

## **Ebola the Enemy: How the U.S. Media Militarized the 2014 Ebola Epidemic**

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### **Abstract**

The 2014 Ebola outbreak shocked the world. The scale of the tragedy in western Africa was surprising. But equally surprising was the intensely fearful response of the international public to a disease that most public health experts agreed was unlikely to significantly impact countries with strong healthcare infrastructures. This included the United States, where the intensity of fear with which the American public responded was disproportionate to the actual threat. Because the outbreak is still a recent event, most research into the American public response has focused on describing the extreme reaction that the epidemic produced, only speculating as to what actually caused the fear. This paper will demonstrate that the intense fear of Ebola in America had at least one specific cause: the militarized language that the American media used to describe the disease. Through the media's use of military terms and descriptions, the American people became inclined to view Ebola more as a military enemy than as a medical one, and they largely reacted with three types of responses associated with the threat of war: fear, isolationism, and aggression. Their fear was furthered by the media's tendency to question the decisions of the Center for Disease Control, causing the American public to lose trust in this organization and become reluctant to send aid to Africa, although many public health officials agreed that such aid was necessary to stop the epidemic. This paper analyzes news articles, video clips, and social media comments from August 2014 through January 2015 to reveal that the media's irresponsible use of military language when discussing the epidemic helped cause the unhelpful panic among American citizens. It argues that a humanitarian response characterized by increased funding and aid to the affected countries would have been more effective in both controlling the Ebola outbreak and keeping America safe.

**Keywords:** Ebola, 2014 outbreak, U.S. media

### **1. Introduction**

Nobody knew it was Ebola. The outbreak that would result in the deaths of over 11,000 people in multiple countries began very quietly in Guinea with the illness of a young boy named Emile<sup>1</sup>. Although Emile and many of his close family members died, including his mother and sister, no one investigated too closely<sup>2</sup>. And so the virus began its deadly journey across western Africa.

By the time the World Health Organization figured out in March of 2014 which disease was causing the deaths, the outbreak was already well underway<sup>3</sup>. Ebola spread first from Guinea to Liberia and Sierra Leone, the three countries that would become the epicenter of the epidemic<sup>4</sup>. A short while later, an infected traveller brought it to Nigeria.<sup>5</sup> Soon Ebola had killed enough people to become worthy of media coverage around the world, including in America, where the August news that two infected aid workers would be travelling back to the U.S. for care caused a dramatic increase in the public's interest in the disease<sup>6</sup>.

The primary response of the American public to the 2014 Ebola outbreak is generally considered to be fear. Indeed, it was fear greatly out of proportion to the actual risk, as public health experts insisted both during and after the epidemic<sup>7</sup>. Because this event is so recent, most research up until now has been focused on marveling at the extreme reaction that the Ebola epidemic produced in America and trying to characterize or quantify the fear response, be it through graphs tracking Tweets containing the word “Ebola” or articles analyzing the contents of the top 100 Ebola-related YouTube videos that cropped up during the months of the outbreak<sup>8</sup>. The exact cause of this fear, however, has only been speculated. Some researchers consider it to be the result of exaggeration in the news<sup>9</sup>. Others have investigated the vast amount of misinformation about Ebola that was spread through social media<sup>10</sup>. And a third potential explanation is that the size of the latest outbreak, combined with the horrible way that Ebola kills, is what really drove the American people’s fear<sup>11</sup>.

Although all of these reasons likely contributed to the public panic, none of them are powerful enough on their own to explain why the American reaction was so extreme. There was another very specific cause that no one has yet investigated, rooted in the language that U.S. news corporations tended to use to describe Ebola. The media played a major role in the development of the public fear response in America because it often reported on Ebola using distinctly militarized descriptions of the epidemic. As a result, the public was inclined to view Ebola more as a military enemy than as a medical one, and they largely reacted with three types of responses associated with the threat of war: fear, isolationism, and aggression. This military reaction was only exacerbated further by the news corporations’ tendency to question, sometimes severely, the decisions and statements of the Center for Disease Control (CDC), America’s most prominent public health agency. The American public lost trust in this organization and thus became reluctant to send the aid to Africa that many public health officials agreed was necessary to stop the epidemic and effectively protect the world from the further spread of the Ebola virus. Instead, the way that the news corporations discussed the Ebola epidemic caused the American public to spiral into an unhelpful mass panic, when any hope we had of controlling the outbreak required a compassionate, humanitarian response on the part of the world’s citizens.

