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MEDIA AND COMMUNICATION**

“UN-MASKING THE MASK-ISSUE”

**Examining People’s Meaning-Making Processes and Risk-
Cultural Norms regarding Facemasks**

Tim Arasimowicz

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Program and/or course:	Master’s Programme in Political Communication
Level:	Second Cycle
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Supervisor:	Gabriella Sandstig
Examiner:	xx
Report no:	xx (not to be filled in by the student/students)

Abstract

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While most of the world quickly came to terms with covering their noses and mouths in crowded places, people in Sweden have mostly gone without, riding buses and metros, shopping for groceries, and going to school maskless, with only a few rare souls have covered up (Novus, 2021). Officials from the Swedish Public Health Authority (PHA) have repeatedly argued that masks are not effective enough at limiting the spread of the virus to warrant mass use, insisting it is more important to respect social distancing and handwashing recommendations. The current field of sensemaking research related to crises has often left out that the fact that meaning-making is a process embedded in the context of individuals' social lives (Sandberg & Tsoukas, 2015). Previous research on risk and crisis communication has shown that different social, political, cultural, and economic conditions have created different risk cultures in which expectations about the responsibilities of society and individuals vary when a crisis occurs (Corina et al., 2016).

By revisiting core assumptions related to Sensemaking and Risk Cultural perspectives, the purpose of this thesis was to analyse how people, depending on their ethnic background and citizenship, have made sense of facemasks amid the COVID-19 pandemic. In essence, this thesis addressed people's collective experiences, expectations, and attitudes to the broader meanings of facemask wearing beyond (just) preventing the spread of infection. This present thesis applied a social constructionist interpretive approach and used qualitative semi-structured focus group interviews to collect empirical material. The respondents were recruited using convenience sampling and were categorized into three groups based on (a) being born in Sweden with Swedish-born parents, (b) being born in Sweden or abroad with foreign-born parents, and (c) being born abroad, residing in Sweden, and holding citizenship other than

Swedish. In total, five semi-structured focus group interviews were conducted, involving altogether 29 respondents.

The main results of this present thesis found that personal practices of wearing (or not wearing) facemasks are influenced by (1) the initial responses of the respondents first noticing's of facemasks in "in the outside world," (2) the extent to which the respondents relied on information on masks provided from public authorities, (3) meaning-making outcomes of public spaces, and on perceived notions of social responsibilities and, and peer pressure, and (4) different kinds of risk-cultural norm and values.

Based on the previous research on risk cultures and Corina et al.'s (2016) typology, the empirical material distinguished two risk cultural divisions among the respondents. The first risk culture found, which was especially prominent among the respondents with foreign backgrounds (b) and citizenship in other countries (c), was the state-oriented risk culture. The second risk culture, most prominent among respondents with Swedish background (a), was characterized as a convergence between state-oriented and individualistic risk cultures. The dividing line between the two risk cultures was, i.e., the state-oriented risk culture and the "state-individualistic" risk culture, the cultural anticipations and responsibilities directed towards the Swedish authorities. More concretely, the state-oriented risk culture demanded that the state, by almost all means, should protect its citizens from hazardous situations and risks. However, it may involve certain limitations of individual freedoms and rights. On the other hand, the state-individualistic risk culture argued that the state is responsible for leading, mitigating crises, and providing survival capabilities but should simultaneously also maintain/guarantee certain individual rights and freedoms. These empirical findings raise questions on whether Sweden theoretically should remain classified as state-oriented risk culture, an issue which future research should address more deeply.

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1. Introduction

1.1. Point of departure and societal relevance

Sanitary facemasks have, in Western societies, usually been associated with medical contexts. Just in the space of a few weeks, facemasks suddenly became an essential feature of many people's everyday lives, with some claiming the item is instrumental in combating the spread of the novel COVID-19 virus. Although facemasks are a relatively new addition to social life in Western societies, in some Asian countries, facemasks have been an integral part of everyday life, even outside healthcare activities, way before the global outbreak of COVID-19 (Miyazaki & Kawahara, 2016). While most of the world quickly came to terms with covering their noses and mouths in crowded places, people in Sweden have mostly gone without, riding buses and metros, shopping for groceries, and going to school maskless, with only a few rare souls have covered up (Novus, 2020).

Throughout the pandemic, Swedish Public Health Authority (PHA) officials have repeatedly argued that masks are not effective enough at limiting the spread of the virus to warrant mass use, insisting it is more important to respect social distancing and handwashing recommendations (Tanha, 2021). The PHA has firmly held to their early statements on the non-efficiency of masks. However, The European Union Agency for Railways and the European Union Aviation Safety Agency since March 2020 required that transport operators provide masks for all staff and passengers in situations "where physical distancing cannot be insured onboard trains" (ECD, 2020). However, ten months after the first COVID-19 related casualty, the PHA started advising mask-use in public transport during specific periods. Despite the recommendations, far less than half of the public transport passengers wear masks when traveling (Svensk kollektivtrafik, 2021).

Comparing Sweden's approach to facemasks to Denmark, their guidance changed in early July 2020. From informing the Danish citizens that masks were not required, the Danish authorities and government recommended masks in public indoor situations. Compared to the rest of Europe, the Danish restrictions are less strict than the rest of Europe and the world. In, for instance, Italy, facemasks are strongly recommended: "during all social contacts" alongside other handwashing and social distancing (Ministro Della Salute, 2021). Spain and France have

required facemasks in all indoor enclosed spaces (El Pais, 2020; France24; 2020). The UK requires masks on public transport and in shops (BBC, 2021).

1.2 Essence of academic relevance and knowledge contribution

When people encounter surprising and novel events and objects, they engage in sensemaking-making processes to answer the basic questions: "what is the story?" and "what do I need to know?" (Ratzan, 2014). In the pandemic context that all of us currently can relate to – we have found ourselves in intense, unpredictable, and overwhelming flows of information that might have complicated people's sensemaking processes (Weick et al., 2005). At its core, Sensemaking is a socially constructed process in which people interact with their environment, including the media and other people, to shape meaning to enable action (Maitlis & Sonenhein, 2020). The issue of facemasks in Sweden offers a unique opportunity to study sensemaking and meaning-making processes in a tremendously complex, novel, and rapidly changing context.

According to Weick (1988), Meaning-making is how we interpret situations or events based on our previous knowledge and experience. In other words, it is a matter of identity: it is who we understand ourselves to be in relation to the world around us. The differences lie in making sense of the external world, while Meaning-making relates it to our inner world (Sandberg & Tsoukas, 2015). Asking the questions: "What does this situation mean to me?"

Sensemaking is, to the extent it ever can be, objective, while Meaning-making is subjective. It is hard to separate the two; there is value in making the distinction as straightforward as possible. Sensemaking might be about making sense of what authorities are doing and why they are doing it, which is not always obvious. Meaning-making is about making sense of what it means to you personally or in your context – your society, community, or family. A simple way of looking at it is as follows; Sensemaking asks, "What is going on?" Meaning-Making asks, "What are the implications of what's going on for me and my family?" (Maitlis & Sonenshein, 2010).

Sensemaking studies related to crises have focused almost exclusively on focal events, with clear-cut beginnings and ends, such as natural disasters or organizational crises. However, according to Sandberg and Tsoukas (2015), the current field of sensemaking research related to public crises has ignored meaning-making as a negotiating process embedded in individuals'

social lives. In addition, research on risk and crisis communication has found that different social, political, cultural, and economic conditions have created different risk cultures where expectations towards public authorities and individuals vary when a crisis occurs (Boholm, 2003). It has also been found that communicative expectations differ within risk cultures, including how people trust different media sources and where they turn to find crisis information. From a cultural perspective, crisis communication varies between individualistic, state-oriented, and fatalistic risk cultures (Corina et al., 2016).

Research also shows that risks and crises do not equally affect everyone in a society, and some groups are more vulnerable than others (Enander & Hede, 2004). Several studies have shown that ethnic minorities and people with foreign backgrounds have other kinds of communicative needs in times of crisis compared to majority societies (Fothergrill, Maester & Darlington, 1999). Studies have, for example, found that minority groups perceive the likelihood of crisis to strike as more plausible than native-born counterparts (Palmer 2003). Considering the plurality of how disasters can be framed and the possible lethal outcomes of crises, it relevant to analyse why and in what ways Swedish residents have made sense of such a debated issue as facemasks resemble. The combination of Sensemaking and risk-cultural perspectives into crisis communication studies has never been conducted. Thus, it is reasonable to analyse the way people have made meaning of the facemasks as objects and what kind of risk-cultural anticipations people directed towards other citizens and the Swedish public authorities when it comes to facemasks.

1.3 Aim and research questions:

By shedding light on people's information habits related to the phenomenon, this present thesis provides insights into how people have made sense and what facemasks as a protective measure have meant. As media is an essential component of people's meaning-making in crises (Weick et al., 2005), it is not independent of the social process associated with people's evaluations of the information they receive (Sandberg & Tsoukas, 2015). Therefore, this present thesis approaches facemasks from people's subjective perceptions of their social reality. Studying the issue of facemasks from a social constructionist's perspective enables interpretations of people's risk-cultural anticipations during the COVID-19 pandemic.

By revisiting core assumptions related to Sensemaking and risk cultural perspectives, the purpose of this thesis is to analyse how people, depending on their ethnic background and their citizenship, have made sense of facemasks amid the COVID-19 pandemic. To understand whether respondents have found (or not) facemasks as a plausible preventive measure: this thesis analyses 1) the initial reactions of respondents first noticing's of masks in public spaces (Rerup, 2009; Weick & Sutcliffe, 2006), 2) how media diets influence their perceptions of facemasks (Maitilis & Sonenshein, 2010), 3) what psychological narratives and emotions that motivate the respondent's actions (Barton & Kahn, 2019), and 4) the underlying risk-cultural norms and values anticipated towards Swedish authorities and other citizens relating to facemasks (Corina et al., 2016).

In essence, this present thesis addresses people's collective experiences, anticipations, and attitudes to the broader meanings of facemask wearing beyond (just) preventing the spread of infection. The empirical findings of this thesis will contribute with new perspectives and understandings, relating to both the perspectives of Sensemaking and research on risk cultures and for public authorities as they will obtain empirical insight on how their information efforts have been negotiated. The presents thesis examines the following four empirical questions:

1. What were the respondents' initial reactions to the presence of facemasks?
2. How did the respondents' use media to seek information on facemasks, and what influenced their evaluations of the information found?
3. How were the respondents' meaning-making process of facemasks shaped by other motivations?
4. What kind of risk-cultural norms and values reflected the respondents depending on their ethnic backgrounds and/or citizenship?

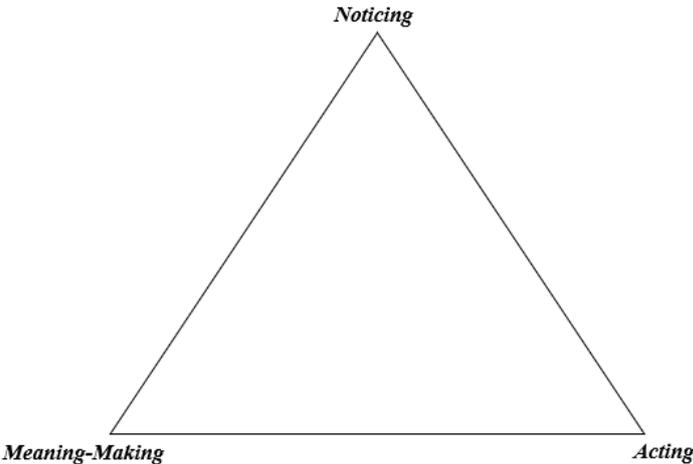
2.Theoretical framework

This chapter presents the theoretical frameworks of this present thesis to empirically understand how people, dependent on their ethnic background and citizenship, have made sense of facemasks amid the COVID-19 pandemic.

2.1 Three facets of pandemic Sensemaking

The context of the COVID-19 pandemic, with emergent and fast-paced, unpredictable, and overwhelming information flows and cues – might have complicated sensemaking processes. As Sensemaking during this crisis is deemed hard to attain, three facets of Sensemaking are presented and discussed below.

Figure 1: Conceptual idea - three facets of pandemic Sensemaking



Note: This present thesis author has shaped the illustration to distinguish that the facets overlap yet have distinct differences.

Noticing

The theoretical facet of Noticing enables analyses of how and when people have generated cues on facemasks during the unpredictable circumstances of the COVID-19 pandemic. More precisely, this facet enables in-depth analyses of how people maintained, updated, or reshaped their understanding based on their Noticing of cues on facemasks. The facet enables insights

into how and if people's Noticing of facemasks instrumentally has worked to counteract or preserve cognitive negotiations of facemasks (Maitlis & Christianson, 2014).

During this pandemic, people have had to make sense of a large amount of information over long periods, frequently updating their understanding of the evolving situation. The same comes to the phenomena of facemasks, where the public discourse has touched upon masks medical effectiveness and weaknesses. As the pandemic affects most aspects of our everyday routines, a competition of people's attention has been ongoing. With these aspects subtracted, people might have found it challenging to determine which cues to focus on and in what order (Weick & Sutcliffe, 2006).

The vast number of cues generated by and on facemasks may have affected the quantity and quality of attention when making sense of the phenomena. First, attending to multiple cues could have led to attentional fatigue (Christianson, 2019). More specifically, the process of making and remaking sense of the phenomena may have been confusing and effortful and being a part of such a process over an extended time may have depleted cognitive resources. Last, monitoring a wide range of facemask relevant cues, domestically and internationally, online, and offline, may lead to disrupted attentional stability and vividness, making it difficult for people to triangulate their attention to key information (Rerup, 2009).

