

Information or Influence?

Crisis Communications and the Government of Alberta's COVID-19 Press Briefings

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Many steps lead to completing a graduate degree, not the least of which is a capstone project like this one. I started my first post-secondary credential at the age of 30 and worked full-time until the end of this Master of Arts degree. I have often joked that my parchments came with additional qualifications in time management.

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Abstract

This capstone examines Alberta's weekly COVID-19 press briefings through the lens of crisis communications. These weekly press briefings were the main vehicle through which the province's premier and chief medical officer of health relayed pandemic-related information and directives to the Alberta public. Through the use of thematic content and text analysis, this study explores and identifies evidence of crisis communication principles in the remarks of these two speakers. The research relies extensively on the theoretical framework of Coombs (2007, 2015, 2020) and Coombs and Holladay's (1996) crisis communication and situational crisis communications theories. This study found strong evidence of adherence to crisis communication throughout the briefings. Crisis communication principles are reflected through information and narrative frames, specific reputation management tactics, and relevant, role-specific terms in each speaker's addresses. The findings of this capstone contribute modestly toward further discussions on managing communications in longer-term crisis scenarios.

Keywords: Alberta, COVID-19, Crisis Communications, Government Communications, Health Communications, Reputation Management, Risk Communications, Situational Crisis Communication Theory, SCCT

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Chapter 1: Introduction

On April 4, 2020, Queen Elizabeth II gave a short address to the British people. “I am speaking to you at what I know is an increasingly challenging time,” she began, referring to the COVID-19 crisis sweeping through Britain and the rest of the globe. Four and a half minutes later, the Queen ended her speech with the following line: “We should take comfort that while we may have more still to endure, better days will return. We will be with our friends again. We will be with our families again. We will meet again” (BBC, 2020).

That same day, Professor Stephen Powis, the Chief Medical Director of the National Health Service in England, gave a press briefing at 10 Downing Street. It was a factual affair, reporting COVID-19 cases, transportation use, and hospital admissions in the United Kingdom. While his oratory was less stirring, Professor Powis’ briefing reported the information the United Kingdom used to inform its domestic policy. The two addresses, one from the head of state and the other from a senior health official, complemented each other. The Queen symbolized the British people and modelled the same qualities of perseverance and hope she called on the public to demonstrate. Conversely, Professor Powis reported pandemic-related information and instructed Britons on how to best protect themselves.

Similar dyads of senior medical experts and political leaders were present in Canada at the national and provincial levels. At the national level, Dr. Theresa Tam was the medical expert that provided pandemic-related information and instruction, while Prime Minister Justin Trudeau symbolized the government and its enacted policies. Across Canada, this pattern was repeated with a chief medical officer relaying pandemic information and a political leader (typically the province or territory’s premier) representing the people.

These speaker dyads reflect two different views within the study of cultural communications. The first is the transmission view, which describes and informs; the second is the ritual view, which symbolizes and enacts. These views interact with and complement each other. Carey (2007) summarises these two perspectives and their roles as follows:

Both our common sense and scientific realism attest to the fact that there is, first, a real world of objects, events, and processes we observe. Second, there is language or symbols that name these events in the real world and create more or less adequate descriptions of them. There is reality and then, after the fact, our accounts of it (p. 43).

In other words, transmission gives us information, while ritual creates community and manages meaning.

The parallel between these two communication views and the dyads of speakers is not accidental. W. Timothy Coombs, a crisis communications scholar who also pioneered situational crisis communication theory (SCCT), wrote that once a crisis is triggered: "there are two strategies for crisis communication: (1) managing information and (2) managing meaning" (Coombs, 2015, p. 142). Thus, crisis communications, like those seen at the height of the COVID-19 crisis, ideally reflect both the transmission and ritual views of communications.

Research Focus and Questions

The first case of COVID-19 in Alberta was detected on March 5, 2020. The Government of Alberta relayed information about lockdowns, masking mandates, and other actions via weekly press briefings for the next two years. These briefings were typically given by Premier Jason Kenney and Chief Medical Officer of Health, Dr. Deena Hinshaw.

Alberta's use of the same dyads employed by Canada's federal government, the United Kingdom, and other countries reflect the twin streams of information and meaning management

reflected in Coombs' crisis communication theory. Effective crisis communications also parallel Carey's transmission view (information management) and ritual view (meaning management). Were Alberta's COVID-19 press briefings an effective component of the province's pandemic response? How can the effectiveness of these briefings be determined? Directly addressing these questions would require a significant research effort and possibly an extensive, representative survey of Albertans. While an enterprise of this magnitude is beyond the scope of a graduate capstone project, I can test the waters indirectly by examining these communications for evidence of crisis communication tactics.

It is reasonable to assume that these communications were somewhat effective if an established communication theory is represented in Alberta's COVID-19 press briefings. Thus, the effectiveness of these briefings can be indirectly determined by the degree to which they reflect Coombs' crisis communications principles.

According to Coombs, meaning management specifically includes reputation elements, which are, in turn, managed through a framework of specific tactics. Therefore, testing for the use of crisis communications principles can consist of identifying whether the communications include both information transmission and reputation management for the two speakers. With this in mind, my research question is as follows:

- *RQ*: To what degree did Alberta's COVID-19 press briefings reflect crisis communication principles (information and reputation management), and how is this shown in an analysis of the texts of the two primary speakers (Hinshaw and Kenney)?

My literature review follows in the next chapter.

Chapter 2: Literature Review

World War II was, arguably, the last time we endured an acute global crisis lasting two years or more, and the COVID-19 response offers a unique opportunity to examine crisis communication principles in action over a prolonged period. Given the current time-horizon limitations of crisis communication case studies and the impacts of reputation in the political milieu, this study is relevant to extending our knowledge of the crisis communication model. Studying how the Government of Alberta enacted its messaging during the COVID-19 pandemic can also reveal much about how the province applied crisis communication principles during the pandemic.

Literature Review Questions and Methodology

How and to what degree did Dr. Hinshaw and Premier Kenney's COVID-19 press briefings enact crisis communication principles? While my primary research will address this question, this review will provide an overview of existing literature relevant to my topic. It will focus on two main themes.

The first review theme is the theoretical foundation of my study, crisis communications. Effective crisis communications are said to include reputation-management elements, yet many people find reputation difficult to define intuitively. Because understanding reputation management is a critical component of my research methodology, I will spend a significant portion of this review discussing it.

The second theme is the COVID-19 context. Analyzing the Government of Alberta's press briefings requires a high-level understanding of the history of the pandemic and how comparable jurisdictions managed communications. The questions I used to reflect these review themes and guide my literature review are as follows:

- What are the basic principles of public health risk and crisis communications?
- How can reputation be managed in a crisis?
- Why does reputation matter in public health?
- How did Alberta and other jurisdictions enact their pandemic-related mass communications?
- How were those communications perceived by their intended audiences?

Search Methodology

To explore my literature review questions, I searched the University of Alberta Library EBSCO and Google Scholar and referenced the citations in the articles retrieved to help identify leading researchers or articles in my topics of interest. Boolean search logic was used to find relevant journal articles using variations of selected keywords (situational crisis communications, sensemaking, disaster, risk management, health communications, COVID-19, Alberta, reputation, political capital, and public perception).

I broadened my search criteria to include grey literature for my last public perception-related question. To find grey literature, I used a Google search using my keywords and filtered results to only include sources that met the standards set out in my Literature Inclusion Criteria section. I tracked sources using the reference management application Zotero. Each source was annotated and summarized, with the summary being tracked using Zotero's Notes function. Each

source was also attached to its Zotero entry, tagged with keywords, and linked to thematically related sources.

Literature Inclusion Criteria

I used a series of criteria for assessing the suitability of academic and grey literature sources for inclusion in this review. My first criterion for scholarly sources was a publication in a peer-reviewed journal. Second, I checked to ensure the journal was indexed in a major multidisciplinary database (Scopus, Web of Science, ScienceDirect, or the Directory of Open Access Journals). This second criterion is a measure of journal reputability. Third, I only included articles published within the last 30 years to ensure the material reflected current theoretical perspectives and professional practices. Fourth, I took a deeper dive into the article to ensure its topic or theoretical framework meaningfully addressed, refined, or expanded upon my literature review research questions. Finally, while not a strict exclusion criterion, I favoured articles cited at least five times for inclusion in my discussion.

For grey literature sources, I adapted principles from the American Press Institute's criteria for credible journalism. These guidelines are suitable for the grey literature included in this review and for the journalistic sources I will use in my primary research. The first criterion was ensuring the source was research or journalism rather than an opinion piece. Second, I checked the source to ensure it had relevant citations or vetted information. Third, I read the material and evaluated the source for complete information. My fourth criterion was ensuring the publishing organization had a history of reliability. Fifth, I reviewed the source to ensure that the timeframe, context, and topic were relevant to my research (e.g., concerning Canadian or Albertan public opinion on health or government communications issued from March 2020

onward). My final criterion was that the source should be free of explicit ideological or political biases.

Discussion

Communication and Reputation Management During Crises

Risk and Crisis Communications in Public Health

The World Health Organization (WHO) defines risk communication as "the real-time exchange of information, advice and opinions between experts or officials and people who face a threat (from a hazard) to their survival, health or economic or social well-being" (2022). Thus, risk communication deals with a crisis that could happen. Conversely, crisis communication proper is conducted when a crisis is already occurring (Coombs, 2015). Of principal importance in managing any crisis is attempting to prevent it in the first place (Coombs, 2012). Hence, risk communication is the antecedent of crisis communications, which is why it is included in this discussion.

When given sufficient lead time to communicate an emerging risk, communications can take a strategic approach. The federal government has adopted an official framework for public health risk communications in Canada. This framework includes five core principles: strategic risk communications are central to risk management, stakeholders are the focus, decisions must be evidence-based, risk communications must be transparent, and they must be subject to continual evaluation (Health Canada and Public Health Agency of Canada, 2006).

The person who delivers communications can also affect compliance with risk-reducing behaviours. In Alberta, Zhang et al. (2021) found that risk communications in healthcare are more effective when coordinated, clear, concise, and delivered by healthcare professionals.

