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Ebola at the borders: newspaper representations and the politics of border control

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ABSTRACT

As well as a site of politics and public health action, the outbreak of Ebola in West Africa has been a focus of media representations. This paper examines print media narratives around border control in relation to Ebola in the UK, the USA and Australia from the start of the epidemic to May 2015. It shows that Ebola became mobilised as a frame through which domestic politics could be discussed. The disease was transformed from a problem for West Africa to a problem for the West. The context of West Africa and affected populations was homogenised and hidden. The focus of reporting centred upon domestic political actions and more local sources of threat.

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Introduction

Infectious threats in one part of the world may rapidly spread to other regions. This is addressed at the policy level through international endeavours at infectious disease control, such as global surveillance systems and the application of the revised International Health Regulations.¹ However, the global spread of disease also engenders public reactions, where fear of disease is often incarnated as fear of 'outsiders' and the closure of borders, both in the literal and socio-cultural sense of that term. The politics of borders therefore encompasses formal political concerns (around the integrity and maintenance of sovereign borders) and socio-cultural concerns (around defending the social group from contagion).

Border control and surveillance is a primary mechanism through which societies respond to threats of infectious disease. Collective understandings of infectious disease tend to produce narratives of intervention which reflect notions of threat, morality and blame.² Since contagion is transmitted through social interaction, social distancing, isolation and quarantine are often a major part of collective responses towards infectious disease.³ The perception of contagion has led to policy and social actions around border control in both historical and contemporary cases,⁴ and remains a persistent frame through which infectious disease is understood and managed.

Before the 2014–15 outbreak Ebola had remained a disease of isolated African communities; however, representations of Ebola have been persistent in the West. The brutal symptomology of the disease, accompanied by the exoticisation of affected communities,

has resulted in Ebola being an important cultural reference around infectious disease, as evidenced by the range of popular culture sources. Earlier Ebola outbreaks have also produced wide media coverage in the West, reflecting and reinforcing this public imagery. Research on media representations of previous Ebola outbreaks shows that media narratives tend to accentuate the exotic and 'African' nature of the disease, and it reveals how the cultural practices of affected communities precipitate outbreaks.⁵ This may serve as a distancing strategy, depicting the grim results of outbreaks but assuring that the West (through Western practices) remains safe from the disease.

However, the 2014–15 Ebola epidemic presents a break from previous events, not just in its scope and impact but also in relation to the experience of the disease in the West. While previous outbreaks were clearly separated from the West, the 2014–15 outbreak threatened to 'infect' the West. This triggered border control and surveillance practices. It also affected the nature of Western representations surrounding the disease. This paper examines the newspaper discourse surrounding the 2014–15 outbreak of Ebola Virus Fever in West Africa, focusing upon debates surrounding border control. The analysis demonstrates that the representation of this outbreak differs from earlier narratives of Ebola in a number of key ways. The contemporary discourse does highlight cultural practices of affected West African communities as an important factor in contributing to the outbreak. However, the paper argues that the Western media reports on Ebola displaced the disease as a problem of affected West African communities to instead focus on the impact in the West. In particular, Ebola becomes a frame through which domestic political concerns can be represented and fought out. The media thereby refocuses the issue to concentrate upon the domestic politics of Western countries, hiding global health debates and the effect on West Africa.

Methods

The paper uses a qualitative analysis of print media to investigate newspaper representation of Ebola in three case countries – the UK, the USA and Australia. The three most widely circulated print media sources of each of the three countries were selected. These were: the *New York Times*, *Wall Street Journal* and *USA Today* in the USA; the *Sun*, the *Daily Mail* and the *Daily Mirror* in the UK; and *The Australian*, the *Daily Telegraph* and the *Herald Sun* in Australia. Across the sample there was a range of broadsheet and tabloid sources. Further, while the sources were chosen in terms of the largest circulation for each case country, in each case the sources chosen included at least one publication which has traditionally endorsed the political left and one that has endorsed the right. Although style (tabloid/broadsheet) did not affect the nature of the discourse uncovered, it did influence the wording through which narratives were presented. Political orientation (left- or right-leaning) was generally negligible in terms of the overall portrayal of the key narratives discussed in this paper, with the important exception of discussions of the domestic politics of the USA.

The media search revolved around seeking out articles that focused upon Ebola and borders and/or security. The search was made excluding articles under 100 words of length (to remove summary reports of events), using the key search terms in either the headline or lead paragraphs. The search inclusions were all articles using the term 'Ebola' and (at least one use of) the terms 'screen', 'airport', 'security', 'border', or 'travel'. The search period was the period for two years up to 30 April 2015. Overall, after the initial exclusion of articles (eg excluding reporting on stock market effects, letters to the editor, and remaining summary articles), 323

articles remained. While the research captured the entire period of the Ebola outbreak until May 2015, the reporting centred strongly around August to November 2014 (with around three-quarters of the articles appearing during that period). This corresponded with both the heightened international interest around Ebola (eg the World Health Organization (WHO) declaring a Public Health Emergency of International Concern in August) and specific cases of Ebola patients in the USA and Europe. From this sample, the key themes and narratives were coded and analysed.