Meaning-Making

Sensemaking theory argues that people's processes of information into sensible accounts are driven by plausibility. However, what makes something 'plausible' in the context of facemasks is understudied. Early sensemaking studies suggest that dissonance reduction is one factor that contributes to perceived plausibility (Weick, 1995). Still, how meaning-making is renegotiated in extending pandemic crises remains understudied (Weick, 2020).

Most sensemaking research has adopted an evolutionary perspective in crises. Such studies have assumed that Sensemaking becomes more plausible as it "becomes more comprehensive, incorporates more of the observed data, and is more resilient in the face of criticism" (Weick et al., 2005, p. 415). Since Sensemaking is entailed with issues of identity, especially during moments of uncertainty and change, an evolutionary perspective becomes insufficient (Maitlis and Sonenshein, 2010). As people have or are still forced to experience the uncertainties of

which the pandemic constitutes, Sensemaking may be motivated by goals other than increasing congruence with the information on the facemasks at hand. Thus, Sensemaking needs to understand better *how* people make sense of facemasks and *why*.

Diverse and often controversial narratives about the advantages and the disadvantages of facemasks in different situations surface several alternative motivations that may determine what seems 'plausible.' Individuals may unconsciously (or consciously) avoid (or expose) themselves to situations that trigger negative emotions (or positive emotions). People may have also construct narratives that are more suitable for emotional distancing to manage the reality one now lives in (Barton & Kahn, 2019). In other words, people likely have shaped psychological defence mechanisms manifested by constructions of false narratives, which might have been more emotionally palatable to cope with (Mikkelsen et al., 2020). Such narratives should not be considered 'failed' Sensemaking; they should be considered plausible-driven accounts shaped by the need for a sense of cognitive safety (Rerup, 2009).

Acting

The general maxim in Sensemaking is that people act their way into knowing (Vigso & Odén, 2016). To generate new cues about a situation is to act and to reconstruct (or confirm) their perceptions of the situation that has arisen (Sandberg & Touskas, 2015). Action in this crisis has been severely constrained: travel bans and restrictions on social gatherings mean that much action has stopped or been seriously reduced. However, in Sweden, where the authorities' management of the crisis has been built on trust between the state and citizens, opportunities to gather cues based on other people's actions have been relatively open in urban environments around the country. For instance, in working environments, restaurants, pubs, grocery stores, public transports, and malls, people still have had the opportunity to meet publicly.

Therefore, it is not unimaginable that some have made different evaluations of what is plausible relating to facemasks based on assessments of other people's actions (Choo, 2007). For some, the usage of facemasks might have played a crucial role, even in a country with less strict procedures on mask use. The relative openness that has characterized the Swedish strategy has meant that people for themselves have been agents in interpreting whether some situations and actions ought to be deemed as more or less risky. When evaluating such situations and actions, Sensemaking theory proposes that people have different needs (e.g., psychological, and social).

Moreover, people's resources (sociodemographic, and psychical) may determine one's evaluation of a particular action (Barton & Kahn, 2019). Information on what environments should be considered "risky" has been open for interpretation, which may have motivated people's actions. Compared to other countries, Swedish residents have experienced fewer bounding legal restrictions. They could freely move in public spaces, with some exceptions (e.g., visits to elderly homes, cultural and sporting events, and public protests). Concretely, people's ability to act in Sweden might have been crucial for generating cues about other people's mask (or non) use (Maitlis & Sonenshein, 2010).

2.2 Risk cultural classifications

Research on risk and crisis communication has occasionally touched on how cultural differences can create different conditions for crisis communication. So far, the research has shown that different cultures have different attitudes to whether the crises are manageable and/or preventable at all (Douglas & Wildarsky, 1982). Research has also found that people's anticipations towards authorities differ between cultures (ibid). Corina et al. (2016) attempted to differentiate cultures in European countries and found that trust authorities vary between countries - but not only that. Cultural perceptions of whether crises could be predicted, who is responsible for managing a crisis, and who is to blame if things went wrong also differed between countries. Corina et al.'s (2016) findings suggest that Sweden best fits a state-oriented risk culture with high trust in the state. The Swedish authorities are expected to take responsibility for preventing crises and managing their consequences. In, for example, the Netherlands, individual responsibility is central. Italy was seen as a fatalistic risk culture, where trust in the authorities was extremely low. The empirical findings of Corina et al.'s (2016) theoretically driven study represent the basis of the theoretical framework of this thesis, resulted in three differentiated risk cultures:

In *individualistic* risk cultures, there is a strong notion of individuals' responsibility to prevent hazards, take care of oneself and one's own family, and actively update oneself on the development and consequences of crises. In such cultures, the authorities mainly function as a communicative channel distributing information on how individuals should cope with risks that lie ahead. Therefore, trust in government is relatively high, and public authorities are anticipated to provide citizens with adequate information on risks and how to cope with them. However,

the individual's responsibility is marked as primary, as people are expected to follow the instructions given to ensure that crisis guidelines given by authorities are followed (ibid: 300).

In *state-oriented* risk cultures, the public relies on the authority's capabilities to mitigate crises and has strong confidence and high anticipations in the authorities' capabilities to prevent and mitigate crises. The general view in such cultures is that crises always can be resolved if public authorities act actively. Therefore, individuals' responsibility is marked as secondary, where public authorities instead are anticipated to be the primary actors who provide citizens with equal capabilities to cope with crises. From a communicative perspective, public authorities are expected to be active in their information efforts to update how citizens should sustain crises. Such cultures also have high trust in legacy media and high trust in public authority's official communication. Given that authorities are anticipated to carry knowledge and have executive power to lead citizens through crises, individuals are expected to follow the crisis measures communicated strictly (ibid: 300).

In *fatalistic* risk cultures, people rely on God, luck, or pure chance and believe that people cannot prepare for or prevent disasters from occurring. In such cultures, neither the state nor citizens can effectively prevent crises or minimize crises' consequences. Prevention of risks in such cultures is perceived as almost impossible. Trust in public authorities and legacy media is low, often associated with preconceptions that these actors are corrupted with political or economic interests, which naturally leads to an emotional state of abundance. When information on crisis conditions is perceived as necessary, citizens in such cultures turn to their social networks for information, i.e., neighbours, relatives, or members of their assemblages, rather than turning to legacy media or official public authority channels. This risk culture should not be considered a primitive culture but rather a culture that appears tolerable when other options do not exist (ibid: 300).

This topology of risk cultures expresses how different risk-cultural expectations on both citizens and authorities might be displayed. Given Corina et al.'s (2016) typology of risk cultures and the multi-ethnic society of Sweden, it is not unlikely that parallel risk cultures may exist simultaneously. Thus, classifications will play a vital part in this present thesis empirical analysis.

2.2.1 Key dimension in the typology of risk cultures

To obtain the differences in how cultures perceive risks and disasters and define the main features and make the classifications obtainable, Corina et al. (2016) incorporates three interrelated dimensions: Disaster framing, Trust in Authorities, and Blaming. These dimensions will also organize the analysis of this present thesis empirical analysis.

Table 1: Analytical framework: Risk Cultural classifications and dimension

		State-oriented RC	Individual-oriented RC	Fatalistic RC
Disaster framing	How crises and risks are framed	Consequences of crises can be minimized by preventive measures	Consequences of crises can be minimized by preventive measures	Crises cannot be avoided; there is nothing than can be done to deal with them
	Causal explanations for disasters	Lack of prevention	Lack of prevention	Disasters as an exceptional event or result of a supernatural power intervention
Trust in authorities	Confidence/expectations of authorities' capabilities to prevent/manage crises	High	Low, high	Low
Blaming strategies	Who is blamed in case of crises	Public authorities	Negligent or careless individuals	The event itself, nature, God, fate, misfortune
		The state must take care of its citizens' safety and foster them (focus on preventive measures)	Everyone must be responsible for his/her-self and his/her family (focus on preventive measures)	The public authorities are expected to intervene, but the focus is on the rescuing phase (aiding, assisting the victims) and the post-event (rebuilding), rather than on risk prevention

Note: The typology serves as an analytical scheme for the empirical material related to the study's fourth empirical question: What kind of risk cultural norms and values reflected the respondents depending on their ethnic backgrounds and/or citizenship? (Corina et al., 2016).

Disaster framing

The dimension of disaster framing is used to analyse how individuals interpret and define the phenomenon of facemasks. Disaster framing, in the context of this present thesis, is explained

as a socio-culturally binding pattern of how one interprets crises, by which one generate understandings of the world around: 'by selecting a few aspects of a perceived reality and connecting them together in a narrative that promotes a particular interpretation' (Entman, 2010: 391). From this perspective, framing discourse is closely associated with individuals' social lives. It is associated with individuals' way of defining, diagnosing causal relationships, expressing moral judgments, and promoting solutions to facemasks. In other words, different risk cultures may emphasize different aspects of facemasks over the other (Corina et al., 2016). As abovementioned, this present thesis analyses how people collectively frame the phenomena of facemasks.

Trust in authorities

This dimension is applied to analyse whether people trust the Swedish authorities' way of handling the issue of facemasks and what expectations they have had of the state to the issue. With the help of the dimensions of trust in authorities, the empirical analysis may determine whether people believe that crises can be prevented and managed and what role people believe authorities should have in crisis times. Concretely, this theoretical dimension will answer how people trust and what role they assume that authorities and the Swedish government play concerning facemasks to mitigate the COVID-19 pandemic.

Blaming strategies

The last dimension is blaming, which is applied to seek answers to whom people attribute responsibility to and whom people blame when things have "gone wrong." This dimension enables analysis of whether people victimize certain groups or actors. Alternatively, if they outright blame specific actors for their shortcoming, or if they blame pure chance. Douglas (2003) proposed that blaming is a culturally conditioned and normative function to maintain forms of social order, either to strengthen social institutions or to confirm moral codes. With the help of this dimension of risk culture theory, the analysis may obtain social norms and taboos people collectively perceive to be broken relating to masks, and potentially and whom to blame in such violations. Such blaming may be directed towards the public authority's responsibility for inefficiency in risk prevention and crisis management or a group within the public (Lupton, 1999).

2.3 Summary of theoretical frameworks

The concepts of Noticing, Meaning-Making, and Acting are motivated by their complementary essence. First, Noticing allows for analysis of the respondents' testimonies on how and when they first noticed facemasks. For instance, respondents might first have noticed facemasks through media or by noticing masks on a stranger passing by. Second, as the study explores what the respondent's initial reaction to masks was, the dimension of Noticing is complemented by the dimension of Meaning-Making. Combining the dimensions facilitates theoretical insights on how the respondents reacted and why they reacted as they have. However, the respondents might also have noticed and interpreted cues communicated from authorities or other platforms, which also constitute arenas where Meaning-Making process might have occurred. In other words, the dimension of Meaning-Making enables analysis of people's testimonies about how and why respondents made sense of masks on a personal level, allowing for analyses of different kind of kinds of individual motives. Third, since the respondents' Noticings and Meaning-Making of facemasks might be related to how they have acted into knowing, Acting is applied to analyse whether the respondents have (or not have) used facemasks and how they have used facemasks they experience different kinds of outdoor environments.

Corina et al.'s risk culture typology's theoretical dimensions enable analyses of the respondents' underlying norms and values related to crises in general and, more specifically, related to facemasks. First, the dimension of framing enables analysis of how respondents view facemasks as a crisis measure. Whether or not the respondents perceive masks as legitimate, this dimension enables analyses of how and what kinds of casual relationships and arguments the respondent stresses. Respondents may either stress the positive aspects of masks as protective or stress the scientific uncertainty masks. Second, the dimensions of Trust in authorities enable analyses of what anticipations people have had towards the Swedish authorities throughout the pandemic and what role they believe authorities should have in crises. The last dimension, blaming strategies, will provide insights into whom respondents believe are responsible for whether the use of masks should (or should not) be implemented here in Sweden. Is it a governmental responsibility to encourage masks, or are individuals best left to do as they please? The dimension of blaming strategies also answers whether respondents attribute blame to the Swedish authorities and/or individuals for the pandemic crisis management in Sweden.

3. Previous research

After the previous chapter outlined the theoretical framework of this present thesis, this chapter will provide an overview of the empirical research on the Sensemaking perspective and Risk Cultures. A great deal of the previous research uses qualitative methods to analyse people's sensemaking influences and the dimensions characterized within different social cohesions during times of crisis. This chapter aims to provide a broad overview of what empirical studies within Sensemaking and risk culture have focused on until today and describe the key concepts found and produced from such studies.

The chapter starts with a review of vital influencing factors that have been empirically found to affect people's Sensemaking capabilities. In addition, both in this study and in the previous research, media plays a crucial role in the way people acquire information during times of crisis. Consequently, this chapter will also present previous research on what kinds of media people turn to and how these studies relate to the Sensemaking perspective. Finally, this chapter also presents previous research on risk cultural concepts recent empirical findings.

