: scientific, precautionary ways like ours, and China’s way. In continuing to beat a distant, insensible government for its lack of precaution, the *Globe* is also employing pollution logic to set up an in-group and an out-group.

An early story provides an example:

The [WHO] team has also discovered that earlier reports from China significantly underestimated the incidence of the disease . . .

Health officials worldwide have been both puzzled and perturbed that China did not report the outbreak to international health authorities. (Abraham, 2003a)

From a precautionary standpoint the article is damning indeed. The cardinal rules of the precautionary principle demand that risk managers overestimate consequences and invoke worst-case scenarios. Other articles policing China over the course of the story, however, do more than chastise the People’s Republic for its failures to follow Western bureaucratic precautionary norms. These articles employ pollution conceptions of risk to cast the Chinese as infected outsiders. China’s transgressions here, and in many of the subsequent articles, include the great bugbear of Western journalists: secretiveness. And yet the charge of secretiveness applied to China seems facile. China’s record of not adhering to or respecting Western journalistic norms is a matter of well-known historical record. And yet, with a plague threatening to boil out of the country, it becomes a salient shortcoming once again.
This is a reversal in editorial position, given that *Globe* articles written two years before, at the time China was proposed for membership in the World Trade Organization, implied the country’s secretive behaviour was on the wane. The articles at that time went as far as using “open door” metaphors (Editorial, 1999). Now, faced with SARS, things are different. Secretiveness—which is in fact a major feature of Western political and journalistic life—is taken to be a risky and immoral attribute, and quite possibly the cause of pollution, in the Chinese. The continuous low-level disciplining of the Chinese government from the beginning of the SARS news cycle is an instance of pollution risk logic in action. It is an attempt to establish who is *us* and *clean* and who is *them* and *dirty*. At the same time, it provides this definition of who has the plague, and it illustrates what not to do—governments cannot bury their heads in the sand, they cannot be secretive.

Having established a risk logic explanation of the censuring of the Chinese government, it is important to examine the *Globe*’s treatment of the WHO. A short but fierce round of media censure during the period of the travel advisory presents an interesting clash of precautionary and pollution logics. The data reveal an absence of even minor levels of censure, as compared to efforts to hold local Toronto health care authorities blameworthy, which speaks to the WHO’s unassailable status in the precautionary bureaucracy.

Many articles early in the outbreak invested the WHO with the ultimate authority to determine precautionary norms. The *Globe*, in fact, used the WHO to create a model of precautionary prudence, citing WHO actions as exemplary and using them to chastise various levels of Canadian government. This visualization of the WHO made it difficult to reverse positions when the agency attacked Toronto with a travel advisory. That being the case, precautionary logics, the bedrock of the WHO’s authority, were not available to the media when censure was required. Instead, the paper employs pollution logics to determine who are the good and who are the shoddy scientists. Canadians, naturally, are judged to be more pure. Unlike the continuous chastising of the Chinese government, there is no precautionary call for action, no indication of what to do, or not to do. How could anyone attack the WHO’s position on precaution?

Taking this to be the media’s routine work when calling for reforms, the Chinese government and the WHO are simply out of the *Globe*’s range. It seems unlikely anyone in the Communist party leadership would consult the *Globe* for a representation of the public’s concerns at its handling of SARS. The WHO, on the other hand, is a supra-national body with little interest in local politics other than how they affect its worldwide legitimacy. They are not afraid of a public the *Globe* can conjure up as disagreeing with them. A more compelling explanation of the calls for accountability from the WHO and China centres on risk.

**Pollution, race, and responsibility**

The *Globe*’s use of pollution logics to establish in- and out-groups, especially in China’s case, had consequences in later stories dealing with Chinese Canadians. As Douglas notes, despite the sophisticated scientific understandings of disease we have attained in contemporary times, “we still seek explanations based on
behaviour, ethnicity, or social stereotypes" (1992, p. 35). There were a number of articles written during the outbreak nominally attempting to prevent Torontonians from employing racial profiles to determine SARS risk factors—that is to say, to get them to sit next to Asian people on the subway and eat at Chinese restaurants. Unfortunately, the paper’s general use of pollution risk logic when dealing with the Chinese government set a counter tone to these well-meaning articles. China was *them*, not *us*. Even elements within some articles pushed against the ostensibly goal of reducing racial profiling and fear.