Representations

Across the range of the newspaper sources analysed a number of persistent themes appear. There were some key differences across the sample of the newspapers analysed. For example, as can be expected, tabloid newspapers far more often deployed more dramatic language, while some of the broadsheet reporting included more extended analysis and coverage. Further, as the examination below shows, the more domestic politics of each of the three countries from which the newspapers were drawn resulted in shifts in the framing of the issues, and allowed for competing frames between different newspaper outlets. That said, the dominant discourses around border control and fear were persistent across the sample under investigation. One key finding was that the newspaper narrative throughout the three countries focused on the language of border control rather than security. Although 'security' was a key search term, overwhelmingly the concept was present in the results in the context of descriptive reporting of Security Council events and reporting that the US president had designated Ebola as a key security threat. Further, although there was an acknowledgement that Ebola had made a deep impact on the affected West African countries, these contexts were overwhelmingly absent from most of the reporting, except in generalised ways (as discussed below). This mirrors the fact that the Ebola outbreak reached prominence in the global health arena only following the emergence of key cases in the West (the USA and Europe). The media discourse served to reconstruct Ebola as a problem for the West, ignoring and silencing the core context in West Africa, or representing 'Africa' in general terms.

Fear and contagion

Border maintenance became a key issue in all the three countries. The ability of infectious disease to cross borders and populations was highlighted throughout the newspaper accounts. The issue of border control was also strongly linked to the problem of fear, suggesting that what was under management was not simply the disease but also fundamentally the public reaction.

The importance of the border was clear throughout the accounts. Newspaper headlines pronounced that this 'Deadly disease crosses borders',⁶ and that the crisis was a product of 'Hot Zones without Borders'.⁷ The idea that 'Infectious diseases show no respect for international borders',⁸ which has become something of a truism in public and policy accounts of contemporary infectious disease threats, was constantly brought to the fore.

Efforts to manage infectious disease in the West tend to place particular emphasis on the potential for contagion from the Third World. This is evident in many modern examples of infectious disease governance, including the 2009 H1N1/A Pandemic, SARS, HIV/AIDS and even past outbreaks of Ebola. Scholarship around these cases shows that discourses of

contagion from the Third World dominate public accounts, and may also appear in policy accounts (for example, in the Australian government's policy surrounding H5N1 avian influenza).⁹ Fear of the unknown other is closely linked with the fear of infectious disease and this can be amplified in the contemporary world. The dystopian effects of globalisation – in particular the porosity of borders and the high potential for the 'mixing' of populations and diseases – underpins much of the current Western focus on infectious disease security.¹⁰

This idea of globalised interconnection was evident within the newspaper narrative. It was suggested that 'Ebola is a bushfire that, in our interconnected world, threatens us all!'¹¹ The idea that Ebola would arrive in the West through travel was evident throughout:

'We're a global village,' said Howard Markel, a professor of the history of medicine at the University of Michigan. 'Germs have always travelled. The problem now is they can travel with the speed of a jet plane.'¹²

This was embedded in vivid imagery around the situation in West Africa potentially being transported into the West; for example, 'right now there are corpses in the streets of nations only a plane-flight away.'¹³

Physical distance had so far allowed Western publics to remain shielded from disease threats in the Third World. However, the protective effects of distance were undermined given that 'enforced isolation is not an easy option in a complex and deeply interconnected world.'¹⁴ This idea of the reduced buffer of physical distance was narrated in accounts from all three countries, with suggestions from the UK media that 'The virus has shown that it is able to spread via air travel, contrary to past outbreaks',¹⁵ and from Australian media that 'Australia's great distance from most other nations has previously given us something of a barrier to many diseases. Modern air travel, however, means that an ebola case may be only one flight away',¹⁶ despite the fact that 'Australia has the benefit of being a 30-hour plane ride away from the outbreak's ground zero',¹⁷ while the US media proclaimed that 'The reality is, in an era of globalization, the United States can't wall itself off from the world!'¹⁸

Ebola is a disease that is particularly underpinned by public fear. It has been the focus of various cultural representations, including in films and popular novels.¹⁹ It is clear that, as one newspaper exclaimed, 'an Ebola epidemic is the nightmare scenario which inspires Hollywood disaster movie writers and keeps public health officials awake at night'.²⁰ The importance of the crisis was highlighted in official public health narratives – not just WHO accounts but also in the US president's linking of Ebola with a security threat and a US health official's suggestion that 'this has become the biggest health crisis since the emergence of Aids [sic] 30 years ago',²¹ among others. Given this level of concern from public health and official sources, it is unsurprising that the media discourse picked up on the general public fear and uncertainty around the disease.