This paper analyzes American news articles, video clips, and social media comments about Ebola from August 2014 through January 2015 to argue for the media’s involvement in causing the public fear. Video clips and the accompanying comments were mainly sourced from YouTube, where clips were chosen based on how many views they had and what points of view they represented. Videos with the most views and the most comments at the time of the analysis were included, as well as clips that were less popular but represented different political opinions and sources. Articles were chosen for analysis based on how high up they were in Google searches for “Ebola outbreak 2014,” “Ebola scare,” etc. Over 80 videos and articles were analyzed from American media organizations, both liberal and conservative, including CBS, CNN, ABC news, Fox News, and The New York Times; 20 of these are directly cited in the paper. A number of books and journal articles were also included for background information on Ebola, American media and its effects on the public, and current research on the 2014 epidemic.

## 2. The Language of Ebola

Nancy Writebol and Dr. Kent Brantley were two American missionaries who had traveled to Monrovia to help the struggling Liberian health care system tend to the many sick and dying Ebola victims<sup>12</sup>. Monrovia was the first major urban center in the world to experience Ebola, which had spread rapidly through the congested streets and plunged the city into chaos<sup>13</sup>. Liberian doctors were doing the best they could to comfort the dying, but they simply didn’t have the staff or the resources to control the epidemic<sup>14</sup>. As a result, the disease traveled quickly, spreading among laymen and healthcare workers alike. Writebol and Brantley, too, became infected. Realizing that they would receive far better care in America than in Liberia, the decision was made to transport them by private jet to Atlanta so that they could get “the kind of 24/7 Western medical care... [that] just might save their lives,” as one ABC news video put it<sup>15</sup>.

Although there were scattered articles and news reports throughout the early summer of 2014, it wasn’t until the decision to transport these two aid workers back to the U.S. was announced towards the end of July that American news coverage of the Ebola epidemic really took off. And from the earliest reports, newscasters chose a distinctly military way of speaking about Ebola. Another ABC news video released the day before Dr. Brantley was flown to Atlanta is entitled “Battling the Ebola Virus Back Home,” and one of the smaller headlines used in the video labels his transportation a “Critical Mission” - “mission” being a word with distinctly military connotations<sup>16</sup>. News anchors in this and later videos described the process of dealing with Ebola as a “battle” and the areas in Africa where it is most prevalent as “the danger zone”<sup>17</sup>. Another video released to YouTube in August, this one an offering from the New York Times, chronicles the efforts of a team of young men in Sierra Leone whose job it was to safely bury the bodies of people in rural villages who had died of Ebola<sup>18</sup>. These men are described as being on the “frontline of the

outbreak,” and the author of the video chose to highlight the comments of one particular member of the team who insists that he is “a soldier, because we are now on the battlefield”<sup>19</sup>.

These descriptions were only the beginning of a long series of news articles that continued to describe Ebola in military terms until the news coverage finally died down in December of 2014. One particularly vivid description from a video in late August explained how the “virus march[es] relentlessly across parts of Africa”<sup>20</sup>. A favorite phrase that was repeated over and over again in videos and articles across the political spectrum was “fighting Ebola,” or “battling Ebola.” The idea of Ebola being an enemy to fight or do battle with was applied to everything from the relief efforts of workers in Africa to the personal “battle” Thomas Eric Duncan “fought courageously” with the disease before he became one of only two people to die of Ebola in America<sup>21</sup>. These kinds of military phrases were consistently used and reused in American reporting throughout the course of the epidemic.