*Globe* reporter Caroline Alphonso interviews a Chinese-Canadian mother for such an article in the third week of the SARS outbreak.

Ms. Lai, a Toronto resident, understands the concern among many Canadians. The number of SARS cases in Canada climbs higher with each passing day, especially in Ontario. Ms. Lai takes precautions to avoid infection. She refuses to take her youngest child out of the house.

“This is a very civilized country, but I understand everyone is sensitive and nervous,” she said. “I don’t blame them.” (Alphonso, 2003a)

Here we see what precautionary logic is telling the individual to do—take precautions—feeding into the pollution logic of *who* we are. Canadians are sensitive and nervous about SARS, and no one can blame them for being so, not even Chinese Canadians whom no one else will sit next to.

An inverted sense of racism and pollution logic shows up in a short series of stories done on Torontonians denied embarkation on a cruise ship.

Hersh Goldin found out yesterday that just living in Toronto is enough to make the outside world treat him like a leper.

A cruise company barred the investment adviser and his family from taking a dream vacation to Alaska merely because Toronto is on an international list of places with SARS. . . .

“This is ridiculous,” said Robert Grossman, who is among those barred. “Canadians shouldn’t be forced to put up with this. This will go down in history as a completely mishandled situation. You would think they would be trying to dispel the situation rather than amplifying it.” (Immen & Rusk, 2003)

Here we have plaintive Canadians—*us*—calling for ethnic, if not racial justice. The finger of pollution has been pointed at Canada, a circle of containment drawn around us by others. (See Bush, 2003, for a feature-length historical account of polluted communities reacting to other people’s accusations and fear.) We as a group should be standing up for ourselves, telling people we are not polluted. While it once made precautionary sense that civilized Torontonians were nervous around Asian Canadians, no precaution is required when it comes to European Canadians taking a holiday. Precautionary logic is being denied completely, and pollution logic is being applied to forge a sense of Canadian identity as unpolluted.

Balancing these near-exclusively pollution-based stories, precautionary themes of personal responsibility dominated in other coverage. Health authority
directives encouraging or coercing individual compliance with precautionary programs were reproduced as both paid, full-page advertisements and coverage of the story. Reporter Gloria Galloway writes a story following the arrest of two quarantine breakers:

One of the [quarantine breakers] was drawn to the attention of health officials by a member of the public. The other was singled out by the York Regional Police.

When asked if this meant people were being encouraged to inform on their neighbours, [Ontario Commissioner of Public Health] Dr. D'Cunha said: “I wouldn’t say encourage, and I wouldn’t say discourage.” But rather than open a snitch line, he said he wanted “to appeal to people’s civic sense of duty” . . .

SARS is a serious illness, [York Region medical officer of health] Dr. Kassam said, and if people do not take the request to isolate themselves seriously, “they’re not only putting their families at risk, but their putting society at risk.” (Galloway, 2003a)

In a follow-up story the next day, Galloway becomes an active participant in the surveillance and policing of not just a fellow citizen, but a source quoted in her own story.

The restricted access and quarantine that applies to anyone who visited the [nursing] home between March 26 and 29 didn’t stop 79-year-old Bill McLaughlan from using his walker to hobble outside for a smoke.

“Nobody said they were closed down that I know of,” Mr. McLaughlan said . . .

Told about Mr. McLaughlan’s cigarette break, Hanif Kassam, the medical officer of health in York Region, said he had asked police to ensure that residents remain quarantined. (Galloway, 2003b)

In this pair of stories we feel not only the heavy moral hand of risk, but our neighbours’ eyes upon us. If the cops or the newspaper reporter don’t catch you, your seatmate might. Responsibility elements like these, emphasizing what it is one does in risky situations, reflect an almost purely precautionary logic. They are designed to inform individual readers and produce individual readers that inform on one another.

Responsibility themes also worked in conjunction with pollution risk logic. Columnist Margaret Wente offers a definition of what it is to be a Canadian the day the WHO travel advisory is invoked. After detailing Singapore’s newly enacted SARS control measures, including massive fines and electronic bracelet surveillance for quarantine scoff-laws, she offers the following assessment:

Those who think [Singapore’s] measures are too intrusive for liberal-minded Canadians haven’t been listening to them. There’s a deep and universal hostility in this city to quarantine-breakers and anyone else who’s thought to be acting irresponsibly. Many people think these public menaces should be jailed. (Wente, 2003)

There are undoubtedly precautionary elements encouraging people to inform on their neighbours, but the emphasis is on a shared group outrage. Good Canadians
are those who are deeply hostile toward irresponsibility. We agree on who is part of our group and who should be cast into jail.