Representations of public fear were somewhat evident in the UK and US samples. However, the Australian newspaper representations revolve tightly around the party politics of the problem, and even the UK and US newspapers tended to highlight the issue as a problem of government rather than focusing upon accounts of the public. Where public fear was narrated, this was done in ways that generally highlighted public fears as an overreaction. The *Daily Mirror* recounted the 'Ebola terror at Gatwick as woman dies'²² under the headline 'We're Petrified'.²³ However, most of the UK newspaper accounts of public fear highlighted the absurdity of reactions. It was suggested that 'the arrival of Ebola in the States has brought an almost hysterical reaction in many',²⁴ and that there was 'growing hysteria' around Ebola (here, in the context of a celebrity's travel cancellations).²⁵ Fearful reactions were made light of in the examples where 'Ebola survival kits are being flogged online to panicking Brits',²⁶

and 'Fear in the West over the risk of catching ebola has reached such a peak that an air passenger was pictured wearing a protective suit at an airport.'²⁷ The US newspaper narratives surrounding the public fear similarly tended towards critiques of the public reaction. It was suggested that:

Sometimes disinformation can spread faster than a deadly virus, as proven in recent days by the hyperventilation about Ebola. Tuesday, while a man who had visited West Africa was screened for the disease... tabloids screamed about an 'Ebola scare'... [o]n Wednesday, officials said the man doesn't have the virus.²⁸

The idea that 'Fear of Ebola is spreading faster than the disease itself, and [that this underpinned] the growing paranoia in the United States' highlighted the management of public fear as an important site of Ebola politics.²⁹ It was understood that 'Ebola evokes irrational fears,'³⁰ and suggested that 'We live in a society almost perfectly suited for contagions of hysteria and overreaction.'³¹ The relationship between the fear of Ebola and the wider politics of insecurity – and in particular the issue of globalisation – was highlighted:

you've got a large group of people who are bone-deep suspicious of globalization, what it does to their jobs and their communities. Along comes Ebola, which is the perfect biological embodiment of what many fear about globalization.³²

The fear around border control was explicitly linked to this:

The Ebola crisis has aroused its own flavor of fear...It's a sour, existential fear. It's a fear you feel when the whole environment feels hostile, when the things that are supposed to keep you safe, like national borders and national authorities, seem porous and ineffective, when some menace is hard to understand.³³

In this way the fear of Ebola became an important site of examination in and of itself within the US newspapers. As will be shown below, this can be linked to the particular politics that emerged around Ebola control in the USA.

The US domestic politics of border control also resulted in the finding that newspaper outlets of different broad party-political alignments presented the issue in divergent ways. Thus, while the *New York Times* accounted for the public reaction with suggestions that 'the line between vigilance and hysteria can be as blurry as the edges of a watercolor painting',³⁴ outlets that tend towards conservative politics highlighted different aspects of the public fear. They stated that liberal media outlets (and the government) had downplayed the threat and misunderstood the public instinct:

People are irrational in their assessment of risks, blah, blah. Yes, we can find here and there examples of American overreacting to Ebola. But more in evidence has been the media's own anti-hysteria hysteria.³⁵

The issue of public fear, as with the wider narrative of border measures, became a key site of politics here.

Overall the narrative of fear and the public reflected the broader themes of the newspaper accounts of border control. It was clear that border management was a key point of interest in each of the three case countries. However, as will be shown below, the particular nature of these representations was highly dependent upon national political climates.

Ebola and the West

One of the most troubling aspects of the global health reaction surrounding the Ebola crisis has been the fact that concern and substantial mobilisation around the event failed to materialise until the disease entered the West. While crisis and aid organisations had been

early responders to the outbreak, even the WHO only articulated its highest level of mobilisation (designating the epidemic a Public Health Event of International Concern) following Western interest.

Overall the newspaper documents analysed demonstrate that the discourse around Ebola centred upon the West. The disease was transformed from a problem of the 'distant' area of West Africa to a domestic concern. Issues in the core impact zone were erased and under-emphasised, with only general discussions of 'Africa' (and Africans) appearing (see below), contrasted with specific and prolonged examination of cases in the West.

Overall the newspaper narrative made clear that this was a Western problem. This revolves around stories portraying the ability of the disease to be spread to the West, where:

The epicentre of this perfect storm outbreak may be out-of-mind, out-of-sight West Africa, but as the cases in the US and Spain have confirmed, Western countries like Australia are not immune and all of us have a role to play in the global fight.³⁶

The potential for spread to the West underpinned the discussion of the threat posed by the disease. However, the irony of this attention – where Ebola only became a global health issue after reaching the West – was also acknowledged. For example, it was noted that, following the case of an affected Spanish nurse, Ebola 'is now attracting coverage and seems to have finally sheeted home the horror of the disease for Western audiences';³⁷ and 'Months into the epidemic, Western governments suddenly started paying attention. This was no longer a problem of faraway villages.'³⁸

Nevertheless, the potential effects of the disease in the West were a matter of constant media interest. This included numerous reports on policy and public health concern about this disease, such as the statements that 'It's deadly, it's on the loose, and Australian health authorities are concerned the frightening disease ebola could be headed our way' in the Australian newspapers,³⁹ or that 'Public Health England said that the outbreak was the most 'acute health emergency' facing Britain' and that 'Up to ten ebola cases could be seen in Britain by Christmas' in the UK.⁴⁰

The media narrative around the disease therefore served to transform the issue as a problem for West Africa into a problem for the West. The almost exclusive focus on Western interest, and on the potential for contagion across Western borders, thereby underpinned the sustained discussion of the nature and function of the border control measures. The West is the centre of the media narrative and the centre of the representations of the disease.