There are many reasons why the media might have chosen to report on Ebola using military language. For one, as author Barry Glassner argues in his book *The Culture of Fear: Why Americans Are Afraid of the Wrong Things*, mass fear can be very profitable to those who cause it<sup>22</sup>. Another reason might be the influence of compassion fatigue, a phenomenon Susan Moeller describes in her book analyzing media coverage. Because news is so sensationalized, Moeller argues, the media thinks that Americans won’t care about a story that doesn’t directly affect them. So instead of aiming at America’s conscience, the media chose to spin Ebola as a threat<sup>23</sup>. But ultimately, the explanation might be even more simple; the kind of colorful, militarized language that the media used to describe Ebola simply makes for good news, and news that is probably especially appealing to Americans what with our culture’s heavy focus on war and military might.

No matter the reason why news corporations chose to report on Ebola the way they did, the language that they used caused a fear response in the American public similar to that which would happen if the country was actually at risk of being at war with a military enemy, not a disease. The incredible scale of the fear response was its first notable feature; most researchers who have studied the epidemic agree that many Americans were convinced that Ebola posed a much greater danger to themselves than it actually did<sup>24</sup>. An analysis of Twitter feeds from 2014 shockingly revealed that: “there were more tweets about Ebola in the USA, where transmission [of the disease] was contained, than in Guinea, Liberia, and Sierra Leone,” the three countries at the center of the epidemic<sup>25</sup>. Even the popular name by which many Americans today refer to the event, “The Ebola Scare,” points to the massive public fear response that arose from the news coverage.

This fear was similar to the fear a public might display about a military enemy or the chance of becoming involved in the war, likely as a result of the militarized language that the media often used to describe Ebola. This connection becomes clear when one considers the two main types of responses people had to the Ebola crisis, especially after the first two infected Americans were brought back to the U.S. These two responses were isolation and aggression: two classic reactions of any public to the threat of war. In one camp, there were those who wished to stay out of the conflict: closing down America’s borders, remaining neutral, and waiting until it was absolutely necessary to enter the “fight” against Ebola, if it became necessary at all. This isolationism has shown up in America before, most notably during the first part of World War II, and it showed up again during the Ebola crisis. In the other camp were those members of the public who preferred to just “F\* BOMB AFRICA,” as one YouTube user recommended in a comment on an ABC news video posted in October of 2014, during the peak of American reporting on Ebola<sup>26</sup>.

Unfortunately, this quote isn’t an isolated incident. Multiple examples of both responses, isolation and aggression, started sprouting up everywhere in social media and increased every time the news organizations released another video<sup>27</sup>. Some responses tended towards isolationism, like one YouTube commenter’s suggestion: “We should quarantine the entire African continent”<sup>28</sup>. Another comment expressed a similar sentiment, though in less harsh language, when they urged Americans to: “Call your congressman to tell them to ban flights from infected West Africa”<sup>29</sup>. Aggressive comments were less common, but they tended to be more extreme and were probably influenced at least partially by racial prejudice. In addition to various calls to bomb or nuke western Africa, including the one quoted above, more personal attacks on Ebola victims were also recommended: “gas ‘em then burn them, and bury them,” one commenter suggested<sup>30</sup>.

These comments are on the extreme end of the reactive spectrum, but they are reflective of the general atmosphere in America at the time. Among the American public, a CBS news study conducted in October of 2014 and quoted in the short essay “Aids, Ebola, and Politics” revealed that: “27% [of Americans] think foreign visitors from West Africa should not be allowed to enter the United States, and another 56% think they should be quarantined on arrival”<sup>31</sup>. That’s over 2/3 of the American public voicing their support of an isolation response to the Ebola epidemic. The isolation response was also especially strong among politicians, and many conservatives used the controversy surrounding the decision to bring Ebola patients back to the U.S. (and later the arrival of a traveler from Liberia, Thomas Eric Duncan, who brought the disease to the U.S. with him) as an opportunity to criticize President Obama’s response to the outbreak<sup>32</sup>. Especially common was the call to close the borders of the country. For example, Dr. Keith

Ablow, a psychiatrist and an opinion writer for Fox news, wrote in his article “Ebola Outbreak: Why Obama is allowing Ebolaphobia to spread”: “I believe the president may literally believe we should suffer along with less fortunate nations. And if he does, that is a very dangerous psychological stance from which to confront Ebola”<sup>33</sup>. Dr. Ablow goes on in the article to recommend his own alternate plan for dealing with the Ebola crisis: “The correct stance against Ebola is a medical-military one that replicates fighting a war in which the enemy has already come to shore and attacked a city.... The borders should be sealed to travelers who have visited nations affected by Ebola within the past 30 days”<sup>34</sup>. Of course, responses like Dr. Ablow’s appeared back in the media coverage again through quotations and paraphrases, continuing the cycle of militarized language and fearful public response.