**From health to economics: Shifting frames and logics**

As SARS coverage began, the story was framed as a public-health issue. By April 23, the day the WHO issued its travel advisory, the frame had become one of political economy. As the media moved from visualizing SARS through a medical frame to visualizing it through an economic one, the preferred sources of information, and the range of options they presented as legitimate solutions, changed. When SARS was a medical story, public-health officials provided all of the substantive information and were allowed to propose or demand precautionary solutions. When it became an economic story, politicians and business leaders provided assessments and solutions.

The shift in SARS frames illustrates an important interaction between precautionary and pollution risk logics at a time when Toronto stood accused of pollution. That it occurred at all is remarkable indeed, for, as Ericson notes, “[O]nce the frame is established, there is a strong disinclination to consider information or alternative frames that do not seem to fit into the picture” (1998, p. 88). While the risk logic interaction is straightforward—pollution logics became pre-eminent, binding the community together in the face of a plague—the meaning behind the interaction is not as clear. This section considers why the story frame shifted from health to economic concerns.

Drache et al. posit a news cycle explanation in their assessment that “while the health voices never disappeared, the tone and substance of the coverage changed as the economic costs of the outbreak mounted” (2003, p. 8). Here the assumption is that the shift was motivated by mounting economic costs. This is not necessarily the case. Reporter Tara Perkins wrote the first economically themed story 20 days in advance of travel advisory. Her lead paragraph reads: “The SARS outbreak cost Toronto one of the top three conventions of the year yesterday and panicked tourism officials are predicting layoffs as the industry loses tens of millions of dollars” (Perkins, 2003). If the shift to an economic story frame was dependent on high economic costs, it seems unusual that 20 days would elapse before economically themed stories reached their peak; losses were not just mounting, but began at an incredible rate. In fact, at the time the convention was withdrawn, the dominant frame remained one of public health.

Figure 2 shows the number of stories containing an economic theme run by the *Globe* during the studied period. These data indicate that despite high initial economic costs (costs that continued to mount), the paper did not immediately change its focus to economic issues. There is evidence, then, that the shift from public-health to economic framing of the story was not, as Drache et al. imply, motivated by a sudden abundance of economic facts or by the search for a new angle. The economic facts and sources were there all along, and used occasionally as a theme, but were not the primary frame through which SARS was visualized. Instead, risk factors explain the shift.
Drache et al. continue their analysis, suggesting that “one of the negative roles the press arguably played in the SARS crisis was to politicize the crisis along partisan lines, drawing the spotlight away from health care workers and the more substantive health policy story” (2003, p. 9). It is somewhat perplexing that drawing the spotlight away from health care workers is considered a negative act. Presumably the argument is that frontline workers make for better, more personalized, more easily dramatized news copy. From the perspective of media formatting standards, then, perhaps the “real story” was the front-line workers. From a risk perspective, however, the newspaper’s decision to shift frames by quoting politicians on economic themes—politicians treating SARS like a “political football” (Editorial, 2003c)—is both morally defensible and predictable. To continue interviewing the frontline health care workers would be to continue with the public-health frame. Instead, faced with a citywide pollution, the media began interviewing those who could shift the frame away from health and precautionary logic.

Figure 3 compares the use of medical and political sources. Although the graph speaks to an increased focus on political sources over time, with peaks coinciding with the travel advisory, it does not capture the placement of those political voices within the articles. It was often the case during the travel advisory period that politicians opened news conferences or appeared in stories as the first quoted source. Their general role in these situations was to express an emotional outrage at the WHO’s decision and then cede the stage to medical personnel (Galloway, 2003c; Lewington & Rusk, 2003). The politicians were, as Toronto city councillor Olivia Chow describes her mayor’s speech, “good on the emotions, but not the facts” (Lewington, 2003). For the facts, the newspapers went back to medical personnel. The doctors, most of them public-health bureaucrats, provide impassioned arguments of their own, but using scientific rhetoric. As Douglas notes, “The predictable consequences of using science in politics is that both sides consult their
own scientific experts” (1992, p. 33). Ontario premier Ernie Eves expresses outrage on behalf of the community, saying of the travel advisory: “We were, quite frankly, sandbagged.” This political indignation voiced, the accustomed medical voices take over:

Donald Low, a mild-mannered microbiologist, said officials at the WHO are guilty of one of the worst transgressions possible for scientists: Being guided by political concerns rather than facts... 