The domestic politics of fear

Within the newspaper representations Ebola was transformed from a problem focusing around the outbreak in West Africa, to a problem of the movement of contagion into the West. Further, the disease became a site around which the politics of health was played out. While publics and public fear presented an important strand of the representation, the vast majority of the newspaper reports concerned politics and political actions. In particular, both in Australia and the USA, party and electoral politics was the predominant frame through which Ebola management was cast. While this effect was less pronounced in the UK sample – which focused upon criticism of 'government' actions, rather than imputing different positions to different political parties – it was still clear that Ebola had become a frame through which domestic politics could be understood.

Much of the existing literature on media representations of border control around disease demonstrates the wider politics of borders, for example in terms of representing problems of globalisation and Western–Third World relationships. While these factors (as shown above, and in the discussions around the representations of West Africa below) are evident in the case of Ebola, this is not the primary form of politics presented. Instead, the data demonstrate the way in which domestic politics are used to explain reactions to Ebola. This is evident to differing extents – far less so in the UK reports, clear in the Australian newspapers and overwhelmingly dominant in the US sample. In all cases it was narrated that, while Ebola was (as above) a cause for reasonable concern, domestic political actors were harnessing public fear as a part of general political manoeuvring.

UK

The UK reporting presented the management of Ebola as an issue of government mismanagement. The reports emphasised confusion between different sources of official action and the generally unprepared state of the government in handling the epidemic. This represents an important point of difference from both the US and Australian samples, where party policy shines through as fundamental to the politics surrounding Ebola.

Early in the process of implementing screening measures, the newspapers emphasised the incompetence of the actions taken. For example, it was suggested that ‘Britain’s airport Ebola checks turned into a shambles yesterday,’⁴¹ and that ‘Britain’s ebola screening plans remained in chaos yesterday as airports said they had been given no instructions.’⁴² The inefficacy of British systems of control was highlighted in suggestions that ‘Ebola screening plans were in chaos yesterday, as it emerged travellers might be allowed to stroll into Britain without mandatory checks.’⁴³ Following the implementation of screening measures, the media claimed ‘a day of confusion’, in an article entitled ‘Battling Ebola: Government U-Turn.’⁴⁴ Confusion around these early screening events, eg between different strands of the government, was emphasised (‘Border chiefs yesterday said they could not force travellers to be screened for Ebola – a claim later rebuffed by Downing Street’⁴⁵) and in terms of general confusion and ineffectiveness (‘Ministers were accused of a chaotic response to the ebola crisis last night after it emerged new screening measures amounted to little more than a questionnaire’⁴⁶).

As became quite prominent in the UK sample, the newspapers suggested that the government was serving to manage the fear of Ebola rather than the fact of the disease. For example:

Mr Vaz [Labour MP and chairman of the Home Affairs Select Committee] said: ‘What we need to ensure is that the public feel there is confidence in our borders. This means we need to put in screening at our borders.’⁴⁷

This reinforces the fundamental emphasis on managing public expectations. However, while the government and public processes generally were criticised in the UK case, the particular domestic politics of Ebola management did not come through as strongly as in the contexts of the US and Australian newspapers.

Australia

Australian newspaper accounts focused upon the competing positions of politicians from opposing parties in their stance towards Ebola management. Politically the Australian case is of particular interest. The (Liberal) Australian government refused to send medical personnel to the Ebola-affected region. This became a point of contention between the government

and various international health organisations, and set the tone for the discourse surrounding Ebola management.

It was suggested that 'Tony Abbott [the Australian prime minister] remains concerned about putting Australian personnel in harm's way when there is no commitment they could be safely evacuated and treated'.⁴⁸ Various statements of this position were reiterated throughout the newspaper sample.

However, opposition positions were depicted as a site of political tension in respect to Ebola management. Ebola was described as having been used as a political tool in defining party positions:

Tanya Plibersek is using fear of Ebola coming to Australia, compassion about thousands of deaths in west Africa and growing global alarm to differentiate [opposition leader] Bill Shorten's Labor from Tony Abbott on national security. Concern about Ebola, issues such as border checks or quarantine, whether to try to stop the virus in Africa and whether Australia is dealing with the disease are all grounds to make new arguments and mark out new political territory.⁴⁹

The quote above demonstrates the way in which the newspaper narrative centres upon Ebola management as a site of domestic politics.