3.1 Factors Influencing Sensemaking in times of crisis

Since the perspectives of Sensemaking have been used in different research fields, it is relevant to revisit the cores of Sensemaking in the context of crisis communication. First, Sensemaking is defined as a process through which aggravating and uncertain events are interpreted for meaning and understanding through a dynamic process directed by societal cues and enacted by the environment (Choo, 2007; Maitlis & Christiansson, 2014; Maitlis & Sonenshein, 2010; Weick, 1995). Numerous sensemaking studies from crisis contexts are built upon the foundations of Weick's (1988) work. Much of such literature acknowledges that "weak collective sensemaking is a major obstacle during crises" (Wollbergs & Boersma, 2013, p. 188). In their 2010 paper "Sensemaking in Crisis and Change: Inspiration and Insights from Weick," Maitlis and Sonenshein identify three major themes since Weick's contributions that "reflect important individual, collective, and institutional influences on sensemaking processes (p. 555). These three themes, generally expressed, are (1) positivity blocking individuals' ability to associate environmental cues, (2) the difficulties that hinder collective Sensemaking, and (3) institution's influence on sensemakers (Maitlis & Sonenshein, 2010). The following sections

present the three influences that characterize much of the prior studies on Sensemaking in times of crisis, which is also relevant in analysing the empirical findings of this present thesis.

The Effects of positivity on sensemaking

According to Maitlis and Sonenshein (2010), emotional evaluations of crises and events play a key role in shaping people's behaviours in crisis times. Simply put, positive reactions can negatively "shape sensemaking in crises by preventing individuals from bracketing contradictory cues until it is much too late" (ibid, p. 555). In other words, if the sensemaker is confident that everything will work out as planned, they will often fail to notice things that suggest otherwise. Kayes (2004) provides a helpful example from his study on mountain climbing accidents at Mount Everest. His findings suggest that one of the main reasons for the accidents was that the climbers were too confident in their climbing abilities. This mindset prevented them from sensing other ways and prevented them from incorporating other cognitive cues (ibid). Maitlis and Sonenshein (2010) have found that positive cognitive emotions might positively impact Sensemaking. For instance, positive cognitive emotions "can have a powerful, beneficial effect on organizations and their members" after the crisis has passed (p.556). Based on such findings, emotions play a vital yet varying role in the sensemaking process throughout the lifecycle of a crisis event or accident.

The complexities of Sensemaking

The second common theme, referred to as 'collective sensemaking', concerns the difficulties and complexities encompassing sensemaking processes in groups (Maitlis & Sonenshein, 2010). Collective Sensemaking is relevant since a single individual rarely manages crises. Collective Sensemaking is often a complex process, as "forming a plausible interpretation is hard because each person sees different parts of the environment as interesting, depending on the individual's values, position, and experience" (Choo, 2007, p. 283). Since individuals can interpret and perceive the same environment differently, their sensemaking abilities and conclusions also differ. Successful collective Sensemaking is dependent on the group's skill and efficacy in coordinating their efforts to explain and anticipate. Most failures can be traced to a breakdown in "team" Sensemaking, in which critical cues for different reasons are ignored, and collectives fail to synthesize the existing information (Klein, Wiggins & Dominguez, 2010, p. 306).

Institutional Sensemaking

The third common theme in Sensemaking research related to crises, according to is 'Institutional Sensemaking.' This theme highlights that citizens' trust and perceptions of how institutions should act in crisis times have been crucial influences for how and why people act as they should when a crisis occurs. From a citizen's perspective, institutional Sensemaking often maintains specific perceived anticipations which individual citizens hold (Maitlis & Sonenshein 2010). Previous studies have found that citizens first make sense of the responsibility(s) of institutions when a crisis is in place and subsequently make sense of how to act based on the instructions given by institutions (Weber & Glenn, 2006). Furthermore, institutions' policies and actions affect how citizens interpret crisis events, which concretely means that "Sensemaking" is not accomplished in a vacuum" (Taylor & van Every as cited in Weber & Glynn, 2006: 1639).

Related to Institutional Sensemaking and the COVID-19 pandemic is Rubin & de Vries (2020), who analysed how the Danish government and leading public health agencies made sense of the initial phase of the crisis. The study showed how two distinct sensemaking lines co-existed among two crisis functioning actors: health experts and governmental politicians. The authors found that the Danish governmental politicians were in a 'chaotic' Sensemaking frame where major decisions needed to be made fast to avoid an impending disaster. Scientific evidence was not deemed essential to the decision-making process in the early crisis phase. Leading Danish health authority experts were found in an 'elaborative' sensemaking frame, where evidence-based decision-making was the *modus operandi*. Policy recommendations were continuously reassessed, considering new scientific data. These two sensemaking frames clashed both publicly and internally. This study illustrates that vital crisis authorities might lack shared understandings (e.g., frames) of a crisis event. The Danish case led to different communicative narratives when interacting with the Danish sensemakers (2020, p. 290).

3.1.1 Summary of the Literature on Sensemaking in Crisis Contexts

Ever since Weick's (1988) advancement in the field, a great deal of research and progress has taken shape in the discipline of Sensemaking and crisis research. The impact of emotions when making sense of an event, the complexities of Sensemaking, and the organizations and institutions' influence on sensemakers have in previous research been identified as essential influences of how people make sense of crises. Synthesizing the three themes, they all stress

the importance of sensemaking processes' individual, collective, and institutional influences. The most crucial notion is that these themes represent different *influences* (Maitlis & Sonenshein, 2010).

In somewhat different ways, the three themes indicate that intensive, negatively felt emotions, usually attained in crisis-changing contexts, are likely to impede Sensemaking. At the same time, such emotions may also generate valuable information that facilitates Sensemaking (Maitlis & Sonenshein, 2010). Other recent research has studied how physical artifacts like sketches, slides, and pictures can improve a group's sensemaking abilities (Stigliani & Ravasi, 2012).

3.2 Making sense of crisis information.

This section of the literature review maps how people use media in pandemic crises to anchor to previous studies and research articles relevant to this present thesis departure.

Sensemaking crisis information through Legacy Media

For media scholars, SARS and the Ebola disease outbreaks have offered opportunities to analyze how information has been disseminated in public health crises. Crisis communication drives through various digital platforms with multiple broadcasting channels available, ranging from traditional news to authority websites to social media. Previous research suggests that today's hybrid media environments invite people to engage in Sensemaking processes in "multivocal rhetorical arenas composed of various voices" (Rodin, 2018:238).

Regardless of today's hybrid media environments, people still seek answers to crises essential questions: "What do I need to know?", "What do I need to do today to protect my family?" and "Where do I find information I can understand and trust?" when crises strike (Ratzan, 2014:149). In other words, people still require media reporting on crisis events which is clear, informative, and comprehensible, to make sense of crises. Re-connecting to the abovementioned notion of the "multivocal rhetorical arenas," legacy news media coverage in times of crisis is still relatively homogenous as news media follows a particular narrative of reporting. In this matter, online news is nowadays the most common choice due to its immediacy, spreadability, and overall accessibility (Lee, 2005).

In crisis times, audiences must make conscious efforts to retrieve answers on crisis-related concerns by consulting its regular choice of media for information seeking (Vigsø, & Odén, 2016). Such information-seeking behaviours are most potent when there exists uncertainty about the possible danger. What follows is a collaborative and social process with one's peers and surroundings on reception and negotiation of meaning concerning the current information and what future action to take (ibid). As previously mentioned, this collaborative Sensemaking to others can be based on various media outlets such as traditional news or social media.

Social network sites as means for Meaning-Making processes

Previous studies focusing on disseminating crisis information during the Ebola outbreak show that online forums such as Reddit contain significantly more speculative and rumouring crisis information than traditional media (Kilgo et al., 2019). At the same time, research also shows that online forums serve a vital function for people to shape meaning about crisis information and alarming news. That being said, social network sites can both be valuable in meaning-making terms. However, there are also inherent risks in that people might be exposed to information produced through rumours and excessiveness (ibid).

Others argue that social media and internet forums serve more to complement existing crisis information from legacy media and "foremost a complement to the already existing channels for crisis communication" (Eriksson, 2018:537). Ungar (1998) discussed how the media generally play on public fears and panic to a greater extent if the crisis in question is far from the audience. Some media framings focus on risk, blame, and speculation, while others emphasize solutions and praise those solving the problem. When events are "closer" to citizens, the media tends to scrutinize instead of providing reassuring coverage, which would calm the masses, "the more tangible danger, the less alarmist the content becomes" (Rodin, 2018:245). The abovementioned findings exemplify what role news media plays during crises in general and for pandemics.

3.3 Information seeking behaviours midst the COVID-19 outbreak in Sweden:

Ghersetti and Odén (2021) found that the most common source of information among Swedish citizens during the COVID-19 pandemic was Swedish news media. However, as the virus spread dramatically increased, Swedes seemed to seek information more often and through diverse media sources (ibid). Ethnic background also seems to be significant for searching for

information (Ghersetti & Odén, 2021:52). However, the empirical findings should be interpreted with some caution as the number of participating survey respondents with ethnic backgrounds was smaller than the rest of the respondents. The respondents raised in another country than Sweden were more frequent users of international media, social media, and alternative news media than persons raised in Sweden by Swedish or foreign parents, who mostly stuck to Swedish media outlets. Those who grew up in Sweden with foreign parents tended to use international news more than those with an ethnic Swedish background. Those with some form of foreign background – their childhood or parents – also used the authorities' websites to a somewhat greater extent than those with an ethnic Swedish background. One explanation is assumed to be that there was information in several different languages (ibid).

3.4 The origins of the concept 'Risk Culture'

Before immersing previous empirical findings from risk-cultural studies, a definition of the concept "Risk" is needed. Most studies within the field have departed in Ulrich Beck's (1994) definition of 'risk societies' (e.g., Heath & O'hair 2009; Taylor & Zinn 2006). According to this definition, risk cultures are inherent in modern societies, where risks and crises are perceived as consequences of human errors and technological developments. When compared to feudal and pre-industrial societies, risk and crises were perceived to result from human beings' moral shortcomings derived from religious punishments (Beck, 1994; Giddens, 1992).

Previous typologies on the relationship between risk and culture

In how Douglas and Wildarsky (1982) distinguished and typologized risk cultures, the scholars were pioneers in theorizing and comparing different segments of risk-cultural worldviews. Their conceptualization illustrated that different cultures perceive different social elements as "risky," and cultures anticipate resolving such risks. Their typology combined two main dimensions: First, the extent of social cohesion among groups, that is, the extent to which individuals identify with a social constellation of people. Second, the extent to which people perceive social rankings as necessary, i.e., whether people perceive those hierarchical processes drive societies.

First, we find the *hierarchies cultures*, which represent social groups that stress the importance of authorities' procedural orders and believe that crisis and risk are proactively managed and reduced. Questioning the authority's ability to manage and prevent risks and hazards is

considered hazards in such cultures. Second, the *egalitarian cultures*, who strongly identify with their social groups and alienate external norms, believe that living in harmony with nature is for the common good. Egalitarian cultures perceive the state, industries, and scientific progress as possible threats to people's agency and see nature as fragile to state intervention. Third, the *individualist cultures* strongly believe people themselves best manage risks and crises, and fear state intervention obstructs people's way of living. In other words, such cultures entrust individuals rather than large-scale authoritarian intervention (ibid). They tend to oppose things threatening liberal values, such as growing welfare states, state regulations, restrictions on ownership, and freedom of movement (Lash, 2005). Lastly, we find the *fatalist cultures* lack social cohesion, entrust themselves rather than peers, believe in turmoil and fate, and have low agency and self-control in crisis management (Douglas & Wildarsky, 1982). These worldviews, or ways of perceiving and reproducing social binding views on risks and crises, represent the central cornerstones of many studies in the current field of risk-cultural studies.

Risk cultural differences and perceptions

Research on risk and crisis communicative inequalities between citizens is a growing problem in Swedish research; however, research on risk cultural differences has not yet been of interest. Therefore, this section will address empirical findings from the US, which should be interpreted with caution. Nevertheless, such results can perform as indicators for how risk cultural perceptions are manifested.

Studies from the US have found differences in how likely ethnic groups perceive that natural disasters and public health crises. The most significant differences in the perceived likeliness are found between Hispanic-born Americans and Americans with both parents born in the US. Hispanic-born Americans believe that it is twice as likely that natural disasters or major public health emergencies could occur in the US than their American-born counterparts (Maldonado et al., 2016). Other US studies argue that the degree of religiosity, that is, how religiously convinced an individual is, can, on the one hand, determine whether individuals consider themselves as agents to prevent crises and manage them individually. On the other hand, it can also determine why some individuals believe that crises can be godly or made by chance rather than created by human errors. Although fatalistic risk cultural perceptions nowadays are less prevalent in modern societies, researchers argue that such socio-cultural perceptions best predict why some social groups experience emergencies as more "risky" and other situations as

"less risky" (Parton et al., 2010). Pokras (2007) analysed how Latino communities experienced living in the US during wildfire and hurricane crises. Results from the study's focus group interviews revealed that most Latin groups anticipated that crises ought to be managed by US authorities rather than by the individual. Concretely, the results suggested that once crises struck, Latin communities in the US experienced alienation versus the majority society. Other researchers explain that alienating emotion might be due to deficits in knowledge about the US institutional procedures (Carter-Pokras et al., 2007).

Once again, these results should be interpreted with caution, mainly as Sweden's and the US's institutional cultures are fundamentally different. The results from the US should be interpreted since Sweden, and the US is institutionally very different – especially when it comes to the individual's role before and in crises. Historically and still today – US citizens have more of a self-regulative role in crisis prevention. In Sweden, the state (public institutions generally) has had a more active role when crises occur.