The calls to isolate the country and take more aggressive “medical-military” action, as Dr. Ablow put it, continued throughout the course of the outbreak. After the controversy over bringing Writebol and Brantley back to the U.S. and the national panic caused by the arrival of Thomas Eric Duncan, the first person to be diagnosed with Ebola in America, one of the next major news events was the diagnosis of Dr. Craig Spencer, who had recently returned from treating Ebola patients in Guinea. Before getting sick, he had spent a day traveling around New York, eating at restaurants, using public transportation, and even visiting a bowling alley<sup>35</sup>. Despite his insistence that someone infected with Ebola isn’t actually contagious until he or she develops symptoms, a statement that most contagious disease experts still consider to be true, Dr. Spencer was vilified in the media and attacked by private citizens and politicians alike, to the point where he felt it necessary to publish an article justifying his actions<sup>36</sup>. Spencer was diagnosed on October 23<sup>rd</sup>, months into the media coverage of Ebola in America; but clearly, public fear was still strong, and their response distinctly military in style<sup>37</sup>. The media, too, continued to report on Ebola using the same martial metaphors coined at the beginning of the outbreak that were responsible for sparking and feeding the growing militarized fear response of the American public.

Military language wasn’t the only kind of metaphorical language used to describe Ebola in the media, but it was one of the more predominant styles and had one of the greatest effects. Other metaphors simply served to fuel the fear that military language had provoked and sink people deeper into their isolationist or aggressive responses. One of the most striking similes for Ebola came from Dr. Tom Frieden, the director of the CDC, who stated in one interview that: “Ebola is really like a forest fire. If you leave one ember burning, it can flare up again”<sup>38</sup>. In this interview, Dr. Frieden was stressing the importance of stopping Ebola in western Africa in order to truly be able to keep Americans safe from the disease<sup>39</sup>. His intention with this comment, then, was probably to illustrate how uncontrolled the outbreak was in Liberia using a metaphor that Americans would easily understand. However, comments like this only fed the fear that had already taken hold of the public’s mind. Frieden’s approach failed; instead of encouraging the public to think more rationally about what measures were needed to stop the outbreak, the fear response merely continued. People who had already been predisposed to view the epidemic in a military light because of the language of the news sources hung onto their isolationist and aggressive responses. And the media continued their coverage as well.

### 3. The Real Ebola

One of the problems with the American public’s response to the Ebola epidemic is that the real Ebola virus is not like how the media portrayed it. Ebola actually isn’t as scary as one might think. Because the virus is only spread by direct contact with the body fluids of someone who is infected and, most public health experts agree, showing symptoms, it is not as easy to catch as the American public was led to believe<sup>40</sup>. In western Africa, the disease spread rapidly mostly because the healthcare systems in the affected countries did not have enough personal protective equipment or isolation wards to effectively quarantine the victims<sup>41</sup>. But the U.S. had several hospitals that were specially equipped to handle Ebola patients, and the CDC stated that Ebola could even be controlled in a regular hospital with good planning and careful, effective use of personal protective equipment<sup>42</sup>. The U.S. was well prepared to handle the Ebola virus, which was why the apocalyptic scenario many Americans feared would occur when cases started to arrive in the U.S. simply never materialized. In an interview for the recent book on the 2014 Ebola outbreak, *Ebola: An Evolving Story*, infectious disease expert Dr. Michael Osterholm stated that “the likelihood of EVD [Ebola Virus Disease] taking hold in the US as it has in Sierra Leone, Guinea and Liberia is next to nil”<sup>43</sup>. In this statement, Dr. Osterholm is in agreement with most of his colleagues who continue to argue that, although Ebola was devastating to western Africa, it is unlikely to significantly impact nations with strong healthcare infrastructures<sup>44</sup>.