This division was highlighted by the newspapers. In an article entitled 'Political split gives nation the jitters' it was reported that:

Bipartisanship on the national security threat posed by the Ebola virus has been ripped up. At a time of great anxiety caused by war and pestilence without borders, Australia's political leadership has split on strategy and threatened to deepen that national alarm and confusion.⁵⁰

In this way the unease around Ebola is at least in part attributed to political divisions and tensions. The idea that national security ought to be a bipartisan issue (evident also in the US case) was used to suggest that using Ebola 'politically' is one of the fundamental problems of the country's management of the issue.

USA

While the Australian sample begins to highlight the linking of Ebola management to domestic politics, this issue was a central and defining theme of the US newspaper reporting. Here party politics, particularly surrounding the then-upcoming elections, dominated the coverage. The Ebola crisis was leveraged as an axel for domestic political action. As was noted in the media the situation 'was turning into a political as well as a public health crisis'.⁵¹

Border control issues were central to the politics here. It was reported that a 'chorus of Republicans calling for the heightened foreign travel restriction',⁵² which also directed the concern over Ebola to more local points of tension. An example of this occurred when 'Scott Brown, the Republican candidate for Senate in New Hampshire, recently said that the spread of the Ebola virus should prompt the US government to seal the border with Mexico'.⁵³ Because of the forthcoming midterm elections political tensions were evident around discussion of the disease. The situation was exacerbated by moves from New York and New Jersey to implement border measures (quarantine) which were not part of federal government policy.

What was evident throughout the newspaper sample under analysis here – and noticeably distinct from the UK and Australian accounts – was that the newspaper outlets themselves divided in partisan lines in reporting on the border control issue. This was evident in the nature of editorial and opinion pieces published by the various outlets. For example, articles from the *Wall Street Journal* and *USA Today* (tending towards conservative policy options) report that:

The lesson is that government bureaucracy should be treated, at every level, as inherently and inescapably incompetent. And that expert opinion should be viewed as mistaken until proven otherwise.⁵⁴

New York and New Jersey shouldn't be making Ebola policy, but if Washington leaves a vacuum, it will be filled. And leaving vacuums is becoming an Obama administration specialty.⁵⁵

Strict border measures were clearly advocated by these outlets, suggesting that the administration and expert knowledge was untrustworthy:

The popular New England Journal of Medicine claimed that 'hundreds of years of experience show that to stop an epidemic of this type requires controlling it at its source.' That's dead wrong. In the 19th century cholera, yellow fever and smallpox were stopped from spreading widely in the US and Europe by travel bans.⁵⁶

And in comparing the Ebola crisis to historical examples of isolation policy:

Allied nations had no hesitancy in banning private travel to and from Europe in the early 1940s as they dispatched considerable resources to end the Nazi menace. In exactly the same spirit, a travel ban on the affected West African nationals may be in order even as outside governments make a big investment in liberating those countries from the threat of mass death by Ebola.⁵⁷

In this, these newspaper outlets mirrored Republican calls to strengthen border control measures and implement quarantine and travel ban measures.

In contrast, the *New York Times* reporting (often also employing historical analogy) tended towards emphasising that Ebola would be best managed in terms of control at its source:

overreacting might just be the way to spread the disease instead of contain it. It is a lesson we learned long ago. During the 14th century Black Death, Venice and other cities introduced a quarantine...to no effect...The city of Milan, well ahead of its time, avoided a major outbreak by isolating sick people and sealing off their houses.⁵⁸

This outlet also often explicitly recognised the conservative discourse, where 'Some prominent conservative commentators dismiss the assurances of scientists, Obama administration officials and the news media as unreliable, elitist blather, contrasting its own reporting as a voice of rational authority on the subject.'⁵⁹

The US sample clearly showed that the Ebola outbreak was spoken of through the terms of domestic politics and political tensions. Ebola management served as a proxy through which debates between conservative and liberal politicians could be played out. This was also clearly evident in the Australian newspaper discourse, although here the media reported political positions rather than overtly speaking for particular viewpoints. In the UK, issues of government efficacy, rather than party politics, were highlighted. In all cases Ebola became an issue of the domestic politics of these countries, rather than an issue of either global politics or the affected West African region.

The spread of Ebola

Infectious disease spread tends to result in the blame and stigmatisation of affected populations. One of the reasons why border control and quarantine makes sense as a social and cultural reaction is that the population being protected is able to 'other' affected communities and band together in keeping members of these affected communities out of the social space under protection. Past outbreaks have seen the 'othering', stigmatisation and harassment of individuals and communities with links to affected areas. This can be seen, for example, in the case of Asian communities in the West during the SARS outbreak, of stigmatisation of communities during the rise of HIV/AIDS, as well as of historical examples surrounding

Spanish Influenza and other diseases. Work on media representations of earlier Ebola outbreaks also demonstrates the way in which 'Africa' became an 'othered' region.

It was clear that generalised depictions of West Africa were present throughout the articles analysed here. These tended to emphasise the cultural factors that (from the perspective of the media discourse) underpinned the spread of Ebola in the region. However, simultaneously, and in parallel with the emphasis on the domestic politics of borders, depictions of the agents of Ebola transmission tended to mirror more domestic concerns. The narrative around the spread of Ebola to the West focused not on West Africa but rather on more traditional domestic concerns. These included fears around terrorism and immigration, and, in the USA, issues surrounding race. Again, the Ebola crisis simply became a frame through which domestic politics was played out.