Risk Cultural Norms and values in the COVID-19 pandemic

During the summer of 2020, when many worldwide were just getting used to living in isolation, Dyrhust et al. (2020) conducted a survey that attempted to model risk perceptions and values in ten countries, of which Sweden was included. Respondents living in the UK, Spain, and Italy were most concerned about the health and well-being of others. In contrast, respondents living in Germany, the US, and Sweden were more concerned about one's health and primarily worried about the potential effects of the pandemic on their personal lives. The study's empirical findings suggest that the decisive factor to the perceptions was due to what the authors pronounce as prosocial vs. individualistic values. In this study, prosocial values relate to people's intention to benefit others, where the respondents were keen to obeying behaviours suggested by public authorities. These actions were found to be motivated by empathy and by concern about the welfare of others. In contrast, the respondents with more individualistic values anticipated responsibility accounted towards individual citizens rather than state intervening crisis measures and expressed that intervening measures might result in binding laws, even after the pandemic (ibid). The study's main conclusion is that the two risk-cultural characteristics nation-based survey respondents involved may explain why nations have adopted more and less strict crisis responses to mitigate the COVID-19 pandemic.

4. Methodology

This present thesis took a social constructionist interpretative approach to collect empirical material and applies a qualitative method research method. The following chapter will explain and motivate the methodological choice of this present thesis.

4.1 Social constructionism and phenomenological hermeneutics

Social constructionism refers to the epistemological tradition which perceives that the obtainable reality and the human "self" is created by social orders shaped through interactions with others (Alvesson & Sköldbberg, 2007). This perspective puts the researcher in a somewhat reluctant position towards objective knowledge and truths, making it challenging to draw far-reaching generalizable conclusions. Since the outcome of studies adopting social constructionist methods may be different if carried out at a different time, in a different place, or by a different person (Falkheimer, Heide & Larsson, 2009). Nonetheless, if conducted thoroughly and transparently, such studies may bring new unexplored perspectives. As social constructionist studies have the purpose of exploring to reveal hidden patterns and insights that otherwise might not surface, the results of such studies may generate support new perspectives and ideas for future positivistic, more generalizable studies (Burr, 2015), which is in accordance with this present thesis overall purpose.

In the case of this present thesis, it has combined phenomenological and hermeneutical approaches. Hermeneutics represents this present thesis scientific theoretical method, whereas phenomenology encompasses how the empirical knowledge will be obtained and processed. Hermeneutically oriented phenomenology thus focuses on testimonies from the perspective of individuals or groups. It aims to obtain the social perceptions and interactions generated through different kinds of interpretive social processes (Sinnerbrink, 2011). The empirical data analysed in this present thesis is limited to structures and essences of people's experiences of facemasks. Such a way of gathering empirical data naturally implies some implication for the analysis of it. The implication is that the researcher must analyse testimonies based on respondents' already processed thoughts and ideas, which means that the researcher analyses data already "interpreted" and processed by the respondent.

4.2 Qualitative method

This present thesis illustrates respondents' worldviews and reasoning to facemasks rather than quantifiable empirical results. This interpretive approach justifies the choice of qualitative research method as it is, according to Esaiasson et al. (2011), suitable when one wants to understand an individual's perceptions of the world around them. Qualitative research, unlike quantitative, often considers the context in which an individual is operating (p. 340-341), which enhances the choice of a qualitative approach, as this present thesis aims to understand how and why Meaning-making takes place in a specific context.

In qualitative research, according to Bryman (2011), it is prevalent to start from an inductive approach where a new theory is generated based on the empirical material. The opposite of induction is deduction, which entails that the study tests a pre-existing theory (pp. 26, 340). As a third and intermediate option, the abductive approach is often used in qualitative research. The abductive approach suggests that theories and previous research are indicative and interwoven, but researchers do not seek to predict results by predetermined hypotheses. In other words, the researcher's preconception can be coloured by the chosen theories and previous studies, but the researcher remains open to possible new insights that may be generated (Bryman, 2018, p 478-479). This present thesis adopts an abductive approach since it does not explicitly intend to introduce new theory or test hypotheses deductively. By analysing previously unexplored aspects of Sensemaking and risk-cultural dimensions, this present thesis contributes to the already existing theories and findings, which hopefully will help the field of crisis communication to cumulatively grow.

4.3 Semi-structured focus group interviews

As there is a range of qualitative techniques available, this section specifies how and in what ways this present study collected its empirical material. An initial decision was made about what specific interview technique was deemed most appropriate for gathering people's meaning-making testimonies and their underlying risk-cultural norms and values. First, interviews were assumed to be a reasonable starting point. Interviews require real-time interaction between the researcher and the interviewee. Real-time interaction is considered the best data collection method, as a face-to-face exchange approaches the best erudition about opinions and beliefs from another person (Kvale & Brinkmann, 2014). Also, Alvesson and

Sköldberg (2009) emphasize the importance of direct contact with the participants via interviews.

Since this present thesis aims to analyse how people based on their ethnic and citizenry background have made sense of facemasks, focus group interviews were considered an appropriate starting point. One of the advantages of focus groups is that settings can obtain and enable empirical statements from several people simultaneously and limit risking interviewing interventions (Esaïasson et al., 2012). This non-controlling advantage is by no means given in practice. To enable a relatively non static interview setting and thereby enhance a somewhat natural dynamic between the respondents, it was decided to design the interaction between the respondents by using semi-structured interview strategies (Kvale & Brinkmann, 2014). Semi-structured interviews offer an intermediate position between a closed structured discussion and a fully open discussion (Grix, 2010). In other words, the interview format also offers a higher degree of spontaneousness, where possible traces and patterns can be followed up, which cannot be done in a more purely structured interview (Saunders et al., 2016). With that said, semi-structured focus group interviews combine the best out of the structured interview format, which can predetermine some aspects of interview situations. The unstructured interviews approach the interviewees in a more adventuresome approach. The later section will present how the interview guide itself was designed to answer this present thesis's four empirical questions.

4.4 Selection criteria's

For the sake of transparency, the decision-making process on how to select people in practice involved some twists and turns. The first initial strategy was to use social statuses of residential areas as the primary selection criterion. However, since door knocking and recruitment at public places were considered inappropriate in pandemic times, the processes took another direction. The next idea was to divide the Swedish population-based on socio-economic characteristics, i.e., based on people's level of education or income, equivalent to the dimension of social class. However, this idea was dismissed since the selection was deemed not to reflect the broader ethnic and citizenry dimension, which was a vital area of this present thesis. Finally, the decision fell on basing the strategic sample on the Swedish Statistical Office's (2019) characteristics of the Swedish population, however, with some minor adjustments. SCB's classification on whether a Swedish resident has a native or foreign background is based on

whether people are born in or have one parent born in another country than Sweden. The selection criteria for this present thesis are based on a similar definition; however, this thesis deemed that some of the respondents needed to have both parents born abroad to fit in one category (see below). Factors such as gender, age, and level of education were considered secondary, where the primary criterion was based on whether the respondent was:

- a. Born in Sweden with Swedish-born parents and holds Swedish citizenship.
- b. Either born in Sweden or abroad with two foreign-born parents and holds Swedish citizenship.
- c. Born abroad, lives in Sweden, and holds citizenship other than a Swedish one.

Given the strategic selection criteria, the respondents were delimited to individuals who hold citizenship. Consequently, individuals who do not have citizenship in any country or are awaiting citizenship in Sweden were excluded. Moreover, this also implies that the study loses a considerable population de facto residing in Sweden, who either obtains a residence permit of some kind or do not have any legal documents at all.

Once the strategic sample was defined, a decision on how to recruit these respondents in practice was made. In the case of this study, a convenience selection was used. This means that the selection was not randomized but instead based on the accessibility. For this present thesis, the researcher used individuals related to his social circles, which was relatively easy to recruit (Byrman, 2008). Twelve people were recruited for the strategic sample of people of Swedish origin (a), divided into two equal groups. One group consisted of the researchers' friends. The other group consisted of the researchers' party colleagues belonging to the Liberal seniors' forum. Twelve persons were recruited in two equally sized groups from the strategic sample of Swedes with foreign origins (b). One group consisted of the researcher's friends, albeit from different social circles. The other group consisted of the researcher's former colleagues without any social relations with each other. Five people were recruited to the group of respondents with citizenship in other countries than Sweden (c), whom all participated in one group.

A total of 29 people were interviewed in five separate focus groups. Age was a factor that was considered when recruiting respondents to groups (a) and (b). The decision not to conduct more than just one group representing the category of foreign citizens was based on empirical

saturation and the lack of time resources (see: Appendix 4 for the complete list of respondents). In the following section, the strategic selection process and the recruitment of respondents will be critically discussed.

4.4.1 Implications of the strategic sampling

The present thesis strategic sampling selection was not in any sense without ethical flaws nor scientific dilemmas. Research on risk cultures compares people's self-assessed nationhood against each other. Instead, this present thesis tried to make it somewhat more complex by comparing three distinct categories of origins against each other. Nevertheless, it is critical to be aware that individuals' self-perceived origins, whether Swedish or other origins, potentially influenced their risk cultural perceptions and beliefs, both consciously and unconsciously. At the same time, the group had unique similarities and shared experiences.

The respondents of Swedish origin (a) have been raised in Sweden. Therefore, it is not inconceivable that this group essentially shares similar perceptions, for instance, how the nations institutionally should be governed in times of crisis. While the Swedish respondents with foreign backgrounds (b) all share the experience of being Swedish, at the same time, they all have diverse cultural influences, as they are originating from cultures from different parts of the world. While respondents with citizenship in countries other than Sweden (c) are coming from different parts of the world, they all have in common that they are relatively new to Sweden. All respondents might have their 'home' countries' cultures and institutional traditions, which might still be present in their worldviews. These insights serve as an additional justification for why the social constructionist scientific perspective was best suited for this present thesis. An additional implication of the strategic sampling is that it might exclude some risk-cultural features and beliefs that may be more salient in some societies.

It also must be addressed those two persons in the group in the group of respondents with citizenship in other countries (c) who have come from the same country, which may have affected the orientation and characteristics of this focus group. However, the respondents still shared experiences and perceptions despite the overrepresentation of nationalities. Another element that needs to be addressed is that some experiences relating to facemasks were particularly unique amongst the senior respondents. Given the time frame of the study and the fact that age was not a factor directly related to the scientific problem of this present thesis, it

was decided not to highlight these findings. However, these empirical findings will be available for researchers who consider them relevant to examine more detail.

As mentioned, the older population of Swedish origin was recruited from the researcher's political engagement and its senior branch network. Despite them emphasizing their objectivity in evaluating, for instance, the government's performance during the crisis, a possible ideological bias among the respondents cannot be discounted.

4.5 Construction of the semi-structured interview guide

One fundamental aspect of abductive research is to declare how the theoretical perspectives and previous research become obtainable. In this present thesis, the interview questions were phrased to generate open and fruitful exchanges between respondents. The four empirical research questions posed in this present thesis also represent the core themes in each focus group interview, which also covers the two theoretical frameworks of Sensemaking and Risk Culture.

Empirical question one and two: "What were the respondents' initial reactions to the presence of facemasks?" and "How did the respondents use media to seek information on facemasks, and what influenced their evaluations of the information found?" was made obtainable by incorporating the dimension of Noticing from the Sensemaking perspective. Moreover, previous research on how media use, a central part of people's making sense of events that disrupt "normal" day-to-day routines, was phrased in the interview guide. The questions asked during the interviews were phrased to activate the respondents in recalling they first noticed facemasks and what their initial reaction was to their occurrence. Also, the theme that constituted Q2 was intended to activate observations on their media practices related to masks, i.e., if they actively searched for or were passively exposed to information on facemasks. Furthermore, questions were phrased to obtain the media diets of the respondents, where the respondents were asked to answer questions on what sources they have used or been actively or passively exposed to. The respondents were also asked where they had found cues on facemasks beyond the traditional media channels. Lastly, they were also asked to describe if they avoided some information or cues and what purposes such activities might have had.

The third empirical question of the thesis, "How were the respondents' meaning-making process of facemasks shaped by other motivations?" was made obtainable by combining facets

Meaning-Making and Acting. It should be noted that these dimensions may sometimes overlap with Noticing, which is the primary motivation for the separation of these approaches. The separation of perspectives also enabled a structural advantage for the execution of the interviews themselves. The interviewer was able to supervise the discussions more effectively and ensure that all interviews covered the theoretical dimensions. The interview questions in this theme addressed whether the respondents were using facemasks and how/why they came to terms with their perceptions of facemasks. The questions also covered how they experienced being in specific public settings and how they perceived those situations at different stages of the crisis. Finally, they were asked if their meaning-making was influenced by external social pressures, such as friends and family, and their perception of other strangers' public actions and routines. All in all, the third empirical question and interview theme were designed to determine why and how their meaning-making processes have occurred.

The fourth empirical question, "What kind of risk cultural norms and values reflected the respondents depending on their ethnic background and/or citizenship?" was made obtainable by utilizing the theoretical dimensions offered by Corina et al.'s (2016) typology of risk cultures, namely Disaster Framing, Trust in authorities and Blaming strategies. The questions here were intended to analyse the respondents' own statements on how they experienced and what attitudes they had towards the "Swedish" way of managing the crisis in general, together with questions on their trust in the information that was coming from official sources. "Trust in authorities" was analysed by asking open-ended questions about what people wished the Swedish institutions could have done differently in their crisis management. Such questions were phrased to reveal the respondents' underlying expectations of the Swedish authorities and shed light on how they have experienced their "performance" during the crisis. Responses to the question also uncover the underlying perceptions on what role the state ought to play in this crisis. To enable discussions related to the issue of facemasks and determine their risk cultural norms and values, the interview questions also involved comparative evaluations of different restrictions imposed during the crisis.