Spokespeople are not just communicators; they are also role models who are perceived as more credible when they display the behaviour they hope to encourage and be transparent when their recommendations change over time. Mandl and Reis (2022) support the importance of the spokesperson in the success of risk communications, noting that how leaders communicate information reflects their own perceptions, beliefs, and political agendas and directly affects public compliance with health mandates.

These principles can aid the understanding and analysis of Alberta's pandemic press briefings. However, when communicating about emerging public health risks like COVID-19, Toker (2021) cautions that "timely information is the most important issue" (p. 432). This observation reflects the WHO's statement that good risk communication is real-time but also highlights the importance of correctly assessing the risk level present and factoring this into risk communication plans (Coombs and Holladay, 2012; Health Canada and Public Health Agency of Canada, 2006). Understanding how the public views the risk is critical and factors in how communications should be framed and delivered (Zhao et al., 2022). Knowing this allows risk communicators to try and persuade people to be more concerned about an underestimated risk or less worried about an exaggerated one (Coombs, 2020).

Failure to adequately estimate and communicate risk can have dire consequences. People are seldom motivated to take preventative measures (such as masking or vaccination) if they underestimate the danger or do not perceive something as a risk to them at all. The relevance of this observation was confirmed in Alberta by Lang et al. (2021) using a cross-sectional online survey. Inadequate risk assessment and communication can also result in an organization or government being perceived as irresponsible or unethical, a scenario that Coombs and Holladay (2012) term a "paracrisis." Such a paracrisis must then be managed along with the other

reputational threats that arise as the risk evolves into a full-fledged crisis. Once that happens, crisis communication activities should be triggered.

As outlined in my introduction, Coombs (2015) identifies information and meaning management as the two main concerns in crisis communications. These concerns mirror the principles of the transmission (reality) and ritual (our interpretation of reality) view presented in Carey's (2007) description of cultural communication. Information management consists of instructing information (information that helps people protect themselves) or adjusting information (information about the event or resources available to assist). Managing meaning "involves efforts to influence how people perceive the crisis and/or the organization involved in the crisis" (p. 142). Put another way; crisis communication requires practitioners to at once provide crisis information and then manage how people think and feel about it through interpretation and reputation management.

Reputation Management During Crisis

Coombs and Holladay (1996) pioneered SCCT almost 30 years ago. At that time, the theory focused on corporate responsibility and reputation protection during crises, such as industrial accidents or corporate scandals. Since those early days, SCCT has also been studied in the context of government and other public actors responding to crises, including the COVID-19 pandemic (Coombs, 2020). Since SCCT can be used to protect the reputations of different types of organizations, governments, or individuals, I will use the term crisis actor as a catch-all for the remainder of this discussion.

SCCT assesses threats in two stages. The first stage is determining the dominant crisis type by identifying the crisis actor's level of responsibility. Three clusters of responsibility are considered:

- The *victim cluster* reflects situations in which harm is inflicted on the actor as well as its stakeholders by external forces.
- The *accidental cluster* in which an actor's unintentional actions cause a crisis.
- The *preventable cluster* reflects when the crisis results from the actor intentionally putting stakeholders at risk, violating laws and regulations, or not doing enough to prevent a foreseeable accident.

The second threat assessment stage is to identify the actor's history with the crisis and whether they had a favourable reputation before the incident. These "intensifying factors" impact the perception of the actor's responsibility for the crisis (Coombs, 2007). Prior research indicates that even if the actor is also a victim, an actor with a history of accidents must respond as if the crisis was another accident. Similarly, a history of crises or an unfavourable reputation before the incident will result in the event being perceived as intentional. (Coombs, 2007; Coombs and Tachkov, 2020).

When assessing a crisis, it is also important to note that the more the crisis actor is perceived to be responsible for the event, the more severe the damage to its reputation and the greater public anger it will attract (Coombs & Holladay, 2007). Additionally, any perception of greed or injustice attached to the incident can trigger public moral outrage (Antonetti & Maklan, 2016). Finally, assessing cultural context is essential. Culture can alter the language chosen in response tactics, particularly those attempting to diminish perceptions of the crisis actor's (or

actors') responsibility (Guerber et al., 2020). Cultural context also influences how the public views responsibility and how that view impacts the crisis actor's reputation (Zhao et al., 2022). Once a crisis has been triggered, SCCT proposes four general response strategies that can be applied to protect or repair a crisis actor's reputation. These strategies fall into four broad categories:

- *Denying* the existence of a crisis or the actor's responsibility for it
- *Diminishing* the perceived impact of a crisis or the perception that an actor meant to do harm
- *Rebuilding* reputation through redress (apology or compensation)
- *Bolstering* the actor's reputation by reminding publics of past good works or that the actor is also a victim of the crisis (Coombs 2007 & 2015)

Blame is a crisis response frequently seen in the political sphere, and Antonetti and Baghi's (2019) empirical studies support it as an appropriate response under specific conditions. Blame-giving can reduce an actor's "perceived responsibility for a catastrophe" (p. 73). It can also improve perceptions of the actor's ethicality and reduce unfavourable word-of-mouth. However, to be effective, blame-giving messages must clearly state who is to blame in vivid detail, and the audience must have no reason to doubt the truthfulness of the blame-giver. Blame-giving should also focus on the bad actor's behaviour and avoid becoming a personal attack. Finally, blame-giving can be interpreted as avoiding responsibility when a crisis is preventable. Thus, blame-giving can be effective in a denial, diminishing or rebuilding strategy and when the crisis is assessed as being part of the victim or accidental clusters.

SCCT does not directly guide behaviours for the prevention or mitigation of crises. Instead, it works to preserve and bolster reputation. This distinct function was confirmed by Hirschfeld and Thielsch (2022), who studied the impact of COVID-19 crisis communications on perceptions of local politicians and intentions to follow health mandates. The authors' experimental study of 561 participants in Germany found that SCCT did little to affect respondents' intent to adhere to public health mandates one way or the other. However, using SCCT tactics affected perceptions of local politicians' reputability: leaders perceived to have led an effective COVID-19 response were more likely to be trusted. Furthermore, most respondents indicated they were more likely to vote for these leaders in future elections.

With that said, reputation is an essential form of social capital that can be used to support crisis responses and other prosocial efforts, as I will discuss in the following section.

Why Reputation Matters: A Public Health Perspective

Origgi (2022) defines reputation as a combination of what we think about a person and what we believe others think about that person. Reputation is a social and communicative asset and an essential currency for many fields. For example, in democratic governments, any government action is subject to debate and criticism. Consequently, sweeping public health orders like those enacted in Alberta during the COVID-19 lockdowns are as much about politics as managing health risks. Reputation, then, is a critical, if intangible, asset for public policy and governance. Given its value, it is no wonder that communications models like SCCT have been developed specifically for managing and preserving reputation.

Reputation is "an opinion that is verbalized, spoken, repeated and disseminated and therefore essentially communicative in nature," and managing it is one of the central functions of

public relations (Origgi, 2022, p. 543). While it can be easy to oversimplify reputation as being nothing more than how one is perceived by others, this overlooks one of its most important aspects: its ability to influence our perceptions. Reputation communicates social information about public figures, such as Alberta's Chief Medical Officer of Health. This information is gathered from various social cues: their perceived authority, influence, status, and values. Critically, when we know little about a situation, we use the social information relayed by an expert's reputation to assess their trustworthiness and legitimacy (Günter & Wehmeier, 2007; Origgi, 2022). In other words, in the early days of an emergency like the COVID-19 pandemic, reputation became a synecdoche for trust.

Trust is an essential component of a leader or government's political capital. While political capital is nearly as challenging to define explicitly as trust, it can be thought of as a leader's ability to influence decisions. Political capital is primarily the sum of a leader's social connections, individual networks, and trust, factors that it shares with political scientist Robert David Putnam's closely allied concept of social capital. Although the former idea focused on the influence exerted by individual leaders, the latter more appropriately refers to the influence leveraged by communities (Gratton et al., 2021; Putnam, 1995). As closely intertwined as the two models of influence are, it follows that both political and social capital can be banked and spent and can increase or decrease based on performance. Coombs (2007) also identifies a crisis actor's reputation and perceived trustworthiness as essential considerations when assessing reputational threats.

Selart et al. (2012) studied how crisis preparation by leaders can be communicative acts that affect political capital. Preparing for a crisis like a pandemic is intended to safeguard an organization or government from the unforeseen. However, visible crisis preparation can also

reduce stakeholders' perceptions of danger. Such measures can also result in leaders being cast as "more capable, benevolent, and [having] better integrity," provided that the plans are put in place well in advance of the crisis being addressed (p. 104). Conversely, political capital can diminish if there is a widespread perception that a leader's performance has been poor (Gratton et al., 2021). The applicability of these dynamics to citizens' perception of their government's crisis performance is supported by Kim et al. (2020).

This link is illustrated by Gotanda et al. (2021). In their study of 25,482 Japanese citizens, the authors found that those with high trust in the government were much more likely to comply with local health orders than those who did not. This finding is not limited to Japan: a study from 23 countries worldwide confirmed that trust in the government directly influenced rates of prosocial behaviours such as immunization and compliance with local health orders (Han et al., 2021).

However, trust is proven to have limitations when supporting pandemic-related public health measures. Even leaders and health authorities who have earned widespread trust cannot expect that all citizens will comply with health directives. Further, trust will not be uniform amongst all citizens. For example, Gozgor's (2022) study of over 100,000 respondents from 178 countries suggests that trust in government tends to be higher amongst older and healthy people and lower amongst the educated.

From Reputation to Action: Boundary Spanning and Public Policy

Alberta and Canada's COVID-19 response relied on complex interactions between various levels of government, healthcare professionals, vaccine and medical suppliers, shipping and logistics companies, and many more. Connecting these diverse groups are boundary

spanners: individuals who function as a connector between two or more stakeholders (Delozier and Burbach, 2021). In the policy context of Alberta's COVID-19 public health measures, highly visible boundary spanners included Alberta's chief medical officer of health, premier, and minister of health, as well as Canada's prime minister and chief public health officer.