Importers into the West

Issues of immigration and security were at the forefront of the narratives about the spread of Ebola into these three countries. In the UK sample Ebola was linked with illegal and unwanted immigration. The fact that 'An MP has called for Ebola screening at Dover over fears illegal immigrants could have the disease',⁶⁰ highlighted the link between Ebola and population movements. There were fears that these immigrants would spread Ebola into Europe, given that 'Desperate migrants from Ebola-stricken countries in Africa are attacking police and breaking through a major border to try to get to Europe'.⁶¹ In addition, it was suggested that Ebola sufferers might travel specifically to the UK since 'Deadly Ebola could be brought here by health tourists, experts warn. They say victims may fly to the UK for NHS care'.⁶² In this way the more persistent issue of immigration was discursively linked to the spread of Ebola.

Another mechanism through which Ebola might be spread to the West, it was suggested, was through terrorist activity. This concept was present throughout the three samples. Fear of bioterrorism was connected to fear of Ebola transmission. This was evident in representations surrounding the politics of border screening in Australia, where 'The Palmer United Party senator [Jacqui Lambie] also proposed screening of all airline passengers as a precaution against terrorist "suicide agents" carrying Ebola'.⁶³ Ideas around the use of Ebola as a terrorist weapon were a clear part of the media message:

Islamic terrorists have discussed using the Ebola virus to attack the West, according to reports. Internet intelligence monitored by US agencies uncovered the plans to transmit the disease through biological warfare. The attacks could involve jihadists infecting themselves with Ebola before carrying out suicide attacks.⁶⁴

As with the discussions around immigration, the Ebola crisis was represented in a way that chimed with more persistent domestic concerns.

In the USA, where (as shown above) politics between Democrats and Republicans predominated in the discussion of Ebola, issues of race were also evident. This was clear in the coverage of right-wing criticism of the administration's policy through the frame of race:

Ablow [a psychiatrist and Fox News contributor] implied that Obama hasn't imposed a travel ban on flights from the Ebola-afflicted countries...because of his race. 'His affinity, his affiliations are with them. Not us,' Ablow said.⁶⁵

Issues of race were described as central to the decision-making process surrounding border control. In responding to criticism of the ethics of border measures, expert testimony (here, Gerald Weissman, research professor of medicine) was used:

'The objections are very humane and very lovely,' he said. 'They consider quarantine medieval, and think there's a touch of racism in this. It may be, but I wouldn't care if Ebola came from Sweden.'⁶⁶

In addition, issues of race were evident in newspaper's explanations of the (inefficacy of) government positions:

If Washington's reason for resisting a travel ban from the hotzone countries is fear of being accused of racial profiling, politicians will be relieved by the rainbow coalitions of the afflicted [Ebola cases] in the US – two black, one Asian, one white.⁶⁷

Just as in examples of the use of narratives of immigration and terrorism, the US newspapers' emphasis on issues of race reflected the juxtaposition of domestic political issues with concerns around Ebola.⁶⁸

Representations of the carriers of Ebola into the West, just like depictions of the broader issue of border control, show that the newspaper discourse tended to present the epidemic through the lens of domestic and local concerns rather than international politics. Through the newspaper sample analysed, the discussion focused strongly on the Western nations themselves, giving often only passing reference to Ebola as a particular issue for an affected West African population or to the wider implications in terms of international security and global health.

Depictions of Africa

While narratives around West Africa were clearly marginal to the media discourse surrounding border control, the depiction of these populations highlights the fact that the media narrative focused upon the West. Here, it is clear that the media discourse presented the affected region in generalised terms, and focused upon particular 'cultural' aspects of Ebola transmission. African border control efforts were cited in a few cases,⁶⁹ both in highlighting cases of successful management (eg Senegal and Nigeria) and in terms of inefficacy of airport security as an example of 'Total chaos. Complete corruption.'⁷⁰ Border control measures within African were also represented as unwarranted:

Fear of the virus is rattling would-be tourists to the continent and is underlining the risks some associate with travel to Africa. Anxious African governments have potentially amplified those worries with their own draconian measures to keep the virus from breaching borders.⁷¹

This created a key contradiction with the depiction of (necessary) border control in the West. However, much of the narrative centred on West Africa as a site of transmission.

Past research on the depiction of Ebola in the Western media shows the way in which tropes of African exoticism, and horrifying visions of the virulent African jungle dominate the discourse.⁷² These types of depiction are also prevalent in the wider cultural representation (eg books and films) around Ebola. This type of representation was certainly present within the newspaper sample, as shown in the following quote:

Some [Australian medical experts], wouldn't even entertain the thought that a traveller, suffering from ebola, or even the grim symptoms of the deadly blood disease, would travel 20-odd hours from the steaming jungles of West Africa, make their way through airport security and put Australians at risk.