Colin D’Cunha, Ontario’s chief medical officer of health, was similarly harsh, saying WHO officials should be ashamed of the lack of scientific rigour that went into a decision with broad economic and social implications. (Picard & Alphonso, 2003)

Figure 3: Medical and Political Sources Compared

Figure 4 adds more evidence that the frame shift was motivated by a pollution risk timetable more than the news cycle. The chart compares the use of government medical and private business sources over the studied period. Unlike politicians, business sources were never expected to comment on health care issues. Their assumed range of expertise ran to visualizing the effects of SARS on business and no further. Adding together the number of business and political sources (see Figure 3), we have a political-economic cohort that overbalances the medical personnel and their public-health perspective. These data suggest not just that the frame shift took place, but that it took place at a conspicuous time—a time when pollution logics, with their “us and them” rhetoric, were gaining pre-eminence.

At this point in the coverage, SARS is no longer a public-health issue. Regardless of what the WHO might say, SARS is in fact over. Further evidence that the Globe and Mail is finished with SARS as a public-health story appears on April 24, the day the travel advisory was reported in the paper. The layout editor changes the thematic title associated with the story. At the outset of the SARS story, single articles with no thematic title were the norm. These were drawn into groups of articles under the thematic rubrics of either “The Mystery Illness” or
“The SARS Alert” beginning on March 26. Three days later all news articles and some commentary took on the master title “The SARS Outbreak.” This thematic designation persisted for three weeks until the travel advisory was imposed, at which time it was changed to “The SARS Scare.” The lead paragraph in a Carol Alphonso story the next day reads: “The battle against the spread of the SARS virus is all but over in Toronto, health officials said yesterday” (Alphonso, 2003c). SARS was a spooky, startling blip, but no plague. It was a near thing, but the city has escaped and now the work required to avoid a new economic risk can and must begin.

It is significant that by shifting the frame from public health to political economy, a new precautionary risk narrative is invented—a new precautionary responsibility requiring transmission to, and acceptance in, the imagined community. Although the precautionary logic still works to instil worst-case visions and a sense of personal responsibility for balancing risk factors, the new frame eliminates SARS as a viral enemy. Leaving behind petri dishes and lab coats, the disease is now visualized as a wrench dropped into the works of Toronto’s economic machine. The new frame allows the community to determine who is responsible for the wrench being dropped and who for repairing the machine.

The new precautionary responsibility required to guard against the risk of complete economic collapse is consumer activity. “Get out and shop, mayor says,” reads the column headline on one story (Galloway & Immen, 2003). In fact, “[t]he city has earmarked $500,000 for a campaign to encourage residents to return to their normal pursuits of eating out and shopping” (Gadd & Lewington, 2003). Native Torontonians, who are unlikely to prop up the hard-hit bus tour and hotel industries, can still prove their responsibility, their membership in the group, by embracing the “old normal” and spending their money. Already we see pollution logic operating alongside the overtly precautionary message of what to do. As well, we can tell who is a good person by looking at the local shopping malls and

Figure 4: Medical and Business Sources Compared
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restaurants. The reader is presented with a definition of civic duty that requires economic consumption.

This new civic responsibility is a reminder of the selectivity the media exercises when representing those in power. Generally, the media “represents political power as residing in formal institutions, such as electoral politics, legislatures, and law enforcement agencies. This emphasis tends to erase other powerful groups, such as private sector corporations that wish to stay out of the news . . .” (Ericson, 1998, p. 86). In a situation like SARS, where the economic system is threatened, normally reticent business sources begin appearing as story framers. What company wouldn’t venture forth from the inviolable privacy of the business sector given the chance to define patriotism as consumerism? As reporters Caroline Alphonso and Wallace Immen note:

Politicians and business leaders cheered the WHO’s move to lift the ban. “The decision underscores what we’ve been saying for the last several days: Toronto is a safe city in which to live, work and play,” Toronto Mayor Mel Lastman said. (Alphonso & Immen, 2003)

The article illustrates the frame shift, showing who is now qualified to offer facts and solutions to SARS: the business community, and the politicians who represent it. It also reveals a pollution-oriented message. The mayor draws a containment circle around the city, extending it back in time and granting membership in a pure community to all Torontonians. Our good science has prevailed. Their bad science has been proved wrong, not that any of the pure were paying attention to it in the first place. As Douglas observes, “News that is going to be accepted as true information [about risk] has to be wearing a badge of loyalty to the particular political regime which the person supports; the rest is suspect, deliberately censored or unconsciously ignored . . .” (1992, p. 19).