Delozier and Burbach (2021) suggest that boundary-spanning behaviour is most valuable in highly contentious, long-term projects or scenarios. This observation is supported by Jochim and May (2010), who argue that boundary spanning with various stakeholders within government (such as health and justice ministries) contributes to the overall effectiveness of policy implementation. In their analysis of Swiss policy and parliamentary media, Brandenberger et al. (2022) also outline how boundary-spanning behaviour becomes more likely when multiple, high-profile actors, complex, interconnected systems, and problems are involved, and the issue is the subject of public scrutiny. These conditions reflect those present during public crisis responses and Alberta's COVID-19 public health measures.

Boundary spanners themselves may be leaders or specialists within their respective stakeholder groups. Ultimately, their function is to represent each stakeholder's perceptions, expectations, needs, and ideas to the other (Nicholson & Orr, 2016). Importantly, boundary spanners also need to have a positive reputation for being effective because they are perceived as experts in their field who have demonstrated honesty or displayed concern (Peters et al., 1997). Brandenberger et al. (2022) state that "trust and reputation are two key concepts of collective action," particularly when that collective action is taken over time and when policy actors engage "in issues that lie outside their core interest or expertise" (p. 39). Accordingly, reputation and trust are critical resources for boundary spanners to preserve if they are to continue being effective.

*Government Public Health Communications during the COVID-19 Pandemic***The World Health Organization's Role**

One of the challenges of studying a crisis still in progress is that the data are, by default, incomplete. However, the early days of the pandemic have been well-documented. A common theme in the literature is how pandemic lockdowns seemed to come without much warning in many countries. To some extent, this can be associated with a reluctance to ring the metaphorical global alarm bell by the World Health Organization (WHO). The WHO was first informed about a then-unknown influenza-like virus in China on December 31, 2019; the organization subsequently issued its first declaration about the COVID-19 virus to the international community on January 23, 2020 (Toker, 2021). The situation was described as urgent then, but the WHO did not advise action. The WHO issued 42 news releases and brief statements between December 31, 2019, and March 30, 2020, of which over half (23) were COVID-related. When subject to quantitative analysis, the organization's communiqués primarily emphasized themes of the outbreak, solidarity, and cooperation until the WHO declared a global pandemic on March 11, 2020 (Hier, 2021; Toker, 2021).

Of course, much was unknown in those early days, and the lack of scientific knowledge about the COVID-19 virus contributed to a hesitancy to declare a global pandemic. This reluctance is also linked by Hier (2021) to a desire to avoid public panic, with the prospects of such panic and the economic, political, and social impacts of declaring pandemic restrictions serving as serious disincentives to take early action.

No matter how the WHO arrived at its decisions, its communications directly affect the attention given to the virus, both by media and national governments. Toker (2021) argues that agenda-setting is accomplished explicitly through its advisory role as the health agency of the

United Nations and implicitly by "making certain issues more visible through its news releases and press briefings" (p. 426). Because this news media is a "critical intermediary that translates international politics into ...knowledge for governments and the public," this agenda-setting role also affects the perception of both governments and their citizens (Toker, 2021, p. 42). In other words, how the WHO timed its announcements and framed the urgency of the COVID-19 pandemic directly affected the pandemic preparations and the degree of public concern worldwide.

The Albertan and Canadian Context

While reports of the COVID-19 virus began in December 2019, the first phase of risk communication in Canada started in January 2020. Chief Public Health Officer Theresa Tam first acknowledged COVID-19 as a watch item during this period. While Canadian authorities continued to provide updates about the developing public health situation from late January to early March 2020, the messages were reassuring. More serious response messaging and health restrictions in various provinces began in mid-March 2020, although such efforts were largely uncoordinated between Canadian jurisdictions (Hier, 2021).

Notwithstanding the fitful start to the Canadian pandemic response, sweeping public health measures and regular COVID-19 updates were in place nationwide by late March. Studies of Canadian COVID-19 health messages reveal some prevalent themes in how these communications were managed and perceived. Principle amongst these themes was the centrality of building and maintaining trust in health communications. Studies measuring the effectiveness of Canadian COVID-19 communications through social media metrics and surveys reveal that the most successful messages build trust by including a call to action, directly addressing

misinformation, and highlighting clarity, compassion and empathy, conversational tone, transparency, and consistency (MacKay et al., 2022; Dubé et al., 2022).

Consistency was also critical for trust and compliance with public health orders. Government communicators in the Province of Québec employed consistent messaging in televised addresses and across all communication platforms used (Dubé et al., 2022). The Government of Alberta's early COVID-19 press briefings also relied extensively on consistent messaging (Bulut & Poth, 2022). Nonetheless, with the rapidly shifting scientific understanding of the virus's nature, inconsistent information was relayed in the early phases of the pandemic. In particular, messaging about the necessity of public masking, the effectiveness of various types of masks, and the virus's transmissibility on hard surfaces changed throughout the early phases of the pandemic. In Alberta, this inconsistency in government public health recommendations "caused confusion, frustration and mistrust, [and] laid the ground for mask skepticism" (Zhang et al., 2021, p. 910).

While a full survey of Canadian COVID-19 communications has not been completed, available studies suggest that media coverage and perception of public messaging were mixed in the early stages of the pandemic. For example, Bibeau et al. (2021) report that coverage of Prime Minister Justin Trudeau's national addresses maintained a mainly positive tone in English media from mid-March and early April 2020. Still, his French-language media coverage remained negative, although he did receive less coverage in French media during this time. Meanwhile, the tone of the commentary on Premier Legault's French-language broadcasts in Québec was quite variable during the same period. However, he enjoyed some positive coverage in the early days of his crisis response.

In Alberta, the province's official health system monitor, the Health Quality Council of Alberta, conducted a survey of Albertans' COVID-19 experiences and impacts from May to June 2020. According to this survey, the majority (64 percent) of Albertans felt protected by the province's health measures, with most respondents (75 percent) using the press briefings from the Chief Medical Officer of Health, Dr. Deena Hinshaw, as their most cited source of pandemic information. During this time, reported trust in the information given by Dr. Hinshaw was relatively high at 72 percent. The Alberta government's press briefings were the most trusted source of pandemic-related information, followed closely by the Alberta Health Services website (Health Quality Council of Alberta).

Global Examples

The scholarly discussion of global pandemic communications suggests that different nations had diverse experiences with the execution and effectiveness of their plans. Spain and the United Kingdom (UK) provide two such examples. In Spain, citizen trust in government was already low, and political polarization was high before the pandemic. According to one analysis of a nationally representative survey of Spanish citizens, this pre-existing context significantly hampered the Spanish government's pandemic communication efforts from the start. Combined with an infodemic of misinformation, Spanish citizens perceived the health communications of their government in a largely negative light in the early phases of the pandemic (Arcila-Calderón et al., 2021). The spread of misinformation, distrust in official government sources, and inconsistency in the Spanish government's communication were strongly associated with flagging compliance with public health measures in that country (Gualda et al., 2021). This

finding strongly supports the previously discussed link between trust in a government and compliance with health orders observed by Kim et al. (2020) and Gotanda et al. (2021).

In the UK, government communications were perceived both within that country's government and by its citizens to be of increased importance during the early phases of the COVID-19 pandemic (Forbes, 2021). A thematic analysis of the Prime Minister's public COVID-19 communications from January to June 2020 by Sanders (2020) found that the Prime Minister's addresses adhered to the characteristics of high-reliability organizations. These high-reliability characteristics can be broadly summarized as being situationally aware and responsive to early warning signs of risk, deferring to expert experience, being transparent and honest about mistakes, leading by example, resisting oversimplification, embracing a just culture, and being aware of the consequences of failure (Sanders, 2020).

Despite these early observations, perceptions of how Prime Minister Boris Johnson fared with his pandemic communications quickly soured. Mr. Johnson soon faced widespread criticism, and the government's approval rating fell significantly in March 2020 (Kellner, 2020, as cited in Sanders, 2020). The British public perceived that the government was not transparent about COVID-related mortality figures, was vague in its public health recommendations and failed to reflect scientific advice in its public health mandates (Cairney & Wellstead, 2021).

Debatably, most damaging to the Prime Minister's credibility was a visible failure to follow his own rules: whereas the government implemented social distancing on March 3, 2020, Mr. Johnson was televised shaking hands with dignitaries and ignoring the just-implemented two-metre social distancing protocols the same day (Newton, 2020). Failing to lead by example violated the principle of consistency and resulted, at least in part, in decreased public support for the government and its policies (Cairney & Wellstead, 2021). This flagging compliance with

policy and the subsequent resignations of Mr. Johnson and his Spanish counterparts in 2022 suggests that trust and reputation are worth preserving should one aim to sustain public policy and political office.

Literature Review Limitations

The primary limitation of this review is that academic studies of health communications during later phases of the COVID-19 pandemic are still emerging as of this writing. Most authors, such as Hier (2021), Toker (2021), and Sanders (2020), wrote exclusively about the first six months after COVID-19 was declared a global pandemic. Even later works, such as Bulut and Poth (2022), are limited in historical scope and do not examine communications occurring later in the pandemic. Similarly, the literature on the applicability of crisis communication and SCCT in long-term public health crises is scant. Coombs (2020) supports the relevance of SCCT to public health crises (specifically COVID-19), but again the author's writings focused on the first few months of the pandemic. Hirschfeld and Thielsch (2022) discuss the efficacy of SCCT in the context of COVID-19, but their data was collected in 2020.

More surprising are the gaps in the literature linking reputation, trust, political or social capital, and effective governance. At the same time, much has been written about these topics separately. Coombs (2007) links reputation and trust to an actor's ability to respond to reputational threats; Günter and Wehmeier (2007), as well as Origgi (2022), discuss how reputation can be transferred into trust in low-information contexts. Brandenberger et al. (2022) also outline how trust is vital in longer-term boundary-spanning relationships. Despite the intuitive throughline between political leaders' reputation and ability to respond effectively to crises via their ministers and bureaucracies, the literature did not concretely bridge these topics.