However, while the above quote – criticising Australia's apparent complacency over the virus – provides an example of the use of these discourses, they did not tend to dominate the sample studied here.

Nevertheless, depiction of 'the jungle' and of West African populations were reinforced through repeated mention of the spread of the virus through bush-meat consumption, which was also suggested as a route of transmission to the West: 'The chief cause is the popularity of "bush meat"... Since bush meat is now being smuggled into London and Paris, scientists warn this could be another source of infection in Europe.'⁷³ In contrast, though to the same effect, it was also indicated that the West would not be shielded from the disease, and that the 2014–15 outbreak was more threatening:

Just as well, then, that no one ever gets Ebola beyond a handful of unlucky souls in the remote rural villages of equatorial West and Central Africa, where locals ignore warning signs and still eat the fruit bats and monkeys that are the chief carriers of this disease. At least, that's what public health experts have been saying for years. Suddenly, though, they are changing their tune.⁷⁴

While depictions of the 'uncivilised' practices of affected populations may not have been as prominent as in previous Ebola outbreaks, they were still evident. More conspicuous were general proclamations around the 'cultural norms' aggravating transmission.⁷⁵

Not without some cause but clearly highlighted in the newspaper representations were issues surrounding the cultural practices around burial and care of the sick, such that:

sustained outbreaks would not occur in the US because cultural factors in the developing world that spread Ebola – such as intimate contact while family and friends are caring for the sick and during the preparation of bodies for burial – aren't common in the developed world.⁷⁶

Transmission through the rites surrounding the deceased was emphasised in the media,⁷⁷ alongside other depictions of the exacerbating nature of 'African' culture.

For example, critiques of the role of traditional healers, rumour, distrust of authority and of modern medicine, and conspiracy theories, were all prominent parts of the newspaper narrative.⁷⁸ While these issues undoubtedly impeded control of the disease in some contexts, the newspapers over-emphasised the role of these factors. For example, the narrative concentrated upon traditional features of the affected communities and cultures. There was only a single article pointing out that aspects of modernisation – population movement and travel, the concentration of people in urban areas, etc – had played an important role in the particular form of the 2014–15 outbreak.⁷⁹ Instead, the newspaper narrative dwelt upon 'traditional' cultural features, referred to the population as inhabiting a homogeneous monolithic 'culture' and provided descriptions of the African 'jungle' rather than the contemporary urban space.

These generalised depictions of Africa, and African culture, served to reinforce rather than negate the general tendency of the media reporting. While the disease originated in West Africa, it is clear that the primary focus of the newspaper representation revolved particularly around domestic issues. The representations of the spread and management of Ebola through the frames of immigration, bioterrorism and (in the USA) racial politics simply highlight the fact that Ebola had become transformed from a generalised 'African' health issue to a platform through which domestic politics could play out.

Conclusion

This study has centred upon newspaper deployment of the language of security and border control. For this reason other important narratives (eg the deployment of aid, the politics of affected countries or international organisations, accounts of events within the affected West African region) were not uncovered by this analysis. Nonetheless, it is clear that the problem

of borders and security was a key frame through which the newspaper media related the events surrounding the Ebola outbreak.

The transgression and control of borders is often central to the media representation of infectious disease. Borders are both historically and contemporarily key to the management of contagion, acting as both geopolitical and symbolic boundaries between the ill and the healthy. Much of the previous research around the newspaper representation of infectious disease shows the othering and exoticising narratives about the (practices and threat produced by) affected populations in the Third World; developing countries are shown as a key site of contagion. While these ideas were present in the reporting around Ebola, this study has shown that the representations in the UK, USA and Australia instead focused on the disease as a frame through which domestic politics was acted out. Rather than the macro-politics of international borders, the border control measures in these countries were narrated in the particular context of domestic party politics and government.

Cultural reactions to border maintenance can be mobilised as a means to engage in domestic politics. Here, concerns around the intrusion of outsiders were evident in the reporting around Ebola. However the outsiders in question were more 'local' in nature. Domestic factors took precedence in the discourse over the more distant problems of West Africa. Thus, to the extent that othering occurred, it involved issues of immigration, terrorism and (national discussions of) race and ethnicity. West Africa itself was largely absent from discussions, and only presented in a general and passing manner.

What is clear from this newspaper analysis is that the Ebola outbreak was used within newspaper representations as a frame through which domestic politics could play out. In all three countries the media centred its focus on the government and party politics, rather than on the disease locus of West Africa. Further, even publics in the West did not appear as central aspects of the discourse, except as the source of the fear that political actors were harnessing; both the public and the wider global context disappear here. Within this sample, Ebola ceased to be an issue of global health – or even necessarily a problem of the health of domestic populations – but became a lens through which political action played out and government competence could be measured. In contrast to many previous studies of border control and the media, portrayals of Ebola did not appear to depict it primarily as an issue of transgression of national and social borders; rather, it was an issue around which public fears could be harnessed and mobilised as an avenue for domestic politics.