All in all, the thematization of the empirical questions with respect to the theoretical dimensions of the present thesis enabled a structure of the interviews. They were well-anchored to the purpose of this study. The semi-structured interview guide is found in Appendix 3.

4.6 The execution of the focus group interviews

The respondents were approached by email or via Facebook. They were given a concise information letter outlining the purpose of the research and why specifically they were selected for the study. Once the respondents confirmed their participation, they were provided with additional information that specified the focus group's date and gave supplementary instructions on how the interviews themselves would be carried out.

Before the actual interviews, two smaller pilot interviews were held with family and close friends. Such pilot interviews were arranged to test the interview guide in practice and revise and rephrase some of the questions. In total, five semi-structured focus group interviews were conducted, involving altogether 29 people, where all five interviews represent the empirical foundation of this present study. The interviews lasted for roughly one hour and 15 minutes. All of them were conducted and recorded through the digital software tool Zoom. The choice of a digital setting for the interviews was motivated; therefore, the options to conduct them in other ways appeared unethical due to the pandemic situation.

Interviewing via Zoom had both advantages and disadvantages. The downside, of course, was that the discussions were slightly artificially enclosed due to the digitalized nature of the software. Nonetheless, all the respondents were highly motivated to share their reflections and experiences. On the plus side, all of them have had acquired considerable video conference experience over the pandemic months. Since facemasks are partly a medical and epidemiological phenomenon, neither the respondents nor the interviewer has any official expertise; the interviewer reassured before starting the interviews that there are no more accurate answers than others. Before the interviews started, the respondents could introduce themselves in front of others. The moderator also actively included everyone in the discussion by distributing the floor to respondents not involved in the discussion.

After the interviews were conducted, the material was transcribed by listening to it in the VLC media player and typing it out to be printed and processed. The themes were broken down and different coloured labels to underline the material points related to the research questions, the theories, and the previous research.

4.7 Ethical considerations

Asking questions about people's meaning-making processes and underlying risk-cultural norms and values was not considered areas invading personal integrity. Instead, it is deemed a complicated and challenging inquiry with several conflicting objectives, were, however, one may have very diverse perceptions about. When designing the interview guide and organizing the focus group sessions, the ethical research guidelines outlined by the Swedish Research Council (2002) have been implemented. More specifically, the requirement of personal protection was central, which says that individuals shall not be exposed to any physical or psychological harm, humiliation, or discomfort. In addition, the requirement of information, the requirement of consent, the requirement of confidentiality have also been applied. The respondents were all made aware of what the purpose of the thesis was and in what context their testimonies were going to be analysed in. The respondents with citizenship in other countries than Sweden have been anonymized per the identity requirement so that their identity is not revealed when meeting classmates or examiners. Lastly, the utility requirement has been applied so that the material provided by the respondents is used only to the degree they have been notified.

4.8 Reliability and validity

The reliability and the validity of a research project refer to the trustworthiness and authenticity of a study. Reliability can also be described in terms of replicability, i.e., whether the study was repeated under the same conditions, would the same results be obtained? Validity of authenticity refers to the extent to which the study examines exactly the questions it claims to investigate, as well as whether it applies the relevant methodologies (Bryman, 2008). A qualitative study typically has relatively low-reliability levels and can be considered to have a low level of validity; the sample is usually narrow and selective and does not allow any significant statistical generalizations to be drawn. This is not problematic, as qualitative research often has an exploratory rather than a generalizing purpose. They can serve well to produce more profound insights into specific issues and phenomena and discover new departure points for further research (Bryman, 2008), as is the case for this study.

Given that this study uses a non-representative convenience sample and examines a small group of individuals, it could be argued that the study has a lower level of reliability and validity from a generalizable statistical perspective. However, this thesis retains high validity concerning the

choice of method and problem area. Individuals' meaning-making processes and underlying risk cultural norms and values are best analysed using focus group studies. To enhance the reliability and validity of the study, a high level of transparency has been strived by describing how the empirical material was collected and analysed. Illustrating an extensive set of excerpts from the interviews was used to specify what was being analysed and to give the reader a chance to judge whether they find the analytical claims plausible or not (Eriksson-Zetterquist & Ahrne, 2015).

Moreover, the goal of most qualitative studies is not to generalize but rather to provide a rich, contextualized understanding of some aspect of human experience by studying particular cases (Eriksson-Zetterquist & Ahrne, 2015). In this present thesis, the theoretical generalizability is high if one is aware of the context in which the theories have been applied. Since the theoretical framework applied in this present thesis has been proven in previous studies, and although the previous studies have dealt with situations that differ from the COVID-19 crisis, it was still possible to find rigorous theoretical similarities in the data generated from the focus group. More concretely, as the theoretical findings from previous research were consistent with the empirical data in this present thesis, the findings should be generalizable in other settings if the theories are applied in similar ways. However, such contexts should be related to audience-focused studies on crisis and risk research. However, such research could still be related to other types of crises or situations, explicitly interested in analysing Meaning-making processes and/or risk cultural research questions.

Moreover, even though education level was not part of either the selection process or the purpose of the study, it is still essential to raise the outcomes of the strategic sampling. All respondents had completed upper secondary school, and the vast majority studies or have finished university education. Based on education levels, this does not necessarily represent the Swedish or international populations. However, it was considered a minor problem for the study's internal validity since all groups, both in and between them, had equivalent educational backgrounds. Nevertheless, in terms of external validity, the outcome of the selection process brings some implications. The respondent's level of education affects the results and subsequent conclusions. For example, group (c) respondents stated that they actively sought out scientific journals to acquire knowledge about facemasks. Reasonably, such information-seeking behaviours are not as frequent among groups with lower levels of education. In other words,

the findings and conclusions of this present thesis are seen in the light of the fact that the respondents present a relatively highly educated group of people. Their reflections and testimonies may be unique to people with their educational levels. Nevertheless, this does not necessarily mean that similar experiences and information-seeking habits would not be found among other educational groups. However, as this study examined higher educated people, it is impossible to be sure.

The following chapter presents and analyses the study results based on the theoretical and conceptual starting points and previous research.

5. Empirical results

The empirical results are presented in the same order as the empirical questions stated in the purpose. The first three empirical questions will be presented descriptively and then followed up with analyses under each of the empirical presentations. The fourth empirical question interweaves results and analyses, where it will end with a summary of the found observations.

5.1 Initial reactions of facemasks

The first empirical question analyses the respondents' first encounters with facemasks and their initial reaction towards their presence. After presenting testimonies that answer the empirical question, it will be analysed using the theoretical facet of *Noticing* and previous research.

Facemasks: First noticing's and initial reactions

Before the respondents were aware that a global pandemic would strike them, all respondents first noticed the appearance of facemasks in news coverage covering the unfolding situation in Wuhan: " *I first saw masks on TV,*" " *I guess I saw them in news coverages about Wuhan.*" During the initial crisis stage, none of the respondents in any group did any proactive research on facemasks. They were merely passively encountering facemask cues in media stories explicitly focusing on the unknown viral contamination in mainland China. Nobody reflected on the probability that the virus could spread from China to the rest of the world. It was first when people noticed facemasks in their everyday life that they began to make sense of the presence of the object:

"I saw it for the first time publicly when I was traveling by bus. It was an extraordinary situation. Everyone was staring at an Asian-looking guy – like he alone was carrying a super infectious disease. I was also participating in the starring of him". – Andreas (a)

Early in the crisis, respondents in all focus groups noticed that facemasks were worn by people with East Asian- looking features. The most notable response amongst the respondents, irrespective of the group they belonged to, was that wearing facemasks appeared highly unusual. Respondents with Swedish background (a) initially noticed the phenomenon as culturally remote, phrased as *ridiculous*, or that masks evoked feelings of discomfort since *many dentists were running around in town* (a). Other respondents stressed that mask use initially was perceived as *irrational* (a) which could potentially *fuel unnecessary fear* (a):

"When I first saw the facemasks, I thought it was a bit silly, especially when we did not have that many Corona cases in Sweden. I felt that people were exaggerating their anxieties, blew things up to an irrational level, and fuelled unnecessary fear." – Lovisa (a)

Respondents with citizenship in other countries (c) share similar experiences as those with Swedish backgrounds (a). The testimonies from the group with citizenship in other countries (c) witness that they early in the crisis perceived that they needed to take distance from mask-wearers. Such behaviour initial behaviours were motivated by an intuitive self-protective instinct:

"The first times I saw facemasks in Gothenburg must have been on people from Asia wearing them. They probably knew perfectly what the virus was and is. It was a point of time when I had some prejudice towards people wearing facemasks. I immediately gave such people some distance out in public because I thought they were sick or something."
Santiago (c)

The results show reactive similarities in terms that are most remarkable among the respondents with Swedish background (a) and the respondents with citizenship of other countries (c). Both groups expressed that they initially had a sceptical perception of masks. It could be argued that the cultural unfamiliarity of masks was causing such hostile reactions. However, this adverse first reaction is not a reaction that all people share.

Past experiences and initial reactions

The respondents from Sweden with foreign backgrounds (b) did, like the other groups, notice masks on people with East Asian-looking features. However, the difference between those respondents, compared to the other ones, was that they initially expressed an underlying understanding of why they acted as they did:

"Asian cultures have worn masks in the past, not just during pandemics. It is like a cultural thing, so I understand why they took advantage of it when Corona was on its way to Sweden." - Belit (b)

Another testimony from the same group (b) expresses that his initial negotiating of his first sight of facemasks was influenced by an underlying historical understanding of *why* his neighbours were acting as they did:

"It was early in the pandemic people started to use facemasks here in Angered. Many people here are born abroad and compared to Swedes, have entirely different views of risks. Perhaps the reason is that they have direct or indirect experience of war or war-like situation themselves or shared with some relatives, just as I share with my parents. I thought it was a natural way to react. People were scared – and people did their best to protect themselves from contagion. I understood why people were worried and anxious about their health and the health of others. I can certainly understand those who wore facemasks early in the crisis. They were scared and wanted to protect themselves from danger." - Amir (b)

When reflecting on his initial response to others' mask-wearing practices, Amir (b) took note of others' eventual perceptual experiences, along with his implicit social inheritance. His meaning-making process resulted in a reflexive, partially recognizable reaction. One testimony expressed that the first sights of masks made the respondent think about past experiences from similar emergencies:

"When I first saw facemasks here in Sweden, it took me back to the early 1980s, when I lived in Prague and grew up there. We were forced to use gas masks to protect ourselves from the Chernobyl disaster. At that time, we were directly exposed to something dangerous, radioactive radiation. When I saw masks here in Sweden, something in me was awakened. I was taken back to the feeling of a dangerous situation. The same feeling, I had in the 80s when I was just a teenager. The first time I saw the facemask here in Sweden out in public was like a flashback. I was drawn right back to crisis modus. When I saw the facemasks here, I understood that the pandemic was real. Now I am used to the situation, and I do not see anything strange about the behaviour, but it was just that first sight that I felt: OK, here we go again. That is how I reacted when I saw masks for the first time." – Bashar. (b)

This finding indicates that Bashar's (b) encounter with mask-wearers in Gothenburg activated a meaning-making process that took him back to his childhood memories, where he reminisced to a situation in which he was obliged to use gas masks to evade radioactivity. In the respondents with citizenship in other countries (c), we find respondents who have direct experiences of wearing sanitary facemasks. Compared to all other respondents, her initial reaction to the presence of facemasks in Sweden witness a different kind of meaning-making procedure:

"Facemasks were not something new to me. I wore it when I visited Shanghai, and I know that Chinese people have used it in other contagious situations. When I started using it here in Sweden, people stared at me like it was odd or something. Not many people have worn

masks here in Gothenburg. I am often the only one wearing it. And people gaze at me like I was sick or something. People take distance from me." Xiaopeng (c)

Xiaopeng's (c) testimony indicates that facemasks are uncontroversial, almost an integral part of social interactions, and a prerequisite in pandemic situations. For her, facemasks have been used to prevent exposure to respiratory infections in past virus outbreaks. Moreover, her interactions with family and friends in China during the early crisis stage naturally influenced her cognitive negotiations of facemasks in Sweden.

Analysis of the initial reactions to the presence of facemasks

What do these initial reactions and meaning-making testimonies mean? In the words of Choo (2017), meaning-making processes are primarily about the process of making sense of what is deemed plausible concerning a newly arrived phenomenon or unfolding event. Based on the testimonies found, it is evident that early in the pandemic, both respondents with Swedish background (a) and respondents with citizenship in other countries (c) noticed mask-wearers as potentially infectious. Maitlis and Sonenhein (2010) propose that positive cognitive emotion can positively (and negatively) influence people's sensemaking of events. As for the groups with Swedish background (a) and some of the respondents with citizenship in countries (c), it is safe to say that the respondents mostly shared adverse and somewhat hostile initial reactions towards their first noticing of masks in public spaces. Nevertheless, at least for the start of the crisis, it influenced how the respondents (a and b) made sense of facemasks and mask-wearers and subsequently made sense of mask-wearers behaviours.