Summary

While this discussion is by no means comprehensive, it serves to synthesize literature on diverse topics and serves as a starting point for my research. Reputation management, risk, and crisis communication, as well as the sociological theories of trust, reputation, and boundary-spanning, are broad topics of inquiry that cannot be fully captured within the scope of this work. The period in which I am writing this review also affects how I have conducted it, as the COVID-19 pandemic is ongoing and related studies are still emerging. Nonetheless, surveying the landscape of existing pandemic communication analyses provides valuable context for examining Alberta's press briefings.

This literature review serves two functions. First, it contributed to developing the framework I used to analyze how the Government of Alberta met its crisis communication mandate during the period of Alberta's COVID-19 public health orders. Second, it contextualizes the recent events we are all, in many ways, still living through and provides background as to why this research matters.

The following chapter outlines the methodology I used for my analysis.

Chapter 3: Methodology

This chapter provides an overview of my study's longitudinal research strategy, which combines three analysis stages:

- *Stage 1:* A content analysis on a sample of my corpus to understand the degree of information versus narrative (reputation management) frame messages in Dr. Hinshaw and Premier Kenney's press briefings. This stage will identify whether the texts conform to Coombs' information and meaning management streams of crisis communications.
- *Stage 2:* A second content analysis on the same sample to identify specific reputation management (SCCT) tactics in Dr. Hinshaw and Premier Kenney's press briefings. This second stage will substantiate the first by confirming whether the narrative frame text contains reputation management elements.
- *Stage 3:* A corroborating text analysis of the entire corpus of press briefings to reflect on the salience of the speakers' language use relative to their role.

The chapter begins by describing how I gathered the data for this study and the data management of my corpus. It will then describe my sampling strategy and outline the temporal boundaries of my study. The following section outlines my analysis strategies, including the message and rhetorical content analysis categories and approach for textual analysis of the corpus. Lastly, I will discuss the limitations of my study.

Research Objective and Questions

The primary objective of my study is to observe how and to what extent the Government of Alberta enacted crisis communication tactics in its press briefings. I specifically focused on these briefings because they were the government's primary channel for public updates during the pandemic. Additionally, they were cited as Albertans' most trusted source of pandemic-related information by the Health Quality Council of Alberta's COVID-19 Experiences and Impact Survey.

While my research objective focuses on both the application and degree to which crisis communication principles were applied, it generated a single discreet research question:

- *RQ*: To what degree did Alberta's COVID-19 press briefings reflect crisis communication principles (information and reputation management), and how is this shown in an analysis of the texts of the two primary speakers (Hinshaw and Kenney)?

Guided by my literature review, this study used a longitudinal design to examine the application of crisis communication principles in the government's press briefings. This design allowed the observation of content over time, which I then indexed to specific pandemic waves. As part of this longitudinal design, I also established and justified my study's temporal boundaries (or timeline).

Data Gathering and Sampling

For my study, I concentrated on remarks given in press briefings by Dr. Deena Hinshaw and Premier Jason Kenney during the Government of Alberta COVID-19 press briefings. Twenty months of these press briefings have been transcribed by a University of Alberta research team headed by Dr. Geoffrey Rockwell and Bennet Tchoh, with support from the University of Alberta, the LINCS project and the Social Science and Humanities Research Council. This database, named Covid Discourse Alberta March 2020-October 2021, is free for use by researchers under a Creative Commons license and is available at <https://voyant-tools.org/spyral/GeoffreyRockwell@gh/CovidDiscourse7/> (Rockwell, 2022).

These transcripts will form the corpus for my study as they are freely available to researchers and are more extensive than I could complete on my own within the scope and timelines of a graduate-level capstone project. The transcripts were loaded into a Spyral Notebook, a digital document that combines the transcripts and corresponding date markers. This set up allowed the transcripts to be treated as digital texts using the Voyant Tools text analyzer (<https://voyant-tools.org>).

The transcripts cover the period of March 2020 to October 2021 inclusive and are viewable monthly or weekly. I used a weekly view of these texts for a more precise sampling of materials and ease of examination in my thematic content analysis. The overall sampling timeline for my analysis was based on the transcripts available. This choice limited the temporal boundaries of my study to the first three waves and just after the crest of the fourth wave of COVID-19 in Alberta. However, the completeness of the transcripts allowed for a more thorough examination of the materials than I could accomplish within the scope of my study if I had transcribed these press briefings myself.

Defining a Timeline: COVID-19 in Alberta

The cut-off points of the various COVID-19 waves are subjective; however, I established a general timeline in Alberta based on the enactment of various government measures and publicly available epidemiological data. Combining a timeline of announcements published by the Calgary Herald on March 15, 2022, and case count information from the Canadian Institute for Health Information (see Appendix A), my research defines Alberta's COVID-19 waves as follows.

- *First Wave:* March 5 – November 23, 2020
 - The first case of COVID-19 in Alberta was detected on March 5, 2020. Initial lockdown measures were implemented in Alberta on March 15, 2020, and partially lifted for the first relaunch.
 - This wave included Alberta's "First Relaunch" period of eased health restrictions from May 14 – November 23, 2020.
- *Second Wave:* November 24, 2020 – May 3, 2021
 - Some restrictions were eased as of February 8, 2021. However, the province later announced the return of most restrictions on April 6, 2021.
 - Case counts spiked in early November 2020, ebbed over the winter, and then began cresting again in early April 2021.
- *Third Wave:* May 4 – September 14, 2021
 - The government announced a new set of restrictions to combat the increase in COVID-19 cases in Alberta, signalling the start of the third wave.
 - This wave included the period of eased restrictions (the Open for Summer plan), which ran from June 1 – September 14, 2021.

- While early summer 2021 saw low COVID-19 case counts in the province, case numbers climbed in August and then spiked in September 2021.
- Premier Kenney announced Alberta's \$100 COVID-19 incentive program on September 3, 2021.
- Fourth Wave: September 15 – November 15, 2021
 - Premier Kenney declared a state of public emergency and the implementation of the vaccine passport program on September 15, marking the official beginning of the fourth wave.
 - The number of COVID-19 cases in Alberta dipped below 10,000 in the first week of October 2021 and there were less than 5,000 cases by the end of the month; the fourth wave ended by November 15.
- Fifth Wave: November 16, 2021 – March 5, 2022
 - The discovery of the Omicron variant was announced on October 25, 2021. Combined with a steady increase in COVID-19 cases, the new variant led to Alberta's fifth pandemic wave.
 - Case counts crested from late December 2021 to early February 2022 and then ebbed.
 - Alberta lifted most of its health restrictions effective March 5, 2022.

Sampling for Thematic Content Analysis

Referencing the timeline I provided in the previous section, my study corpus contains transcripts from March 5, 2020 (when the first case of COVID-19 was detected in Alberta) to October 31, 2021 (the end of the available transcripts). This corpus consists of 87 documents for Dr. Hinshaw and 86 documents containing Premier Kenney's remarks, for a total of 173 transcripts. For my thematic content analysis, I selected 15 transcripts of remarks given by Dr. Hinshaw and 15 given by Premier Kenney, for a total of 30 transcripts. Including 30 transcripts in my analysis ensured that I had a minimum standard of sufficient data to draw necessary conclusions (or data saturation) for the qualitative portion of my study (Mthuli et al., 2022).

I used systematic sampling with a random start to select weekly samples of press briefings for my analysis. Weeks in which only one official made remarks (because one official or the other was on holiday) were skipped in lieu of the next week in which both officials made remarks. This step ensured that Dr. Hinshaw and Premier Kenney's remarks would remain consistently paired.

I chose the systematic sampling method because of its advantages: simplicity and ability to obtain an unbiased sample when performed correctly. Because I knew the total size of the sampled materials, I could accurately sample using this method (Bruwer et al., 1996, Merrigan et al., 2012).

Data Analysis

Content Analysis: Identifying Information, Meaning, and Reputation Management

The qualitative portion of my project consisted of two content analysis stages to identify the key themes present in the communications. All coding was completed in NVivo qualitative analysis software, using the coding categories found in Appendix B: Government of Alberta COVID-19 Press Briefing Coding Table. First, I drew upon Coombs' (2015) information versus meaning management crisis communication concepts and Carey's (2007) transmission and ritual views to form two primary message frames.

While performing the analysis, I discovered that a significant amount of text was unrelated to COVID-19. While this is outside the scope of my research and my second content analysis, I included a third message frame to track this non-COVID discourse.

This theoretical basis generated three text frames, which form response categories one (1), two (2) and three (3) on my coding table:

1. The information frame identifies when the transcripts disseminated crisis-related information.
2. The narrative frame contains text that attempts to influence how audiences perceive the crisis or the government, either through SCCT tactics or message framing.
3. The non-COVID discourse frame categorizes text not directly pertaining to the COVID-19 response.

Next, I analyzed the messages to identify the presence of Coombs' (2007, 2015) SCCT crisis response strategies. Interpreting these strategies through the lens of the Government of

Alberta's COVID-19 response, I arrived at the following SCCT message categories for my analysis (response category numbers are noted parenthetically after each item):

- Denial group (4)
 - Denies the existence of the COVID-19 crisis or crisis response issues (4a)
 - Denies the government's responsibility for COVID-19 crisis or crisis response issues (4b)
- Diminishing Group (5)
 - Attempts to lessen the perceived impact of the COVID-19 crisis or crisis response issues (5b)
 - Highlights the government's lack of control over the COVID-19 crisis or crisis response issues (5b)
- Bolstering group (6)
 - Reminds publics of shared victim status (6a)
 - Reminds publics of past good works (6b)
- Rebuilding group (7)
 - Offers an apology (7a)
 - Offers some other form of redress (7b)

Table 1 (below) summarizes the theoretical concepts that underpin my coding and correlates it to my coding categories (except for non-COVID discourse).