Ebola would only become a serious threat to Americans if it mutates and is then able to spread through the air like several of history’s other destructive diseases, such as the Spanish influenza that caused the great pandemic of 1918<sup>45</sup>. Scientists differ in how likely they consider such a mutation to be. Some, like the author of *Ebola: An Evolving Story* James Lyons-Weiler, fear that the disease might become airborne quite soon<sup>46</sup>. Others, including thinker Malcolm Gladwell, agree with the majority of the medical community that such a strain is unlikely to emerge<sup>47</sup>. But as of right

now there is little medical evidence to suggest that Ebola can be spread through any means other than direct contact, making the disease fairly non-threatening to Americans.

The other problem is that, despite the news organizations' attempts to militarize Ebola, a disease is not an army. Isolationism and aggression can be two useful responses to an actual military conflict; the one protects a country from unnecessary involvement in an expensive, destructive war, and the other lets the enemy know the conviction and power of the people it has decided to attack. However, they are not productive responses to an outbreak of a disease. The public health experts who were most prominently featured in the news segments about Ebola, such as Dr. Thomas Frieden, the director of the CDC, insisted time and time again that stopping flights to Africa was not the answer to the Ebola crisis. Instead, Frieden stated that "the best way to protect Americans is to stop it in Africa"<sup>48</sup>. In a later interview with Fox News, Dr. Frieden justified this viewpoint by saying that, as long as the epidemic was uncontrolled in Africa, there was always the possibility that the virus could make its way back to the U.S.: an argument that makes logical sense considering our global culture and economic dependence upon other countries<sup>49</sup>. Dr. Frieden was not the only one who endorsed this action plan. Dr. Richard Besser, the medical correspondent for ABC news, also said that the diagnosis of Dr. Craig Spencer in New York much later in the outbreak was "proof that until we knock this out of west Africa, we will have more disease here."<sup>50</sup> Overall, medical experts generally agreed that the Ebola outbreak needed a humanitarian response, one that involved sending as much aid as possible to western Africa to help stop the epidemic. This response would ultimately have been the most effective way of keeping Americans safe from Ebola.

Unfortunately, Frieden and other experts were almost constantly questioned by the news agencies to which they were speaking, and some news anchors even seemed to be actively trying to undermine their claims. Towards the beginning of the scare, when the first two American Ebola patients were returning to the U.S., an ABC reporter questioned Besser about the "confidence of medical officials" in the decision, asking "Are you sure there isn't any overconfidence here? Couldn't something go wrong"<sup>51</sup>? The double question that the anchor used further emphasized the potential for doubt in the doctor's statements. As the scare continued, Fox News especially arose as a major criticizer of the CDC and started to really push back on medical officials' claims, urging them to "keep it safe," "do a better job," and bring "an action word... to the table" (as opposed to the tried-and-true epidemiologic technique of surveillance, which Dr. Frieden was endorsing at that particular interview)<sup>52</sup>. This constant backlash from the news corporations and the phrases they chose to use, such as accusing Frieden of lacking an "action word," made the CDC seem apathetic and disconnected, causing them to lose face with the American public.

Thus, the medical experts and the news corporations entered into an ideological deadlock. The CDC's plan to stop Ebola at the source in Africa was a medically accurate one, but because the news anchors constantly pushed back against it the public continued to fear that the plan wouldn't be enough. The CDC recognized the desperate need to send more people and more money to the affected countries, but because of the media's portrayal of the CDC as apathetic and Ebola as a military enemy, the American people became reluctant to provide the needed aid. After all, when a country is at war, the last thing the public would want to do is send money and extra soldiers to the enemy. The language that the news corporations used during the Ebola epidemic created a poisonous atmosphere of uncooperativeness among the American public, bred by fear and provoking more of the "medical-military response" that psychiatrist Dr. Ablow thought was a good idea instead of the compassionate, helpful response that most public health experts agreed was what the outbreak really needed<sup>53</sup>.