The results show that the Swedish respondents with foreign backgrounds (b) had other kinds of initial reactions in masks. According to Choo (2007), sensemaking is a process where people from a plausible interpretation based on what a person sees as part of the environment as interesting, depending on individual values and experiences. Since the Swedish respondents with foreign backgrounds (b) stressed both their individual experiences as integral parts of their meaning-making process, they also highlighted others' perceptual experiences of masks. This finding means that their meaning-making processes were based on other ingredients compared to the other groups. Additionally, it was also clear that their own experiences of other crisis-

related situations played a role in shaping their initial meaning-making processes to the presence of masks.

From the group with respondents with citizenship in other countries (c), one of the respondents had unique experiences of masks, as she was a mask-wearer herself even before the COVID-19 crisis. Compared to the other respondents' testimonies, she had to determine cues of other people gazing at her. Findings from the US show that minority groups in times of crisis experience alienating feelings against the majority society (Pokras, 2007). As the respondents in groups (a & c) explicitly described that they initially stared meaningfully at those who wore masks early on, and Xiaopeng (c) sensed that such behaviours were prevalent and directed, the findings indicate feelings of alienation holds in Sweden.

5.2 Media use and information evaluations

Since the very beginning of the crisis, the question of facemasks has been on the respondent's minds, yet from different perspectives. Some respondents have passively been reached by information on the issue, while others have been more active in figuring out whether masks were a feasible measure to engage in. Other respondents also tried to make sense of why there were no recommendations on masks in public spaces. This section presents how the respondents use media to seek information on facemasks and the influences that affected how they evaluated the information found.

Trust in the culturally close information

Decisive for the respondents' use of media, irrespective of their proactive or passive information-seeking behaviours, was that they primarily trusted and relied on news and information, which one was culturally accustomed to. During the early phase of the crisis, when an increasing number of countries across Europe and the wider world implemented both voluntary and mandatory facemask measures, the respondents with Swedish background (a) and the respondents with foreign background (b) relied on the Swedish official messages concerning the issue:

"I have exclusively depended on the information from SVT News and from the authorities' channels." – Karin (a)

Most of them also relied profoundly on the truthfulness of Swedish legacy media's media reporting on facemasks:

"I have always been reading Aftonbladet. I have also listened to information on masks via radio. I always listen to P1 on my way to work, which I perceive as reliable". – Loudia (b)

In the early phase of the pandemic, the respondents related to Sweden (a and b) experienced that there was no immediate information about the face masks to be found:

"I doubt that any of the media directly wrote anything about face masks. Neither did the Public Health Agency. Anders Tegnell (chief epidemiologist) was on TV and said that they do not work, but not more than that. It was not until the second wave before the news began to report on this issue." – Hanna (a)

For the respondents with citizenship in other countries (c), the result shows that their media habits and information evaluations were considerably different compared to the other groups (a and b). Since the early stages of the crisis, respondents with citizenship in countries (c) has been exposed to crisis information that suggested that facemasks were a preventive measure that the public should engage in:

"In Germany, we did not discuss whether to use or not to use facemasks. It was like from the beginning; we were told that we should wear masks. I have thought about why I trusted such information during this period. And I found out that the main reason I trusted such governmental guidelines was since scientific institutions, such as the Robert Koch Institute, stood behind the government's orders. And they have chief epidemiologists, the German one. He was a man that I put a fair amount of trust in. If he says, OK, wear your masks, it has some effects. It does not hold up all the viruses or symptoms. When he said, wear it, and supported the German governments' guidelines, I trusted it. I never questioned whether masks were effective or not. While here in Sweden, there was a whole debate about facemasks efficiency. Some of my classmates told me that Sweden could not recommend such things because it goes against the Swedish constitution, or some said that Sweden did not order enough of them (facemasks). I tried to understand the debate that was going on in the Swedish news, but it was so confusing." - Mila (c)

However, another respondent from the group with citizenship in other countries (c) witnessed that facemasks have been a measure that has been highlighted in information effort from his county's public authorities:

"Since the lockdown started in Spain, I have followed information on facemasks since at least one year back. We had a campaign in the media that started in the spring of 2020 and lasted for three months. Every day, the Spanish government talked about facemasks, instructing people about when and how to use them. The media debate has predominantly discussed the effectiveness of specific kinds of masks - some were more effective, and others were not that effective. The discussion went across all news media outlets, and it was kind of extensive and polarized. However, journalists and politicians had good intentions, and they wanted to protect people, especially vulnerable groups." - Fernando (c)

These results show that people with citizenship in other countries (c) were exposed to crisis information messages that explicitly suggested that facemasks were preventive measures. However, compared to the Swedish respondents (a and b), it took some time before they were exposed to similar media narratives. The results also indicate that the respondents with citizenship in other countries (c) primarily rely on the culturally closest sources.

Attentional instability and mixed perceptions of the efficacy of masks

The empirical results from the respondent groups from Sweden (a and b) show that many experienced difficulties in comprehending the crisis information on masks communicated from the PHA:

"The whole masks discussion has been unclear. We have probably all come into contact at some time or another with the term "information overload." And concerning facemasks, I feel that much of the information found in the news media has been contradictory. Different sources have been saying very different things, and it has just been complicated and so confusing to navigate around it." - Elias (a)

The results show that irrespective of whether they had actively searched for information or were passively exposed to facemasks, all Swedish citizens (a and b) perceived the information on facemasks from Swedish sources as contradictory and challenging to interpret. *"It has been so confusing...Different outlets have written stressed different factors...It feels like we have been hesitant in admitting that masks could have some positive effect"*. The Swedes (a and b) perceived that the messages communicated by the PHA, alongside other Swedish scientists in the media, generated an informative situation with many alternative narratives, which was hard to follow and difficult to process:

"The information from the PHA have been very unclear. Do we have rules on it or not? When should I wear a mask? In which contexts, and why not in others? The PHA has not given any answers." – Kastriot (b)

The testimonies from both the Swedish related groups (a and b), irrespective of whether people fully trusted the PHA's judgments on the matter or whether people were doubtful, witnessed that all respondents have experienced the information cycle on facemasks as difficult to assess:

"It has not been easy to follow all these changes of positions. Tegnell has been saying different things at different press conferences. One time, it is about how masks increase transmission. At other times, it is about the lack of evidence. Next time it is about the false sense of security. However, if you have a proper surgical facemask, you cannot catch the virus from another person through your exhalations and drips - even if you get too close. That has not been clarified."- Wanda (a)

The results also show that the groups from Sweden (a and b) were centred around Anders Tegnell's utterances on facemasks, which is certainly not shocking. For several reasons, he has featured extensively in news media and the public debate about pandemic management. The respondents with Swedish citizenship (a and b) debated what Anders Tegnell said (and not said) throughout the crisis. Their discussion unfolded as follows: Some believed that the state epidemiologist had explicitly *dismissed* facemasks as a protective pandemic measure. Other respondents said that the scientific evidence on effectiveness was too *vague* and that other countries' facemasks were *failing*. Moreover, other respondents argued that the state epidemiologist clarified that social distancing is the only preventive measure that holds *efficiently true*. Then there were those, unique for the respondents with Swedish background (a), who sensed Anders Tegnell's statements on the masks differently:

"I find that people have consciously been misinterpreting everything the PHA has been saying. Anders Tegnell has never claimed that facemasks do not work. He has only just stated that it is insufficient evidence on their utility work outside hospital environments. The only thing that has been shown to work is social distancing. The PHA has not forbidden people to wear masks, only stated that they probably do not work as effectively as expected." - Kerstin (a)

One testimony does not exclude the other, and there are certainly reasons to believe that the state epidemiologist has been uttering something alike. However, the results show that all

respondents from Sweden (a and b) have tried to make sense of his messages. Whether one perceived that the efficiency of masks was zero, or very limited - or that social distancing was the most important measure - the overall experience among the Swedish respondents (a and b) was that the extensive information flow on facemask made it difficult for people to direct their attention on every aspect at once:

"I have felt that there have been so many mixed messages on this issue. There have been different messages within Sweden - at the same time as other nations have had different rules and regulations on facemasks. There has been so much disagreement over the medical effect's masks- whether they are helping reduce the transmission of disease. Also, I experience that the discussion in Sweden has grown enormously and expanded on many levels: at the societal level, at the group level, and at the individual level, the issue has been debated. Many have completely divergent views on what should be prioritized. If I had to put it into words, I would call it something like: "Between foolishness and common sense."

- Said (b)

The results show that both Swedish groups (a and b) shared the sense of widespread ambiguity over the efficiency of facemasks. In addition, the respondents found it hard to absorb the many and contradictory arguments that flourished in the media. This alone might be one of many explanations for why there were so many different perceptions of what state epidemiologist Anders Tegnell had been communicating.

Active seeking when no recommendations were in place:

The empirical results show that there were differences in the way the respondents searched for information. Those with non-Swedish origins (b and c) tended to have broader media habits compared to those of Swedish origins:

"I got curious about why we have such different attitude when it came to facemasks, why we do not recommend it, and why it would not work. So, I read a lot about it at the beginning of the pandemic, when facemasks first began to be mentioned in the news. I guess I rambled into some different pages, like medical pages. A few forums, such as Reddit, and I also read a lot about facemasks on Twitter. I followed some scientists on Twitter, like Agnes Wold, so I have read her retweets on the issue and followed her discussions with other scientists and opinion leaders. Then I follow the BBC and CNN on Twitter, read their news on masks, and I get the impression that the debate there is more in-depth than the Swedish one. They write about the effects of different indoor

environments and how masks potentially reduce the damage of asymptomatic spreading."

- Vlora (b)

The Swedes with foreign backgrounds (b) stressed that Sweden's position on the matter triggered their information-seeking activities. The respondents with backgrounds in other countries (b) witnessed that they became increasingly curious about *why* Sweden stood out compared to other countries. This perceived knowledge gap led to the need for orientation. As a result, the media diets among the respondents with foreign background (b) was broad, were the various media platforms. Some respondents (b) made use of their relatives to make sense of how and why other nations' governments were acting as they did and to get an impression of the consequences of more restrictive measures might bring:

"I have been speaking to some of my cousins in the UK. Over there, it is entirely different, it is displayed in every shop, and guards stop people from entering grocery stores if someone is not wearing them. I would not want that to be the case here, but I wish more people would have voluntarily worn masks here." – Bashar (b)

When it came to the respondents' information-seeking behaviours with citizenship in other countries (c), the results show that this group had similar behaviours as those of the foreign background (b). To find information on why facemasks were not recommended in Sweden, all the respondents with citizenship in other countries (c) utilized culturally close media to seek answers on the Swedish way of managing the pandemic:

"I follow some social media accounts where Chinese people living in Sweden translate Swedish news and crisis information from Swedish authorities and publish them and share the information with other Chinese people living in Sweden. [...] I still believe that facemasks are a correct measure to engage in during pandemics. But I never compare the Swedish news with Chinese news. Therefore, I perceive that it is ideological bias in Chinese media, especially against Sweden's management of the situation. It is like two different realities, so I never compare the content. I only read them as two narratives of the same issue, to better follow how the crisis in each country develops." - Xiaopeng (c)

By exposing oneself to specific social media accounts, Xiaopeng witnessed that she could gain a glimpse of how Swedish authorities were mitigating the crisis. Moreover, the fact that Sweden was holding out with recommendations on facemasks was not unnoticed by any of the respondents with citizenship in other countries (c). The testimonies witness that all respondents

(c) were well-aware of the contrast between their home countries and Sweden. Ultimately, they felt an urge to take a personal stance on the matter. By discussing the issue with family and friends from their home countries and here in Sweden made it possible to get an overview of what the different cultures stressed as main arguments for and against masks:

"In the beginning of the crisis I got my information about masks by talking to friends and family, relatives within Sweden and living in Germany. So, I received different perspectives from different people. From within Sweden, it was a bit more of a sceptical approach. It was more like, from Germany, definitive; you should wear a mask because that is one crucial way of stopping the spread of the virus. And because of such controversies, I started my own research on the issue. I looked at different channels for information, both German and Swedish news outlets, and I tried to look for some scientific information, which does not have opinions as most news outlets have, instead anchored in some empirical proof. Because of that process I went through, more and more, I was confronted by information which stated the efficacy of masks, confirming that they work. They are necessary and that they are helpful in this pandemic situation. That is the process I went through. I have not changed my mind since I saw some evidence of their efficiency in public areas. So, when I read or see a news item discussing or problematizing if they work, I skip it, I ignore it. I already know and made up my mind." - Klaus (c)

Even though the respondents with citizenship in other countries (c) collectively have made sense of masks with friends and relatives, many still need to acquire information from other sources. Therefore, most respondents with citizenship in other countries (c) actively searched for scientific journals. According to them, such journals explicitly highlighted the favourable properties of using facemasks in public spaces. After forming an opinion individual opinion on the matter, they ignored messages from their cultural mediums and were settled in the non-facemask environment in Sweden.

Analysis of the respondent's information-seeking behaviours and evaluations

When and how did respondents use media to seek information on facemasks? The results show that the most extensive period of information-seeking activities was when the Swedish PHA did not yet have any general advice recommending facemasks. The results also reveal that active information-seeking activities were most prevalent among respondents with foreign backgrounds and citizenship in other countries (c). This result is in accordance with Ghersetti and Odén's (2021) findings, which proposed that Swedish citizens with foreign backgrounds

had more internationally influenced media diets than ethnic Swedes. Moreover, when the uncertainty encompassing the effectiveness was most salient in news media, the respondents' active seeking for information was most expansive. According to Rerup (2009), making sense of key information in crises is the central driver of information-seeking activities during uncertain crisis events. As for the respondents' evaluations of the information found, media trust was essential, yet it played out differently. When uncertainty arises during crises, or as in this case, a phenomenon so associated with the pandemic at large, people turned to sources that they perceive best suited to answer the fundamental question, "What do I need to know?" (Ratzan, 2014). The results show that the respondents mainly trusted the most culturally close information, or in other words, information that originated from their home countries.