Next to such a strong precautionary message to get out and spend, the (anti) pollution message is difficult to recognize, because it is asserting an absence. It is perhaps facile to say that the shift in story frames denied SARS status as a credible threat, and that this was pollution risk logic at work. There were, however, instances of pollution logic that operated actively, rather than through the absence of the public-health frame. Columnist Margaret Wente provides an example of active pollution logic that engages the new civic responsibility:

In the United States, where the daily SARS news is devoured like the latest chapter in a Michael Crichton thriller, Toronto is now assumed to be as perilous as any pestilential Third World cesspit. And even if it’s not, why take a chance? (Wente, 2003)

The visceral and stereotyped image of a Third World cesspit places pollution in its proper, geographically distant context. With great irony, Wente challenges American precautionary thinking—just days ago her own paper was overtly calling for no one to take any chances. She is also actively establishing an alarmist out-group of Americans who are not spending their money and a rational in-group of Torontonians who are. Drache et al.’s research indicates that Wente is building a straw man in the column, noting that “[w]hile there was a common perception that the
American press was detrimental and biased in its SARS reporting, the actual stories about Toronto in the American newspapers we analyzed was [sic] neither reactionary nor alarmist in comparison to stories in the three Canadian newspapers” (2003, p. 11). For pollution logic to work, for it to bind the community together, it needs to create a sense of threat. With SARS, the disease, no longer a health threat, Wente uses the columnist’s interpretive prerogative to create a pollution logic that works with the major precautionary message of the day. People should be spending money in the local economy, especially people like the hordes of American tourists who are cancelling their tours and conventions. The fact that they are not coming and spending places them physically and morally in the out-group. More importantly, in their failure to acknowledge that SARS is no longer a public health–framed story, they prove themselves to be outside our community. Their news does not carry the badge of loyalty to our political understanding of the situation.

With this line of containment drawn along the American border, there is only the rest of Canada to look to for solidarity with Toronto. It turns out that lines also need to be drawn to the East:

First, the World Health Organization advised travellers to stay away, at least for the next three weeks . . . Germany and Britain then urged their citizens to avoid Toronto. And then, trailing these stentorian voices of caution, came a soft cry from the East Coast. It was Nova Scotia—O homespun voice of reason!—but alas, it, too, joined the rush to isolate the Ontario capital.

Et tu, Brute? (Editorial, 2003b)

And the West as well:

Alberta Premier Ralph Klein has postponed a planned trip to China in June, and the province has banned all government members of the legislature and provincial employees from travelling to China, Vietnam, Singapore, Hong Kong, Taiwan, and Macao where SARS is prevalent. The province is also considering whether to impose a similar ban on travel to Toronto. (Editorial, 2003a)

As others draw a circle of containment around Toronto, the city’s media respond by reinforcing the line as one that demarcates purity rather than pollution. The precautionary message is that good citizens should get out and live their lives as consumers, taking the place of the outsider and alarmist Americans, Nova Scotians, and Albertans. They are the impure, and their line of pollution is in fact a cordon of purity around our disease-free city as we actively and responsibly contend with the real economic problem.

Conclusion

The SARS coverage reveals how risk, formulated in either its precautionary or pollution logics, acts as a moral technology. Rather than members of a “deviance defining elite” (Ericson et al., 1987), it is perhaps best to see the media as part of a risk-defining elite engaged in an emergent social control project. This elite—the Globe’s reporters and their medical, political, and business sources—is an essentially closed network that visualizes an abstract “public” by defining its con-
tours through risk. Risk imbued with moral power, as it certainly was in the SARS coverage, becomes a tool for these actors to make claims about the natural order of things and to attempt to create consensus around these claims. Conceptualized through the lenses of precaution and pollution, risk can be accommodated to the most powerful and insistent voices in the group at any given moment. Precautionary risk logics are used to define appropriate actions for community members, while pollution logics define borders by showing who is, and who is not, a member of the moral community. In this way both China and the WHO, for entirely different reasons, can be chastised as part of local community-building projects that have little to do with the reform of such distant entities.