This description of the American people's response to Ebola is not meant to imply that the U.S. did nothing to help with the epidemic in Africa. On the contrary, the U.S. sent millions of dollars abroad when they heard the call for aid<sup>54</sup>. However, the international response to the Ebola epidemic as a whole was lacking. The World Health Organization (WHO) was especially criticized for the disappointing way in which they handled Ebola, their response being described by Jeremy Younde of the University of Minnesota, one member of a conference of political scientists who gathered to discuss and write essays about the Ebola epidemic, as "woefully inadequate"<sup>55</sup>. WHO initially failed to recognize the reports from Doctors Without Borders and other agencies that the epidemic was out of control, and at first refused to cooperate with the CDC<sup>56</sup>. And after WHO finally did get involved, the organization suffered from a serious lack of funds and internal organizational issues. Other members of the political science conference pointed out in their essays that WHO's recent budget cuts and reluctance to respond might have been linked to the international public's feelings of betrayal and resentment towards the organization after it overreacted to the emergence of the swine flu in 2009<sup>57</sup>. There is a serious concern, then, that the American public could harbor that same sort of resentment towards the news organizations that reported on Ebola as if it was more of a threat than it was, making the U.S. less likely to respond with aid in future epidemics. And maybe we could have done even better as international citizens, been more willing to send money and aid workers, and stopped the epidemic sooner if the media had reported more responsibly on the 2014 outbreak.

## 4. Conclusion

On December 23, 2014, Fox News reported that Politifact.com had declared “hyped-up claims” about Ebola to be the “Lie of the Year”<sup>58</sup>. What the news corporation failed to acknowledge was that it was a lie of the media’s own creation. Through their use of language, the media turned “rational concerns” about Ebola into “irrational fears,” as one political science publication put it<sup>59</sup>. The CDC and other public health experts had insisted throughout the course of the epidemic that nothing approaching the apocalyptic scenario many Americans feared would happen. But because the news organizations chose language that made the CDC seem apathetic, the public wasn’t inclined to believe them. Instead, the media pushed the public towards a different response: a military one. The public became reluctant to send western Africa the money and volunteers it needed, although the CDC continued to push for aid and ultimately succeeded in winning a lot of the money it asked for.

The question is, what will happen when the next deadly outbreak emerges? New diseases are continuously cropping up as humanity burrows further and further into uncharted territory in search of more land and resources. We can not afford to repeat our same mistakes, especially if the next disease turns out to be just as deadly but far more contagious than Ebola. So it is important to fully understand each cause of the unhelpful fear that was the response of much of the American population.

We return, then, to some of the previously-identified potential causes of this fear: exaggeration in the news, misinformation, and the large size of the Ebola outbreak. Exaggeration on the part of the news corporations was ubiquitous and likely a factor; even the CDC director himself, Dr. Thomas Frieden, participated in the exaggeration when he compared Ebola to a forest fire<sup>60</sup>. It is also true that misinformation spread rapidly through social media, but the news organizations actually combatted such poor-quality research with their own, more accurate articles. Lastly, the amount of people that Ebola affected was not important in itself; after all, millions of people die from malaria every year, but that disease rarely makes headlines. The size of the epidemic was only important because it caused the outbreak to be worthy of American news coverage. And then the reporters had a language field-day.

If Ebola was a forest fire, as Dr. Frieden said, then so too was the fear of Ebola, which spread as rapidly through the American public as the disease itself had spread through the crowded streets of Monrovia. The fuel of this particular fire was the way that the American media chose to report on Ebola. Using distinctly militarized language and choosing words that made the CDC look apathetic and reluctant to act, the news corporations planted fear among the American people. And just as the language was militarized, so too was the fear response, as the public called for isolationist or aggressive responses to the crisis in western Africa, instead of the compassionate, helpful response that was desperately needed. If we are to understand infectious diseases like Ebola, send the appropriate aid, and effectively keep the world safe, we can not continue to respond to the emergence of disease with fear, let alone military action. A more responsible use of language on the part of news corporations is absolutely necessary to keep the world safe from future epidemics of Ebola and more dangerous diseases.

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