Table 1 *Theoretical Concepts and Coding Equivalences*

Carey (2007) (Cultural Communication)	Coombs (2015) Crisis Communications	Stage 1 & 2 Frame and Rhetorical Analysis Categories
Transmission view <ul style="list-style-type: none"> Relays information to the audience) 	Managing information <ul style="list-style-type: none"> Instructing and adjusting information 	<ul style="list-style-type: none"> Information frame (1)
Ritual view <ul style="list-style-type: none"> Enacts narrative and manages meaning 	Managing meaning <ul style="list-style-type: none"> Influence how people perceive crisis and the organization involved SCCT 	<ul style="list-style-type: none"> Narrative frame (2) SCCT tactics (4-7)

Text Analysis Approach

The text analysis portion of my study is a quantitative examination of the ten most relevant terms present in the whole of my corpus. To complete this analysis, I used the Voyant Tools text analyzer (<https://voyant-tools.org/>) to determine the top 10 most relevant themes in the remarks given by Dr. Hinshaw and Premier Kenney in the corpus texts. The relevancy of themes was determined using Term Frequency-Inverse Document Frequency (TF-IDF), a commonly used statistical measure of how important a term is in a document or corpus. While I used

automated tools to arrive at the TF-IDF scores for my corpus, the score is manually calculated using the following three steps:

Step 1: Calculate TF	
TF =	$\frac{\text{Number of times the term appears in the document}}{\text{Total number of terms in the document}}$

Step 2: Calculate IDF			
IDF = log	($\frac{\text{Number of times the term appears in the document}}{\text{Total number of terms in the document}}$)

Step 3: Calculate TF-IDF	
TF-IDF=	TF x IDF

Using TF-IDF as a measure of term relevancy in a corpus is supported by Akuma et al. (2022), who studied the efficacy of this measure for identifying hate speech in Twitter discourse. The precision and accuracy of TF-IDF text analysis for finding key terms were also confirmed by Chamorro-Padial et al. (2022) in their study of identifying key terms in academic COVID-19 discourse.

While the TF-IDF score does not replicate the qualitative depth of my content analysis, objectively identifying the most relevant key terms in a corpus can further enrich qualitative findings. I used the TF-IDF score to measure the salience of the most relevant terms in the corpus to the speaker's role. This step confirmed whether the ten most relative terms in the speaker's remarks matched their dyad role of senior medical expert or political leader. Confirming these roles enriched my content analysis findings by reflecting on the presence and priority of information and reputation-management messages in these texts.

Limitations of Methodology

The first limitation of this study is the time boundaries of my corpus. The transcripts available within my corpus only extend to the end of October 2021. Thus, the period of my study is limited to the first wave of COVID-19 to just after the crest of Alberta's fourth wave. The only option to extend the time boundaries of my available corpus was to create my own transcripts for the COVID-19 press briefings given after November 1, 2021. However, accepting this limitation and using a thorough and verified transcript allowed me to generate more insights about the use of SCCT in these addresses than would be possible for a single researcher to do otherwise.

The second limitation is the reliance on a single coder in my content analysis. Since content analysis involves a researcher (or coder) classifying (or coding) text into categories, human error can occur. This potential for human error, in turn, lowers the degree of certainty that the data has been coded correctly in all instances, also known as data reliability. High data reliability requires multiple coders to analyze the same corpus. It also requires these coders to agree with 70 percent of each other's coding decisions, thus achieving a high degree of

intercoder reliability (Merrigan et al., 2012). As with the first limitation noted above, using a single researcher permitted me to complete this study when it would otherwise not be possible within the timeline, scope, and resource limitations of a graduate capstone project.

The third limitation of my research relates to using a coding template to identify informational or narrative frames and SCCT themes in my corpus. Köhler et al. (2021) note that using templates for content analysis is valued for improving rigour and easing novice qualitative researchers' ability to assess texts accurately. However, the template also limits the analysis within the template categories, even when the researcher creates the template for a specific study (as is the case in my project). It thus does not provide the richness of qualitative data that can be found when researchers deeply engage in the texts. While using a template limited the degree to which alternative insights could be gathered through engagement with my corpus, it also improved the reliability with which I could identify the frames and SCCT tactics I sought.

Finally, the fourth limitation of this study is implicit in the nature of a text-based analysis of public remarks: it only includes message content and excludes other verbal and non-verbal elements. Estimates vary widely regarding how much meaning is conveyed by message content during a speech or address; however, one common reference is as little as 7 percent of the total meaning of an in-person or televised address (Hegstrom, 1979). Nonetheless, analyzing the transcribed text is more efficient for identifying specific SCCT tactics in the message content.

Ethics Approval

Because this study did not involve human participants or their personal data, ethical approval was not required.

Summary

The primary research problem of this analysis is to understand the degree to which Alberta's COVID-19 press briefings in the first four pandemic waves reflect information versus meaning (and reputation) management. This analysis is intended to extend the crisis communication model and substantiate the effectiveness of these communications.

I approached my research problem using human-coded content analysis on transcribed samples of the press briefings given by Alberta's Dr. Deena Hinshaw and Premier Jason Kenney. I combined this analysis with the automated identification of the most relevant terms in my corpus using Voyant Tools. My data corpus was provided through previous work by a University of Alberta research team. Using this source for my data greatly enhanced my research efficiency and the analyzed transcripts' thoroughness and accuracy. However, these transcripts were only available from March 2020 until the end of October 2021, thus limiting the temporal boundaries of my study to that period. My methodology allowed me to answer my research question using a qualitative lens while enriching my content analysis with a quantitative, objective measure of the salience of the speakers' ten most relevant terms in the corpus relative to their dyad role.

I will present my results in the next chapter.

Chapter 4: Results

Through a three-stage analysis, I examined the degree to which Alberta's COVID-19 press briefings reflected crisis communication principles in the texts of two primary speakers, Dr. Deena Hinshaw and Premier Jason Kenney. I systematically sampled 15 pairs of week-long press briefing transcripts for both speakers. In total, 30 transcripts were sampled for the first two stages of my analysis. In this chapter, I will present my findings.

Stage one consisted of a thematic content analysis of message frames to determine if they conformed to the information or narrative (meaning and reputation management) frames. An additional message frame for non-COVID discourse was included to identify the coverage of non-COVID items in the texts. Stage two repeated my thematic content analysis, but here coding for specific SCCT (reputation management) tactics to confirm and enrich my findings of the narrative elements identified in stage one. In stage three, I used the web-based text analysis application Voyant Tools to identify the ten most relevant terms for each speaker in the entire corpus of 173 week-long press briefing transcriptions. This final stage confirmed the salience of my stage one and two findings to the role of each speaker.

Stage 1: Thematic Content Analysis of Message Frames

The first stage of my content analysis identified the message frames for most of the content in the sampled addresses. Only opening and closing signal phrases (for example, "good evening") were omitted from the framing analysis. Through this process, I was able to determine the percentage of the address that relayed information (information frame), attempted to interpret or explain meaning (narrative frame), or was not directly related to COVID-19 or the pandemic response (non-COVID discourse).

The data outline that Dr. Hinshaw and Premier Kenney spent no less than 41 percent of their addresses relaying pertinent COVID-19-related information. Both speakers prioritized information overall, although Dr. Hinshaw did so more consistently. Premier Kenney spent a significant amount of his addresses discussing non-COVID topics in the first two waves of the pandemic: 9.41 and 11.16 percent in waves one and two, respectively, or 8.94 percent overall. While non-COVID topics were present in Dr. Hinshaw's addresses, the percentage of her text framed this way was far lower: 0.41 and 1.64 percent in waves one and two, respectively, and 0.44 percent overall.

The full breakdown of my text frame analysis is presented in Table 2 on the following page.

Table 2 *Text Frame Analysis of Sampled Alberta Public Addresses*

Wave	For Dr. Deena Hinshaw		For Premier Jason Kenney	
	Text Frames	Percent of text covered	Text Frames	Percent of text covered
Wave 1	Information Frame (1)	58.82%	Information Frame (1)	41.04%
	Narrative Frame (2)	48.78%	Narrative Frame (2)	47.81%
	Non-COVID Discourse (3)	0.41%	Non-COVID Discourse (3)	11.16%
Wave 2	Information Frame (1)	48.02%	Information Frame (1)	57.65%
	Narrative Frame (2)	50.27%	Narrative Frame (2)	32.94%
	Non-COVID Discourse (3)	1.64%	Non-COVID Discourse (3)	9.41%
Wave 3	Information Frame (1)	54.35%	Information Frame (1)	54.17%
	Narrative Frame (2)	45.65%	Narrative Frame (2)	43.75%
	Non-COVID Discourse (3)	0%	Non-COVID Discourse (3)	0%
Wave 4	Information Frame (1)	50.00%	Information Frame (1)	53.33%
	Narrative Frame (2)	50.00%	Narrative Frame (2)	46.67%
	Non-COVID Discourse (3)	0%	Non-COVID Discourse (3)	0%
Total for all sampled texts	Information Frame (1)	50.33%	Information Frame (1)	46.86%
	Narrative Frame (2)	49.00%	Narrative Frame (2)	44.20%
	Non-COVID Discourse (3)	0.66%	Non-COVID Discourse (3)	8.94%

Stage 2: Thematic Content Analysis of SCCT Tactics

Stage two of my content analysis focused on detecting the SCCT tactics used in the sampled addresses. Using the coding structure outlined in my methodology section, I identified instances of SCCT within the information or narrative frames of the sampled texts. Individual messages were only coded to a single SCCT category that best fits the message type, thus avoiding double coding for a single message.