The respondents with Swedish background (a) mainly searched for information about the PHA's advice on facemasks. They were either exposed passively through news media or actively seeking official information on the PHA's website. The key information for them (a) was to monitor the PHA's position on the matter. Respondents with backgrounds in countries other than Sweden (b and c) were keener to seek information that was not culturally related. Their motives were to find key information on the masks' medical efficiency since they were more eager to determine whether or not to use masks individually.

Moreover, the results show that the respondents with Swedish background (a) mainly searched for masks when the issue was most salient in the Swedish media. When the question was not in the spotlight of the news media coverage, the respondents were not actively searching for any cues on the issue. According to Coombs & Holladay (2010), media coverage of crises is fundamental to how people shape perceptions of events; in this case, the news media's many articles and news stories on the efficiency of masks, which put the issue on their minds. Hence, according to Coombs and Holladay (2010), the findings show that the media's focus and questioning of the absence of masks in Sweden, often framed as efficacy matter, affected the respondents with Swedish background (a). Moreover, the results indicate that Swedish citizens (a and b) trusted Swedish news media. However, at the same time, the respondents experienced it as difficult to distinguish what factors they should focus on when interpreting the information found in the news. According to their testimonies, Swedish legacy news focused on multiple narratives at once, which led to, as Christianson (2019) refers to, "attentional instability," which

impeded their sensemaking process. Concretely, it indicates that the Swedish-speaking respondents had difficulties figuring out "what do I need to know" relating to masks.

5.3 Sensory perceptions and meaning-making processes.

Since the respondents experienced conflicting narratives about the implications of facemasks, it simultaneously enables several alternative motivations to why individuals perceive facemasks as plausible reasons to act on. This section outlines the findings on when such meaning-making process occurred, including the underlying logic of why people motivated their actions as they did.

Facemasks: Situational purposes

All respondents witnessed that alleys and queues in grocery stores often were perceived as overcrowded, especially during afternoons. Malls and transport hubs were also mentioned as areas that all respondents tried to avoid, especially during rush hours. The collected narratives indicated that all respondents perceived that some situations as risky due to overcrowding:

"To avoid overcrowding, I try to do my groceries during in the morning, when everybody else work. However, occasionally it gets a bit crowded either way, so I always have my mask with me, just in case." Wanda (a)

Although all respondents witnessed that some situations were riskier than others, there were respondents among those with foreign background (b) who found it difficult to determine when they should wear a mask:

"Since there has not been any general recommendations to use it (facemasks), I have been evaluating and trying to predict whether or not I need facemasks in certain situations. Sometimes I misjudge certain situations, and it turns out to be really crowded after all. Is not always easy to determine when and where to wear masks. I at least try to make sure I have my mask on in public transport."- Nima (b)

The collective testimonies from the respondents with Swedish background (a) suggest that they had split, a bit of a paradoxical perception on whether to use masks:

"There are so many blind spots. If facemasks lead to a more cautious and restrictive life, I think it lowers the infection rate. It is good to have a barrier between your respiratory system and the virus itself. On the contrary, if you look at how some of my friends use masks, they wear masks everywhere, but they have no problem shuffling around inside the

mall when crowded. They express that it is OK, even though it is very crowded, "we have facemasks, it is OK, I cannot get infected then." In that respect, when it (the use of facemasks) gives that assurance that you have done X and then I am safe, I think that the facemasks can have some negative impacts and more harmful consequences." - Elias (a)

Found among the respondents with foreign background (b) was the experience of sensing that one was forced to visit such "risky" areas to maintain their everyday lives:

"Eventually, I no longer had the strength to ignore the crowded situations, and every day it was the same, cramming on the bus and when I was passing through Nordstan to get to the central station. People coughing and sneezing all over the place. In the end, I just felt I had to buy masks, so I could be spared of worrying that I might get infected." - Kastriot (b)

As there were common understandings between the groups on what kind of situations were deemed more or less risky, there was also common perceptions on what situation that mask-wearing was deemed useless:

"It is unnecessary to wear a mask where it is possible to keep distance, when you see people wearing masks in parks, or while driving, for example. I start wondering what is going on in those people's minds. I would never do that." – Andreas (a)

Wearing facemasks in in-door environments, out in nature such as forests and fields, in parks while jogging, or while driving or riding a bicycle - was perceived as inappropriate facemask activities. However, the testimonies from the respondents with Swedish background (a) witnessed that people wearing masks might not use them in matters that ensure safety:

"Many still wear masks improperly, on their necks, or covering only their mouths, but not noses. People do not know how to put the masks on, and when they remove their mask, they touch the outside of the masks, which is inappropriate and dangerous." – Vibeke (a)

To sum up, according to all respondents, masks should never replace social distancing, which was considered the most crucial measure that was to follow. However, the empirical results also show that the groups with foreign characteristics (b and c) were more likely to emphasize that masks might have favourable properties when overcrowding was perceived as unavoidable.

The Act of Peer Pressure

Emotions, mixed with social anxieties, perceived notions of responsibilities, illustrates how the respondents described their meaning-making processes. For instance, perceived social norms were factors that determine whether people chose to wear facemasks:

"I cannot deny that peer pressure, social peer pressure, influenced how I acted. When I saw that more people were wearing masks down at the shop and at the square where I live, I felt pressured to wear them myself. I cannot deny that I have followed how other people act." - Said (b)

The result shows that people felt pressured to follow other peers mask-wearing practices; however, testimonies witness that peer pressure was manifested in other ways, associated with more conflicting meaning-making negotiations:

"I wanted to use masks already early in the pandemic, but I felt awkward. I wanted to wear it on busses, especially when it was very crowded because it was impossible to keep a distance. I wanted to make sure I was not going to infect anyone unknowingly. But since it (mask-wearing) was not recommended and nobody wore masks, I thought I would look stupid if I wore a mask. I did not want to demonstrate that I "more knowledgeable" than PHA.- Vlora (b)

Such testimonies indicate that some respondents sensed that mask-wearing was desirable; however, one avoided the behaviour due to the fear of losing face in encounters with other people. Then some tended to keep a little extra distance from those wearing face masks in public settings:

"You have to keep a little extra distance to those who wear masks [...] Mask wearers could either carrying the infection or want to be extra cautious about being infected by COVID-19 themselves." – Jesper (a)

Some testimonies witness that mask-wearing functioned as a social behaviour with anti-social tendencies. Some argued that masks in public spaces might remind people to keep their distance:

"I wore masks in public spaces, not to encourage a feeling of safety, rather the opposite. I am not all sure of the medical efficiency of masks, but do feel that by wearing a mask, I remind other from breaking social distancing." – Loudia (b)

The empirical results show that the respondents with citizenship in other countries (c) perceived that the social pressure of two social circles sometimes clashed. The testimonies witness how social circles back home explicitly supported mask-wearing behaviours as desirable, while the social circles in Sweden had a different approach to the object. Such kind cultural clashes cultivated compromises:

"My parents would often call and check that I was wearing the mask on public transport, which I did, but at the same time, I would not want to be seen wearing it when I met my Swedish friends. I always take off my mask just before I meet them, just to avoid being confronted." – Mila (c)

Social pressure from two separate spheres was an experience that was shared among the respondents with citizenship in other countries (c). The results show how one respondent was strictly advised to wear facemasks by relatives from his home country. In encounters with strangers in Sweden, feelings of alienation arose:

"It was like much pressure coming from my family; they wanted me to wear facemasks early on. [...] When I realized that one of the consequences of having the virus could harm your heart, it made me realize that I need to minimize such risks. My partner has heart disease, so I was like: "OK, if I get COVID-19, it may be horrible for her". That is why I decided to use facemasks in public spaces, such as supermarkets and public transports. At the beginning of the summer, I remember that I met my friend. I met him up, wearing my mask, and felt like an alien. On the tram, nobody was wearing it, it was super-hot that day, and everybody was staring at me and felt like an alien, but I did not care. I did not want to risk somebody's health, so I did what I could to prevent it." - Juaquín (c)

The results also show that some respondents with foreign backgrounds (b) actively tried to engage relatives to adopt mask-wearing routines. However, such attempts failed due to religious beliefs:

"My parents have been relying exclusively on the PHA [...] they were convinced that the facemasks do not work, so both have chosen not to wear them, although they tell me how crowded it is when they are out shopping. I have tried to argue that they should protect themselves a bit more, as both are risk groups, but they bring up arguments, such as "wearing a mask is an infringement of God's intentions." [...] "If we are not infected, then we are lucky." Both are old-school Catholics and are probably imagining that the whole pandemic is the will of God or as a punishment for the sins of humanity." – Kastriot (b)

Some respondents with citizenship in other countries witnessed that mask-wearing was an inherent social feature well before the COVID-19 pandemic. The social norm of wearing facemasks was so well-established that one wanted to engage in it, even outside their "home country":

"It is common to wear masks in China. We have used masks to keep the cold from getting to spread during the winter, and people wear masks to prevent infecting others. Personally, I am familiar with wearing a mask, and I feel a personal need to wear them, as it prevents people from getting effected by me, as it potentially I might be infected without being aware of it."- Xiaopeng (c)

Peer pressure in shaping behaviours was also featured among the most reluctant respondents within the Swedish background (a). Their testimonies reveal bewilderment on whether mask-wears should be perceived as infectious and potential transmitters or that they engage in a protective behaviour for the sake of others:

"As I see it, masks signal two simultaneous positions, as mask-wearing does not give a definite answer. I am not sure of whether mask wearers are risky, and that I should keep distance from them. If the non-use is the norm, I will perceive mask-wearing as something worrying, something strange. However, if most people, people at work, my relatives and friends suddenly started to wear masks, I would probably follow their behaviours." – Andreas (a)

Analysis of the meaning-making motivations of facemasks

The empirical material shows, regardless of what origin or citizenship the respondents had, the presence or absence of facemasks has been made sense of based on situational cues and individual experiences. Regardless of whether the respondents perceived mask-wearing as a protective activity, virtually all respondents considered them legitimate, at least in particular public situations. Given that the respondent groups had different media habits and followed different nations' crisis information, the respondents seem to have come to similar conclusions even though they had different meaning-making negotiations. Seen as a collective, regardless of their origins and citizenry belonging, all the respondents had similar sensemaking outcomes of the objects. Wolbers and Boeresma (2013) propose that it is very difficult for citizens to reach common conclusions of crises and their causes. Although the respondents were not acting similarly and even though they constructed different kinds of narratives on masks' efficiency, the empirical results suggest that the respondents shared a collective sensemaking output. All

respondents were proposing that mask-use might be plausible in situations where social distancing was impossible to maintain.

The empirical results also suggest that the respondents sensed that facemasks worked as a compliment, not a universal solution to the pandemic. Following Weick et al. (2005), sensemaking is an evolutionary process, where the empirical results found that the respondents had diverse initial reactions towards the object. The empirical material shows that the respondents acquired new information and sensory impressions. Concretely, facemasks were renegotiated and recontextualized over time. More specifically, situational cues of overcrowding, which generated feelings of insecurity, were the main factor to why people were engaging in mask-wearing practices. In this case, the respondents with Swedish backgrounds (a) underwent the most prominent transformative meaning-making process. While other groups had more positive and welcoming attitudes, even early in the crisis.

The empirical results also suggest that there were purely social-psychological motives associated with mask-wearing, manifested in various ways. According to Barton and Kahn (2019), people consciously or unconsciously construct psychological narratives to cope with contradictory crisis information. From this framework, the respondents with citizenship in countries (c) shaped the meaning of their mask routines and practices in their interactions with Swedish friends and culture. Some respondents even compromised with their mask routines to fit in their Swedish social spheres. Others preferred to use the masks to reinforce their beliefs on efficiency, despite feeling alienated by the mask-wearing norms in Sweden. For some, the absence of state advice on masks created an unspoken non-mask wearing norm, which stood in the way for them to engage in a practice that some respondents were willing to participate in. In such cases, the fear of losing face in encountering non-mask-wearers was holding people back. With that said, Barton and Kahn's (2019) assumptions of individualized psychological defence narratives in times of crisis are consistent with this present thesis empirical material. In the group of Swedes with foreign background (b), a process of cultivation seems to have been salient, where people explicitly complied with mask-wearing norms that were salient in their neighbourhoods. Some respondents (c) even argued a clear link between their face-wearing habits and their past experiences of crises.

As Taylor and van Every (2006), meaning-making processes are not accomplished in vacuums. The empirical material in this present thesis shows that crisis management associated with the respondents' "home country's" played a decisive role in how they made sense of masks. Moreover, the empirical results show that respondents with citizenship of other countries (c) were engaged in institutional sensemaking on several levels simultaneously. As proposed by Weber and Glynn (2006), institutional sensemaking implies that institutions and their sensemaking citizens are connected. In the case of this present thesis, such interactions were found across all groups of respondents. Respondents (a and b) made sense of the state epidemiologist mediated utterances on the efficiency of masks, while the respondents with citizenship in other countries (c) made sense of their "own" institutional mask approaches and the non- recommendations communicated from the Swedish PHA. The results of such mixed institutional sensemaking processes were that they subsequently found an individualized path on making sense of the object. Altogether, the findings suggest that sensemaking is not generated in a vacuum and that institutions played a vital part in the respondent's meaning-making processes of facemasks.