Far from presenting a fixed moral program, the internal fragmentation of the risk-defining elite and the unfolding contingencies of an unknown plague combine to produce an unstable image of morality. Out of the negotiations for control of the media message come stories that deploy strange mixes of pollution and precautionary logic, or feature jarring switches from medical to economic frames. A closer examination of the SARS story does not reveal journalists plotting with businesses or doctors so much as it uncovers the ways working conditions, the real harm of an epidemic, and social interpretations of that harm combined at a given moment to create a moral community. The journalist’s deadline, the doctor’s quarantine protocol, the business leader’s balance sheet, and the politician’s polling results all push individual actors to see risk through different lenses, and then to exert their power to put these visions and their solutions into the public realm. Risk, as visualized through a public-health crisis such as SARS, is a powerful but vague notion into which actors pour dramatically different meanings depending on their organizational and individual interpretations of the world.

Notes
1. As Canada’s largest city and financial centre, Toronto is the editorial home and central reporting hub of both of the country’s national papers, the Globe and Mail and the National Post. With nominally national newsrooms located locally in the largest market in the country, it is often the case that stories judged by the journalists to be important to Toronto are also judged to be nationally newsworthy. Canadian national newspaper content, then, often revolves around Toronto stories. SARS is no exception to this rule.
2. Politicians were defined as elected members of government. Medical personnel were defined as medical doctors or nurses employed by government agencies, including hospitals and public-health units. Business personnel were defined as spokespeople or owners of private corporate entities. Bureaucrats were defined as spokespeople and other non-medical employees of government and quasi-government organizations. Private citizens were defined as non-medical, non-spokespeople, non-management employees and homemakers.
3. Accountability was defined as criticism or advocacy for institutional responsibility and reform. Calls for accountability were tracked for a number of different actors in the story, namely the government of the People’s Republic of China, the WHO, and Toronto health care and public-health institutions.

The theme of pollution was defined as the association of a specific location or person with illness or infection. Pollution and its explicitly stated absence were tracked for the city of Toronto, Asia, travelling locations (including aircraft, airports, hotels), travelling people, medical locations (including hospitals and doctors’ offices), medical personnel, and private citizens.
Hand washing was defined as calls for, or emphasis of, the efficacy of hand washing for the general population as a precautionary measure against SARS.

The qualification theme was defined as statements of the relative infrequency or low risk of infection. The placement of these qualifying statements within the first, second, or final thirds of a story was also tracked in order to provide a sense of the relative weight accorded the mitigating information.


5. The full consequences of an accident at a nuclear power facility are inconceivable. We cannot know what will happen, and we cannot predict how long or how wide-ranging the deleterious effects of the accident will be. All the victims of Chernobyl, as Beck (1999) famously points out, have not yet been born.

6. During the SARS outbreak, existing rituals in Toronto’s religious communities were altered to reflect the new anti-pollution orthodoxy. Roman Catholic and Anglican celebrations of the Mass and Communion were modified to eliminate hand shaking and hand-to-mouth contact with Communion wafers. See Valpy (2003).

7. The story is full of the middle-class hubris that had Toronto’s media calling SARS a world epidemic. Choosing to accept the WHO’s dramatic assessment I would suggest was built more on the demographic infected than the numbers of victims and their global dispersal. SARS in Canada was originally an infection of those wealthy enough to travel internationally and stay at hotels (see Wong, 2003). It became a disease of those Torontonians with access to hospital-based health care. Compared to the worldwide prevalence of AIDS, or of hepatitis in intravenous drug-using communities in Canada, SARS was hardly an epidemic, but these communities do not make up the Globe and Mail’s readership.

8. See “Ontario Health Update on Severe Acute Respiratory Syndrome (SARS): Make your family aware,” published in the Globe and Mail regularly during the outbreak.

9. Descriptions of both Dr. Donald Low and Toronto medical officer of health Dr. Sheela Basrur (see Barber, 2003) included details similar to this “mild-mannered” comment, painting portraits of professionalism pushed to its limits by the inefficiencies and errors of larger bureaucratic structures. These two were the human faces that cut through the red tape and provided sound media-formatted visualizations of SARS.

References