As a result of this coding strategy, I was able to identify messages that performed one of the following functions:

- Denied *the existence* of the COVID-19 crisis and response issues or *government responsibility* for the COVID-19 crisis and response issues
- Diminished the *perceived impact* of the COVID-19 crisis and crisis response issues, or perception of *government control* over the COVID-19 crisis and crisis response issues
- Bolstered the government's *shared victim* status or recollection of the government's *past good works*
- Rebuilt reputation by offering an *apology* or some sort of *redress or incentive*

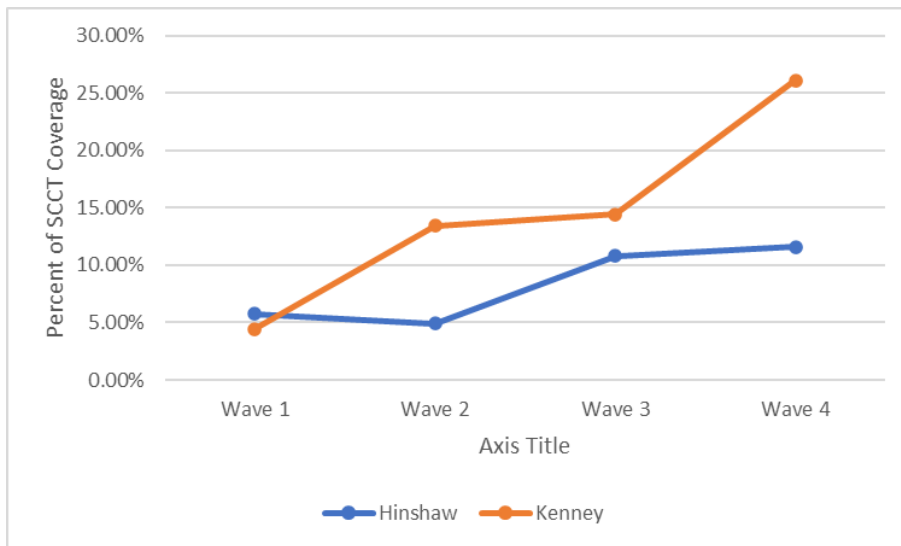
Two measures were obtained after coding was complete:

1. The maximum percent of the text covered by SCCT tactics during the sample period (meaning the maximum amount of “airtime” given to that tactic during the sample period)
2. The average number of times that a specific tactic occurred for each wave

This analysis confirmed that, overall, SCCT tactics were given substantially more coverage in Premier Kenney versus Dr. Hinshaw’s texts. While Dr. Hinshaw spent slightly more time using reputation management tactics in wave one than Premier Kenney (5.75 versus 4.45 percent text coverage, respectively), this trend reversed in subsequent waves. From waves two to four, Kenney’s texts contained 4.24 to 14.5 percent more coverage of SCCT tactics. However, the average text coverage of SCCT tactics for both speakers tended to increase over the course of the pandemic. Overall, the use of SCCT tactics ranged from 4.45 to 26.09 percent coverage of the speakers’ texts.

Figure 1 (below) shows the average SCCT coverage of texts for both speakers.

Figure 1 *Average SCCT Coverage of Texts per Wave*



This analysis revealed that the main SCCT tactics reflected in Dr. Hinshaw's addresses either diminished the perception of government control over the COVID-19 crisis or bolstered the government's status as a victim of the pandemic. In Dr. Hinshaw's addresses, the diminishing tactic typically highlighted public accountability to follow COVID-related health measures and vaccine recommendations. Bolstering the government's shared victim status was achieved mainly through reminders that the government representatives and Albertans shared the hardship of living through the COVID-19 pandemic and were equally responsible for adhering to health measures and vaccination recommendations. While Premier Kenney's addresses also featured these tactics, his texts more prominently bolstered his government's reputation by reminding the public of past good works. These bolstering tactics typically highlighted past government pandemic preparations and healthcare capacity expansion.

The full breakdown of my SCCT tactic analysis is presented in Table 3 on the next page.

Table 3 *SCCT Tactic Analysis of Sampled Addresses for Dr. Hinshaw and Premier Kenney*

		SCCT Tactic Average per Week							
		Denied		Diminished		Bolstered		Rebuilt	
Wave	Speaker	Crisis	Gov. Resp.	Perceived Impact	Gov. Control	Shared Victim	Past Works	Via Apology	Via Redress
Wave 1	Dr. Hinshaw	0.00	0.29	0.00	5.43	8.00	0.29	0.14	0.00
	Premier Kenney	0.00	0.29	0.00	2.00	2.57	2.57	0.43	0.00
Wave 2	Dr. Hinshaw	0.00	0.50	0.00	4.00	3.50	0.50	0.25	0.00
	Premier Kenney	0.00	1.50	0.25	1.00	1.50	5.25	0.00	1.00
Wave 3	Dr. Hinshaw	0.00	2.50	0.00	2.00	0.00	0.00	0.00	0.50
	Premier Kenney	0.00	4.50	0.00	4.00	1.50	1.50	0.00	0.50
Wave 4	Dr. Hinshaw	0.00	0.00	0.00	6.00	1.00	0.00	3.00	0.00
	Premier Kenney	0.00	0.00	0.00	2.00	0.00	3.00	0.00	0.00
Av. all sampled texts	Dr. Hinshaw	0.00	0.60	0.00	4.27	4.73	0.27	0.33	0.07
	Premier Kenney	0.00	1.13	0.07	1.87	1.80	3.00	0.20	0.33

Stage 3: Text Analysis of the Whole Corpus

For the third stage of my analysis, I used Voyant Tools to calculate the term frequency-inverse document frequency (TF-IDF) score for the most relevant terms in the entire corpus of transcribed addresses for Dr. Hinshaw and Premier Kenney, respectively. This process ranked thousands of document terms in order of their TF-IDF score. From these results, I selected the top ten terms, omitting duplicate terms that were reproduced due to minor typographical differences in the transcripts (e.g., “protest” was omitted as “protests” was already present in the relevant terms list).

The TF-IDF score for Dr. Hinshaw’s corpus revealed that the majority of her addresses’ ten most relevant terms were consistent with health-related topics or public health precautions. Premier Kenney’s most relevant terms primarily reflect the political and social sphere. The full breakdown of my corpus text analysis is presented in Table 4 on the following page.

Table 4 *Ten Most Relevant Terms in Speaker Addresses by TF-IDF Score*

For Dr. Deena Hinshaw		For Premier Jason Kenney	
Term	TF-IDF Score	Term	TF-IDF Score
PPE	0.008	Arrest	0.025
Interval	0.006	Airdrie	0.021
Variants	0.005	Protests	0.021
Pregnant	0.005	Peaceful	0.021
AstraZeneca	0.005	Occurred	0.019
Summary	0.005	Treaty	0.017
Dose	0.004	Enforcement	0.016
Halloween	0.004	1876	0.014
Brooks	0.004	Respecting	0.013
Sweden	0.004	Trafficking	0.013

Illustrative Examples: Hinshaw Versus Kenney on Expanded COVID-19 Variant Testing

Throughout my analysis, I encountered several points at which Dr. Hinshaw and Premier Kenney discussed the same topic, though in two different manners. I have included an example to illustrate this phenomenon for further discussion in the next chapter.

During their press briefing on June 1, 2021, both speakers addressed the expansion of laboratory testing for COVID-19 variants and second vaccine doses. To visualize the press briefing content, I created a word cloud of the 25 most frequently used words in both speakers' remarks. Figure 2 and Figure 3 (next page) depict these word clouds.

Figure 2 Word Cloud from Dr. Hinshaw's June 1, 2021, Press Briefing Remarks



Figure 3 Word Cloud from Premier Kenney's June 1, 2021, Press Briefing Remarks



The varying sizes of the words indicate the number of occurrences relative to the other 25 terms included in the visualized text. Both speakers focused on vaccination, second doses, and COVID, as indicated in the word clouds. However, Dr. Hinshaw's less frequent terms (e.g., "MRNA," "screening," "AstraZeneca," "variant," and "health") reflected a focus on health information and advice. In comparison, Premier Kenney's secondary terms (e.g., "we're," "open," "summer," "plan," "work," and "Albertans") alluded to the Open for Summer plan and other topics in the political realm.

The two speakers also differed in how they relayed the information given, as demonstrated by the following excerpts. Dr. Hinshaw explained the variant testing expansion in a very factual, evidence-based manner, reflected by very little of her text belonging in the narrative text frame (the emphasis is mine, and indicates **narrative-framed** text):

Last month, when demand for testing was very high, **our lab made an adjustment to ensure Albertans could continue accessing testing and receiving their results in a timely fashion.** To preserve capacity and keep wait times low, we limited the screening to targeted, high-risk samples and a representative sample of all other populations. This approach was in line with other provinces and was very effective in helping track the spread of variants in a representative sample during our third wave. However, with positive cases rapidly declining, we are now able to once again expand our screening approach. Starting today, all positive test results in Alberta will [be] undergoing screening tests for variants of concern. This includes screening for not only the B.1.1.7 – or UK variant – which is the dominant strain in Alberta, but also the B.1.617 variant first identified in India, and the other two variants of concern, P.1 and B.1.351 (Government of Alberta, 2021).

Premier Kenney, meanwhile, linked this expansion to the government's Open for Summer plan, and a little more than half of the text from this excerpt is typical of the narrative frame (as above, I have added emphasis to indicate **narrative-framed** text):

As some have said that the [Open for Summer] plan is not properly considering variants or taking steps to improve screening for variants of concern. But that

couldn't be further from the truth. Alberta's variant screening system has been one of the best in the country. Starting this week, we are once again screening all positive cases for variants. What's more, this includes screening every single case for the b1 617, so-called Indian variant (Government of Alberta, 2021).

In the following chapter, I will discuss and further contextualize the findings of my three-stage analysis. My discussion will also include the limitations of my research findings.

Chapter 5: Discussion

While the pandemic presented a unique opportunity for study, our understanding of how COVID-related crisis communications unfolded in the public sector is still evolving. The ongoing enquiry into how and when pandemic communications were enacted led to my research question: *To what degree did Alberta's COVID-19 press briefings reflect crisis communication principles (information and reputation management), and how is this shown in an analysis of the texts of the two primary speakers (Hinshaw and Kenny)?* In this chapter, I will use my findings to describe how Alberta's Chief Medical Officer of Health and Premier enacted aspects of crisis communications. I will also touch on the limitations of my study. When required to make sense of certain aspects of my findings, I will provide further context for current events both in and outside the Province of Alberta.

Information or Influence?

To what degree did Alberta's COVID-19 press briefings reflect information versus influence (reputation management)? There is no quantitative reference range for degrees of reputation management use in public discourse. Unlike a viral load detected through a medical laboratory test, a textual analysis like the one conducted in this study cannot conclude that a certain number of SCCT tactic occurrences or percentage of text coverage is high or low relative to other public addresses. Content analysis coding as a single researcher is also inherently limiting because it leads to some subjectivity. Still, some observations are possible based on the findings.