Disclosure statement

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Notes on Contributor

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Notes

1. Baker and Fidler, "Global Public Health Surveillance," 1058–1065; and Fidler, and Gostin, "The New International Health Regulations," 85–94.
2. Bashford, "At the Border," 345–348; King, "Security, Disease, Commerce," 763–789; and Nelkin and Gilman, "Placing Blame for Devastating Disease."
3. Abeyasinghe and White, "The Avian Influenza Pandemic," 311–326; Foege, "Plagues"; Gensini, "The Concept of Quarantine in History," 257–261; and Herzlich and Pierret, *Illness and Self in Society*.
4. Auge and Herzlich, *The Meaning of Illness*; Bashford and Strange, "Isolation and Exclusion in the Modern World"; Eichelberger, "SARS and New York's Chinatown," 1284–1295; Foege, "Plagues"; Hooker and Ali, "SARS and Security," 101–126; and Wald, *Contagious*.
5. Haynes, "Still the Heart of Darkness," 133–145; Joffe and Haarhoff, "Representations of Far-flung Illnesses," 955–969; and Ungar, "Hot Crises and Media Reassurance," 36–56.
6. *Daily Telegraph*, October 10, 2014.
7. *Wall Street Journal*, September 20, 2014.
8. *The Australian*, September 19, 2014.
9. Abeyasinghe and White, "The Avian Influenza Pandemic," 311–326.
10. Washer, *Emerging Infectious Diseases and Society*.
11. *Daily Telegraph*, October 26, 2014.
12. *New York Times*, October 9, 2014.
13. *Daily Telegraph*, October 19, 2014.
14. *The Australian*, October 18, 2014.
15. *Daily Mirror*, August 2, 2014.
16. *Daily Telegraph*, October 11, 2014.
17. *Daily Telegraph*, October 14, 2014.
18. *USA Today*, October 23, 2014.
19. For example, Peterson, *Outbreak*; and Preston, *The Hot Zone*.
20. *Daily Mail*, July 29, 2014.
21. *Daily Mail*, October 10, 2014.
22. *Daily Mirror*, August 4, 2014. See also *Sun*, August 4, 2014.
23. *Daily Mirror*, August 4, 2014.
24. *Daily Mirror*, October 11, 2014.
25. *Sun*, October 21, 2014.
26. *Sun*, October 14, 2014.
27. *Daily Mail*, October 17, 2014.
28. *USA Today*, August 7, 2014.
29. *New York Times*, October 18, 2014.
30. *Ibid.*
31. *New York Times*, October 21, 2014.
32. *Ibid.*
33. *Ibid.*
34. *New York Times*, October 20, 2014.
35. *Wall Street Journal*, October 26, 2014.
36. *Daily Telegraph*, October 10, 2014.
37. *Ibid.*
38. *The Australian*, October 4, 2014.
39. *Daily Telegraph*, July 31, 2014.
40. *Daily Mail*, July 31, 2014; and *Daily Mail*, October 14, 2014.
41. *Sun*, October 15, 2014.
42. *Daily Mail*, October 11, 2014.
43. *Daily Mail*, October 15, 2014.
44. *Daily Mail*, October 10, 2014.
45. *Sun*, October 15, 2014.
46. *Daily Mail*, October 10, 2014.

47. *Sun*, October 9, 2014.
48. *The Australian*, October 17, 2014.
49. *The Australian*, October 17, 2014.
50. *The Australian*, October 18, 2014.
51. *New York Times*, October 17, 2014.
52. *Wall Street Journal*, October 17, 2014.
53. *USA Today*, October 16, 2014.
54. *Wall Street Journal*, October 21, 2014.
55. *Wall Street Journal*, October 29, 2014.
56. *USA Today*, October 31, 2014.
57. *Wall Street Journal*, October 25, 2014.
58. *USA Today*, October 10, 2014.
59. *New York Times*, November 1, 2014.
60. *Sun*, October 16, 2014.
61. *Sun*, November 23, 2014.
62. *Sun*, October 11, 2014.
63. *The Australian*, October 23, 2014.
64. *Sun*, October 10, 2014.
65. *USA Today*, October 21, 2014.
66. *New York Times*, October 18, 2014.
67. *Wall Street Journal*, October 26, 2014.
68. Mirroring previous accounts, see, for example, Murdocca, "When Ebola came to Canada," 24–31.
69. *New York Times*, August 13, 2014; and *Wall Street Journal*, October 24, 2014.
70. *Sun*, October 19, 2014.
71. *Wall Street Journal*, August 20, 2014.
72. Jones, "Ebola, Emerging," 1–6; and Haynes, "Still the Heart of Darkness," 133–145.
73. *Daily Mail*, July 29, 2014.
74. *Ibid.*
75. *Wall Street Journal*, September 20, 2014.
76. *Wall Street Journal*, August 4, 2014.
77. See also the *Sun*, August 7, 2014.
78. *The Australian*, October 4, 2014; *New York Times*, August 7, 2014; *New York Times*, October 19, 2014; and *Daily Mail*, June 4, 2014.
79. *New York Times*, August 10, 2014.

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