As illustrated by my results, both speakers split their time equally between information and narrative frames. The somewhat even split between narrative and information-framed

discourse implies that neither speaker prioritized meaning nor reputation management over information. The content coded in the information frame was, as the name suggests, about relaying health data, COVID-19 cases, vaccine rollouts, instructions, and specific actions taken by the government. Because the information frame primarily contains either facts or instruction, the text coded in this category only reflects SCCT in the rare instances in which reputation is managed by providing a piece of information (for example, the announcement of the vaccine incentive program). This coding reflects Carey's (2007) transmission view (or role) in communications, as well as Coombs' (2015) information management component of crisis communications.

Conversely, we see Carey's (2007) ritual and Coomb's (2015) meaning management roles reflected in the narrative text frame. Through the enactment of narrative, the narrative frame text attempts to influence how the audience perceives the information through framing or direct reputation management. It is important to note that influencing audience perception of information does not always imply manipulation in the pejorative sense: offering an analysis influences audience perception through constructing meaning from raw data, for example. However, this act of meaning-making allows space for tactics that attempt to influence the audience's perception of reputation.

SCCT is a form of reputation management that integrates an analytic framework for retelling a narrative — reframing meaning. Because it consists of a framework of specific tactics, the presence of those tactics in the narrative-framed text illustrates and confirms the meaning management component of crisis communications.

Use of Influence: SCCT and Direct Reputation Management

In addition to the subjectivity of single-coder analysis, we cannot say definitively that government communicators consciously applied a reputation management model to these press briefings. Nonetheless, the data broadly describes trends in how the speakers used reputation management techniques. One such trend was the general increase of SCCT tactics over time; another was that both speakers consistently used reputation management tactics that belonged to what Coombs (2007) describes as the *victim cluster*.

Even in earlier pandemic waves, Dr. Hinshaw and Premier Kenney bolstered the government's shared victim status through reminders that the government and Albertans were all suffering due to COVID-19. Similarly, both speakers frequently highlighted the government's lack of control over the virus and the necessity for public health measures, thus diminishing the government's perceived responsibility for these unpleasant aspects of the pandemic. The texts continued highlighting shared victim status and the government's lack of control over the pandemic consistently throughout most of the sampled texts.

This positioning makes sense considering threat assessment and environmental scanning are fundamental steps to any communication plan. As we recall from Coombs (2007), assessment through the lens of reputation management is a two-step process. First, one assesses the dominant crisis type by identifying the crisis actor's level of responsibility for it. Second, one identifies the actor's history with the crisis.

The government neither created the COVID-19 crisis nor had a history with it. As such, they indeed were victims of the pandemic, as were all Albertans, and the baseline tactics reflect this positioning. It also comes as no surprise that neither speaker denied the existence of the crisis. Similarly, attempts to diminish the perceived impact of the health mandates on Albertans

were extremely infrequent. Everyone had to take the same bitter medicine, the government included.

The degree of maximum SCCT use tended to increase for both speakers from wave three onward. It is unlikely that this timing was coincidental. Wave three of the pandemic included the Government of Alberta's period of eased restrictions (the "Open for Summer" plan), which resulted in subsequent spikes in case numbers and, later, a public state of emergency, as well as Alberta's \$100 vaccine incentive. Unsurprisingly, wave three is when the SCCT tactics of denying government responsibility for COVID-related issues and rebuilding through offering redress are at their highest levels.

Reputation management is seldom done for the sake of vanity alone. Trust and reputation are critical for boundary-spanning actors like Premier Kenney and Dr. Hinshaw to continue being effective and encourage compliance with prosocial measures like public health mandates (Brandenberger et al., 2022). This observation is also borne out by the experience of the British and Spanish governments, both of whom suffered from poor reputations resulting in flagging public compliance with health orders and eventual loss of political position (Cairney & Wellstead, 2021; Gualda et al., 2021). Thus, the enactment of reputation management is critical to effective crisis communications.

Speaker Roles: Experts Advise, Leaders Influence

How were the themes of information and meaning management shown in analyzing the texts of the two primary speakers, Dr. Hinshaw and Premier Kenny? This part of my research question reflects on the use of crisis communications and the importance of speaker roles in crisis scenarios. The choice of speaker is of critical importance in risk and crisis communication,

as how they communicate information reflects their own perceptions and agendas, directly affecting how the public perceives and interprets the remarks given (Mandl and Reis, 2022).

Overall, Premier Kenney tended to use more SCCT tactics in his remarks than Dr. Hinshaw. This higher level of use can be seen in the text coverage statistics in my results: the premier's texts had up to 14.5 percent more SCCT coverage in his remarks as compared to Dr. Hinshaw. This greater SCCT use is consistent with his role as a political leader. The types of tactics used also tended to vary. For example, Premier Kenney used the reputation-bolstering tactic of reminding his audience about the government's past good works more frequently and consistently than Dr. Hinshaw. This bolstering typically reminded audiences about the province's pandemic preparations, health system capacity expansion, and economic incentive packages. This bolstering also echoes Selart et al.'s (2012) observations that crisis preparation by leaders are communicative acts that affect political capital, further substantiating that these remarks were not random.

Conversely, fewer reputation management tactics were present in Dr. Hinshaw's remarks. However, she did use the tactic of diminishing responsibility by highlighting the lack of government control more than did the Premier. This tactic typically took the form of reminders that the spread could only be stopped, and lockdowns lessened if Albertans obeyed health regulations and got vaccinated. Notably, while Dr. Hinshaw also split her time between information and narrative texts, she employed fewer and less variety of SCCT tactics overall than Premier Kenney.

The differences in SCCT use between the two speakers suggest that they did generally adhere to the twin roles of senior medical expert versus political leader. While both texts

reflected Coombs' (2015) information and meaning management functions of crisis communications, they did so in different ways.

Confirming Speaker Roles: Text Analysis and Examples

The text analysis stage of my study was intended to confirm the relevancy (salience) of my previous findings to Dr. Hinshaw and Premier Kenney's roles. To do this, I used term relevancy (TF-IDF) scores, an established method of identifying relevant keywords in a large corpus of material (Akuma et al., 2022; Chamorro-Padial et al., 2022). Because I could identify these terms using the entire corpus and a text analysis application, this measure is more consistent, albeit less nuanced, than researcher-coded content analysis.

As illustrated in my text analysis results in Table 4, Dr. Hinshaw's top ten most relevant terms were consistent with her official role as a senior medical expert during the COVID-19 crisis. Two prominent terms ("PPE" and "Variants") directly refer to public health measures; four others ("Interval," "AstraZeneca," "Pregnant," and "Dose") pertain to the COVID-19 vaccination campaign. A single term refers to a seasonal celebration ("Halloween"), which refers to the government urging people to practice safe trick-or-treating in a period of relaxed public health measures.

The two location-based terms illustrate Hinshaw's role as a disseminator and interpreter of health information for the public. The first, "Brooks," referred to the 2020 COVID-19 outbreak in a meat processing plant in Brooks, Alberta. Brooks was one of the larger outbreaks that occurred early in the pandemic, despite significant health precautions at the worksite. Accordingly, Dr. Hinshaw had to provide information and reassurance about follow-up actions and the efficacy of public health measures.

Similarly, the term “Sweden” also references a politically charged issue in the early days of the pandemic. In early to mid-2020, Sweden adopted limited to no public health restrictions at a time when many countries were enacting sweeping measures to curb COVID infections. While the Swedish government later rescinded this policy in the face of escalating COVID-19 cases, its early model was used by many critics of broad public health lockdowns (Orlowski & Goldsmith, 2020). As a senior medical expert, Hinshaw would have had to inform Albertans about the government’s health measures and their rationale while defending its position against criticism based on comparison to Sweden’s early “hands-off” model.

Premier Kenney’s most relevant terms confirm the salience of his texts with his role as a political leader. Six of his top ten most relevant terms directly reflected COVID-19 policy and measures in Alberta. These terms were “Arrest,” “Protests,” “Peaceful,” “Occurred,” “Enforcement,” and “Respecting.” These words refer to the anti-COVID health measure protests and law enforcement actions taken concerning those events. While the sample period for my study does not include the timeframe during which protestors blockaded the border crossing at Coutts, Alberta, protests occurred throughout the pandemic, and at least one protester was arrested outside the legislature as early as May 2020.

The remaining terms relate to non-COVID discourse on economic activities and election platforms. Two (“Treaty” and “1876”) pertain to the recognition of treaties signed with relations with Alberta’s Indigenous communities. One prominent term (“Airdrie”) was related to a large highway expansion project in the community of Airdrie, Alberta (a satellite community of Calgary), which was linked to the government’s economic recovery efforts. Finally, “Trafficking” refers to the United Conservative Party’s anti-human trafficking election platform, which Kenney discussed during one of his addresses.

The implications of my text analysis are corroborated by an example passage from Dr. Hinshaw and Premier Kenney's June 1, 2021, press briefing remarks. Despite the briefings prioritizing COVID-19 variant testing and vaccines, their secondary topics and how they use language in their addresses varied considerably. These variations were illustrated by their varying word cloud content and the excerpts from their remarks. Dr. Hinshaw's secondary topics focused on medical information, and her excerpt demonstrated how she tended to relay such information with few narrative elements. Meanwhile, the secondary topics Premier Kenney's briefing remarks reflect political topics, and his example quote shows how he tended to interpret meaning through the use of a greater number of narrative-framed remarks. These examples further illustrate how the two speakers enacted crisis communication through their differing roles through the management of information and meaning.

Limitations of the Analysis

A textual analysis like the one conducted in this study has several limitations. First, because it relies on single-researcher coding, my analysis has an implicit degree of subjectivity (Merrigan et al., 2012). A second limitation is related to the non-COVID discourse category: my original methodology did not anticipate the amount of text Premier Kenney devoted to non-COVID discourse in the first and second waves of the pandemic. This non-COVID content referenced economic activities and policy announcements unrelated to the pandemic. While I revised my methodology to assign a code to this content, I did not code for SCCT tactics within this text as it was not, strictly speaking, crisis communications proper. This choice, however, also excludes this text from my discussion.

Finally, while my analysis has identified evidence of crisis communications principles in Dr. Hinshaw and Premier Kenney's texts, we cannot definitively prove their intentionality. It is possible (although unlikely) that the language and structure of these press briefings was decided intuitively. However, whether or not these tactics were used intentionally, their presence and impact in the text remain the same.

Summary

There is no baseline or reference range for what constitutes a high, moderate, or low degree of crisis communication tactic use. Accepting this and other limitations, however, I can confirm the enactment of crisis communication principles in Dr. Hinshaw and Premier Kenney's press briefing texts.

The first stage of the analysis revealed that text within Dr. Hinshaw and Premier Kenney's addresses both managed information and meaning to a similar degree, splitting their time between the information and narrative text frames. This initial test indicates the texts' use of crisis communication information and meaning management principles. The second stage further substantiated the management of meaning by confirming the presence of specific reputation management tactics. My content analysis identified that SCCT tactics were present from 4.45 to 26.09 percent coverage of the speakers' texts. While the amount of coverage varied from speaker to speaker and wave to wave, reputation management tactic use increased in waves three and four overall.

Stages two and three of my analysis also confirmed that Dr. Hinshaw and Premier Kenney conformed to the roles of a senior medical expert and political leader, respectively. These roles perform different functions within the dyad. In this case, Dr. Hinshaw, the senior

medical expert, has the educational and professional background needed to accurately transmit and interpret complex health information and guidance to the audience. As the political leader, Kenney primarily works to manage meaning in the social domain. Each speaker's role in the dyad was first illustrated through the degree and type of specific SCCT tactics employed. Their roles were further confirmed through a text analysis of each speaker's corpus and illustrated through an example.

Chapter 6: Conclusion

It is fitting to conclude this study by first recalling Carey's (2007) statement, "there is reality and then, after the fact, our accounts of it" (p. 43). Successful public messages manage both the facts and the narratives about those facts. During an emergency or disaster, these practices are essential. Accordingly, successful crisis communications follow basic principles set out in major theoretical models.

I began this enquiry with the aim of using adherence to these principles as an indirect test of the effectiveness of Alberta's COVID-19 crisis communications. The weekly COVID-19 press briefings were the primary vehicle through which the government addressed Albertans and was considered one of the most trusted sources of pandemic-related information (Health Quality Council of Alberta). My thesis and Alberta's use of press briefings during the pandemic led to the research question, *to what degree did Alberta's COVID-19 press briefings reflect crisis communication principles (information and reputation management), and how is this shown in an analysis of the texts of the two primary speakers (Hinshaw and Kenny)?*

Overall, my findings indicate that the COVID-19 press briefings did indeed reflect the crisis communication principles outlined by Coombs (2007, 2015, 2020). The presence of these principles is reflected through their use of information and meaning management and specific reputation management tactics. We can draw from this that these press briefings, the main backbone of Alberta's communication strategy, were at least somewhat successful in their aim.

The dyad of a senior medical expert and political leader is also consistently reflected in these addresses. I introduced this capstone by describing how other countries and levels of government also used a similar division of expert and leader, of which the UK's Professor Stephen Powis and late Queen Elizabeth II are vivid examples. This pattern reflects the twin

streams of information and meaning management in crisis communications and Carey's transmission and ritual view. I would be remiss if I did not add that the choice to segregate these roles is likely pragmatic: medicine and epidemiology are complex topics, and related information is best translated to audiences by experts in these fields. However, such experts are typically not elected leaders or heads of state.

Some of my findings were surprising. The first was the amount of time Premier Kenney devoted to non-COVID discourse in the first and second waves of the pandemic. To establish the scope of this study, I had to define and maintain the distinction between this non-COVID text and the two functional aspects of the discourse: information and narrative-framed remarks related to the COVID-19 response. While the scope of this study excluded this non-COVID discourse from my formal discussion, I can speculate that its presence in the earlier waves of the pandemic could be interpreted as an attempt to maintain some sense of normalcy at an uncertain and unstable time for Albertans.

Also unexpected was the finding that influence-related discourse tended to increase during the pandemic's waning days. Although there is a connection between the spike in COVID-19 cases that followed the government's "Open for Summer" plan and the subsequent rise in specific SCCT tactics (denying government responsibility and rebuilding through redress), additional factors likely contributed to this overall and sustained increase in influence management. It is possible that leveraging these tactics was perceived as being necessary to stay the course and encourage more Albertans to get vaccinated after more than a year and a half of pandemic disruptions.

The COVID-19 pandemic was a long-lasting, truly global crisis the likes of which we had not endured in recent decades. The duration and extent of the pandemic also mean that related

crisis communications were enacted on a scale and timeline that went well beyond what has been examined through prior crisis communication scholarship. The value of these findings is that they can contribute toward an evolving understanding of crisis communications enacted over extended periods. At a more local level, understanding some small part of how the Government of Alberta enacted its crisis messaging can also contribute toward preparation for future emergencies in this province.

Whether it is another pandemic, extreme climate change-related events, or some other unforeseen disaster, Albertans and the world will face another years-long crisis at some point. We can embrace collective amnesia and put our recent experiences behind us or use what we learned to prepare for the future. Not all emergencies and disasters can be prevented, but they can be weathered with preparation. Building our understanding of crisis communications is an essential part of that planning.

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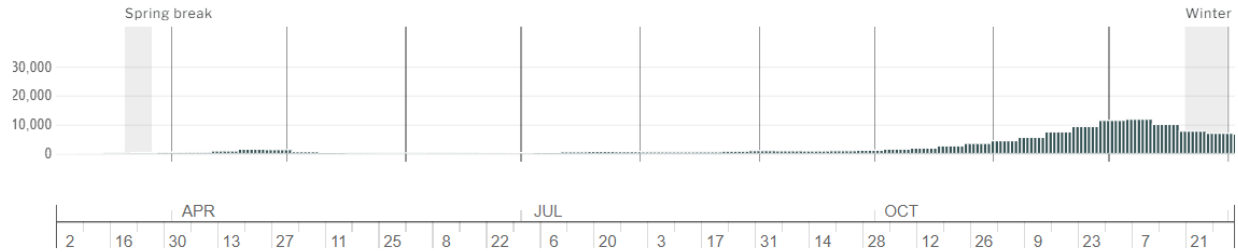
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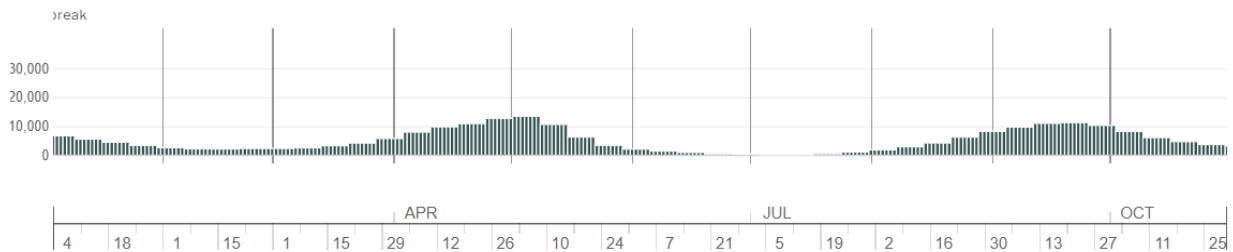
Appendix A: Weekly COVID-19 Case Counts in Alberta

Figure 4 *Weekly COVID-19 cases in Alberta from March 2, 2020, to January 3, 2021*



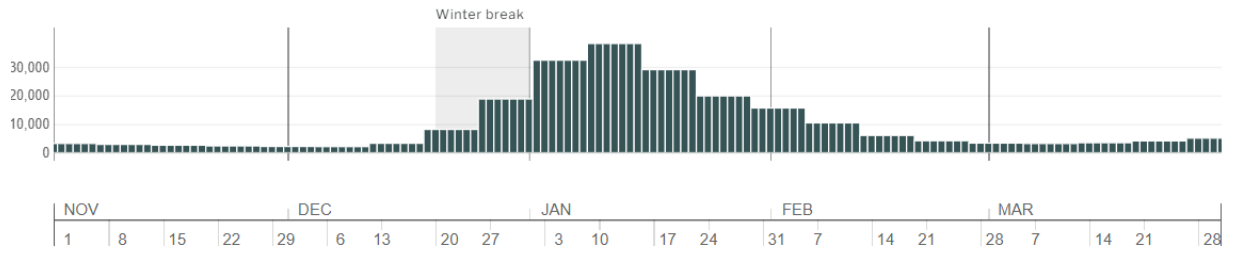
Note. Adapted from *Canadian COVID-19 Intervention Timeline*. Canadian Institute for Health Information. Copyright 2023, Canadian Institute for Health Information. Used with permission.

Figure 5 *Weekly COVID-19 cases from January 4 to October 31, 2021*



Note. Adapted from *Canadian COVID-19 Intervention Timeline*. Canadian Institute for Health Information. Copyright 2023, Canadian Institute for Health Information. Used with permission.

Figure 6 *Weekly COVID-19 cases from November 1, 2021, to March 31, 2022*



Note. Adapted from *Canadian COVID-19 Intervention Timeline*. Canadian Institute for Health Information. Copyright 2023, Canadian Institute for Health Information. Used with permission.

Appendix B: Government of Alberta COVID-19 Press Briefing Coding Table

Coding Category	Coding Criteria
Message Frame	
1. Informational	The text transmits crisis-related information (Code in text blocks)
2. Narrative	The text manages meaning through interpretation of the information presented or SCCT tactics (Code in text blocks)
3. Non-COVID Discourse	The text is unrelated to COVID-19 or the pandemic response. (Code in text blocks)
SCCT Tactics (Each message can only be placed in a single category.)	
4. Denial group	<ul style="list-style-type: none"> a. Denies the existence of the COVID-19 crisis or crisis response issues b. Denies the government’s responsibility for COVID-19 crisis or crisis response issues (Code each discrete instance)

Coding Category	Coding Criteria
5. Diminishing Group	a. Attempts to lessen the perceived impact of the COVID-19 crisis or crisis response issues b. Highlights the government's lack of control over the COVID-19 crisis or crisis response issues (Code each discrete instance)
6. Bolstering group	a. Reminds publics of shared victim status b. Reminds publics of past good works (Code each discrete instance)
7. Rebuilding group	a. Offers an apology b. Offers some other form of redress (Code each discrete instance)