5.4 Risk-cultural norms and values

The present thesis's fourth and final empirical question analyses the risk-cultural norms and values that reflect the respondent depending on their backgrounds and/or citizenship. By applying Corina et al.'s (2016) typology of risk cultures as the analytical framework, this section presents how the respondents framed facemasks, their perceptions of anticipations and accountabilities in the context of the pandemic crisis, and their evaluations of the Swedish authority's performance.

Risk-Cultural Framings of Facemasks

To briefly recap, framing is related to how people define problems, diagnose causal relationships, express moral judgments, and propose solutions in connection to an event, or in this case, facemasks (Entman, 2010). The distinctions in how people frame facemasks are found between Swedish background (a) and those with international characteristics (b and c). The distinctions were primarily centred around whether they believed people could wear masks in a way that reassured infection protection:

"I am extremely perplexed about the general effect of facemasks. It depends on the behaviour that results from the use of facemasks, so to speak. Facemasks can perhaps increase the feeling of safety there, but it's not a given that it's done in a good way, and therefore I do not see any reason to recommend people to wear it."- Hanna (a)

From sensing that masks were irrational with the potential to evoke unnecessary emotions of fear, most respondents with Swedish backgrounds (a) nowadays instead perceive facemasks as objects that might be associated with some favourable properties, despite being doubtful of their medical efficiency. In the second wave of the pandemic, the group began to seriously consider using masks, well-aware of the uncertain burden of proof:

"As the crisis returned, during the autumn, I felt really scared and uncomfortable. I had to do something about the anxiety I felt when out shopping [...] I deliberately chose to disregard the whole discussion of the effectiveness of masks and wore masks to feel secure. But I am still not sure if masks even work" – Helena (a)

The results show that the respondents with foreign background (b) emphasized the inherent potential for facemasks to enhance human agency against the pandemic:

"I think the recommendation on facemasks came way too late. I cannot understand why the government and the Public Health Agency did not decide early to act on the safe side. They could have recommended the use of facemasks in public places where it is impossible to keep distance [...] If it later turned out to be of no help at all, after studies proving that the effects are extremely small or non-existent; such a recommendation could have been removed. It might have saved lives, but we do not know that. Such an opportunity now lost." - Amir (b)

Similar arguments were found among the respondents with citizenship in other countries (c). However, their depictions of masks also included notions of social responsibility:

"To me, it is just so strange that people do not use facemasks in overcrowded places. The advantages outweigh the risks. Besides, it shows the most vulnerable a bit respect as it is a small gesture of solidarity." - Santiago (c)

The respondents with citizenship in other countries (c) did not problematize facemasks' efficiency as those of Swedish background (a). Neither did they doubt that people could manage to wear masks in a "safe" way. Instead, their framings of masks predominantly focused on notions that facemasks were protecting people from infecting each other:

"I wear the FFP mask, understanding that they protect others from me more than me from others. I also wear them to demonstrate responsible behaviour and attitude to the benefit of society." – Mila (c)

The empirical results suggest two sets of framings of facemasks: one focusing on the medical efficacy of masks and one focusing on whether facemasks might help master the crisis (Corina et al., 2016). In the first frame, the respondents with Swedish background (a) framed the issue of facemasks as something highly ambiguous. Medical efficiency was deemed an important factor in why the respondents did not propose state-advised mask-wearing regulations. At the same time, the other groups (b and c) framed that the scientific efficiency was sufficient and state intervention on the matter was desirable.

In the case of the second frame, the respondents with Swedish backgrounds (a) were dubious about people's ability to use masks safely and accurately, while the groups with international characteristics (b and c) primarily framed facemasks having favourable properties—both emotionally and medical, which enhanced people's abilities to reduce the spreading of the virus. Thus, the empirical findings show two socially constructed realities that separate the respondent groups. In other words, the groups with international characteristics (b and c) framed masks as having a positive influence on the human agency to prevent the pandemic and stressed the masks' capabilities to reduce fear.

Trust in Swedish authorities

This section analyses how the respondents have experienced the "Swedish strategy" and their anticipations towards the Swedish authorities.

The respondents with Swedish background (a) witness that they were generally satisfied with how the Swedish authorities have managed the pandemic crisis. Their testimonies witness notions clear notions of trust and underlying understandings of that this crisis was and still is challenging to prevent and manage, no matter how the authorities might have acted:

"Swedish authorities have done the best that they could, this was nothing we could have foreseen. It all turned out as it did. Politicians cannot be held responsible for it because no one was prepared for it to happen. It happened as it happened. First, it was the question of equipment, that was where we had to start. We can never be prepared for such crises. As far as facemasks, no one knows if they help, and do not and I certainly do not think that the authorities knows either."- Karin (a)

Underlying trust among the respondents with Swedish background (a) was also revealed in their high anticipations on the ability of the Swedish state to predict future scenarios. In other words, trust was also expressed by outlining how they expected that the Swedish state retrospectively could have acted:

"I feel that the PHA have consistently been bad in predicting outcomes [...] The PHA was never capable of predicting anything that might happen in the future. I would have liked to have seen more proactive measures, at least trying to prevent the damage as much as possible." – Elias (a)

In accordance with the risk-cultural dimensions of Corina et al. (2016), the respondents with Swedish background (a) expressed high confidence in how the Swedish authorities have managed the pandemic and by declaring that they were expecting that the Swedish authorities could have done more to reduce the effects of the crisis. The underlying assumption here is that the state has a central role in counteracting the crisis, which falls in line with the state-oriented risk culture (Corina et al., 2016). When the respondents (a) were asked how they evaluated the state's handling of the facemask issue, it appeared that they had high confidence in the PHA's evidence-driven mission. However, that this confidence has to some extent been damaged:

"I am mostly frustrated by PHA's inconsistency regarding facemasks. I understand it is part of their mission that all recommendations they advise should always be based on scientific evidence. If the evidence is not there, then they should not recommend facemasks. I respect that. However, now that they have recommended it, although there is still no rigorous evidence to support it, I resent that they have abandoned this basic principle." – Lovisa (a)

In summary, trust in authorities among the respondents with Swedish background (a) played out to be high, especially when it came to the perceptions of the authorities' inherent capabilities in reducing the effects of the pandemic. However, the respondents (a) witnessed an underlying awareness that pandemics are not easily manageable affairs for authorities to undertake. These notions are consistent with the state-oriented risk culture, which stresses the state's ability to prevent and respond to crises (Corina et al., 2016).

As for the respondents with foreign background (b), the empirical results show that they too had high anticipation towards the Swedish authority's preventive performative role. However, the testimonies witness widespread scepticism towards voluntary crisis advice:

"The voluntary recommendations do not work when people still do as they please. The PHA was advising people not to travel to reduce mobility. However, people were still

allowed to do as they please. Take the sports holiday, for example, where the authorities advised people not to travel, but at the same time allowed ski resorts to remain open. Are you seriously going to listen to the authorities when they say two things at the same time? Over 15% of those who visited the mountains during the sports holiday were infected. People took the infection with them. Why not close when there are so many warnings? Why not just test it and see if it has any positive effects?" - Edmon (b)

As the respondents with foreign background (b) shared similar state-oriented risk-cultural notions as those of Swedish background (a), the empirical findings suggest that their anticipations of how the authorities ought to act in a public health emergency were not met:

"The voluntariness and the way the PHA have been pretending that we can live our lives pretty much as usual, only by tweaking some small things, has been, in my opinion, distasteful. To "protect yourself, only if you want to" and to "protect those you know and love" - but then what do we do with everyone else? The ones we do not know and do not emotionally love. I believe that this voluntariness demonstrates how Sweden cannot restrict people in ways that protect the weakest members of society." - Jessica (b)

In addition, the empirical results from the respondents with foreign background (b) show there was an underlying belief that the recommendations did not sufficiently articulate the "urgency" of this crisis, which might inherently have led to turmoil among the population:

"I think we would have spared much confusion among people if we had had clear laws in place instead of recommendations. For some, the recommendations have created confusion, and some have entirely disregarded them since the advice is not legal boundaries. We would have also escaped discussions on whether the pandemic is as severe as it is, if the government dared to take a bit tougher measures [...] I do not demand that we should lock people up in their homes or shut down completely like in some other countries. I do not want an authoritarian government like China. I rather want to have leaders who are bold enough to act as authorities, that clarifies what is wrong and not." - Khadro (b)

The empirical results from the group of respondents with foreign backgrounds (b) found strong opinions on how they thought that leading politicians and civil servants have performed during the crisis. Media disclosure of political leaders and state officials violating traveling recommendations and neglecting facemasks in public transports was phrased as *naive*, *idiotic*, and *embarrassing*. The respondents with foreign background (b) explicitly phrased that those in power were unable to *practice as they preach* (b), which were also recognized as damage the trust toward the Swedish way of managing the pandemic:

"I was outraged when reading that the Director-General of the PHA violated her recommendation on face masks one day after the recommendation was put in place. It is as that they do not believe the things they preach to the public." – Loudia (b)

When evaluating the Swedish authorities' performance of facemasks, the testimonies from the respondents with foreign backgrounds (b) witnessed that they found the PHA's communication confusing. Which also led to the loss of trust. The respondents expressed that their levels of trust decreased since they perceived that: *there were such double meanings from the PHA on the issue of facemasks.*" The empirical results also witness that some suspected that the PHA's non-actions towards facemasks were inclined to underlying notions of honour:

"The World Health Organization has been advocating facemasks in places where social distance cannot be maintained for a long time. Today there is a lot more research pointing to the positive effects of facemasks in public places. I cannot discount the possibility that this was a matter of prestige for the PHA." – Said (b)

Although the respondent with foreign background (b) had a bit more critical assessments of the Swedish authorities' crisis performance, their notions are consistent with the state-oriented risk culture. Thus, they anticipated that the state should prevent and respond to the pandemic crisis (Corina et al., 2016).

Critical and negative views of the Swedish authorities' performance were also found among the respondents with citizenship in other countries (c). However, the most prominent notion among these respondents (c) was that they perceived an absence of distinct political leadership:

"Anders Tegnell, the state epidemiologist of Sweden, was portrayed as this sort of freedom fighter [...] T-shirts, posters with the message "Tegnell for president," that is just an example for, he was celebrated, and to some extent, I also think that this ridicules the pandemic. People saw him as someone who fights for people's freedom instead of somebody who ensures people's protection. That is just a sort of an example of wrong it can be when the prime minister does not take the lead. More serious discourse from the beginning to the end would probably make me feel safer here in Sweden." - Klaus (c)

The empirical results also reveal that the respondents with citizenship in other countries (c) perceived that the Swedish authorities were ambiguous in their definitions of the objectives with the Swedish way of mitigating the pandemic:

"I never heard the Swedish government say that "we are hoping that the public reaches a herd-immunity, cause maybe it works," nor did I heard them say that they were not hoping for it either. Because in Swedish media, there were always reports about the Swedish

government, never communicated directly by them, no real statements in any direction from any government official or the prime minister. So, I thought, "OK, if you are doing this, then please tell us! Please give us instructions on what regulations that are in place, and what your goals are with them, give us some figures and targets that you guys (the Swedish government) are hoping for". - Mila (c)

Compared to the respondents with Swedish citizenship (a and b), the empirical results indicate that the respondents with citizenship in other countries (c) perceived that the Swedish authorities were performed passively. The testimonies (c) witness that the perceived passiveness depleted their trust in the Swedish way of managing the crisis. Their testimonies describe that the Swedish authorities' performance was associated with the absence of *European solidarity, incapability's of performing cautiously and that the authorities deliberately sacrificed peoples' lives* (c). The most salient indication of the distrust toward the Swedish authorities was related to the so-called "herd-immunity strategy":

"From the start of the crisis, the Swedish government took the herd immunity strategy without negotiating with their citizens. I do not think that is a responsible way of managing such virus outbreaks, especially considering what risks older people must undergo. They sacrificed some people's lives and interests." Xiaopeng (c)

Perhaps it is not surprising that those with non-Swedish citizenship had lower confidence in how the Swedish state has managed the COVID-19 crisis. In Corina et al.'s (2016) framework of trust in authorities, the respondents with citizenship in other countries (c) correspond to the fatalistic risk culture. The fatalistic dimension of trust in authorities suggests that citizens share widespread distrust in the capacity of the authorities to adequately prevent and manage the crisis, which is consistent with their (c) testimonies. However, the respondents' (c) low confidence should be seen as negative evaluations of the Swedish authorities' crisis performance.

Facemasks: Accountability and Blaming

This section analyses to whom respondents attribute responsibility and blame for the issue of facemasks. In short, blaming is how people attribute responsibility to someone or explain deficits and misfortunes (Corina et., al 2016).

Among the testimonies from the respondents with Swedish background (a), the findings witness how they stress the importance of an individual's agency in preventing the pandemic. The testimonies witness that the respondents with Swedish background appreciated the "freedom

under responsibility" approach provided by the authorities and enjoyed living in a nation where the state did not employ *too* restrictive crisis regulations:

"So, what are we supposed to do about those who cannot keep their distance? If we look at how other countries have it, with curfews, compulsory laws on masks, security guards in front of stores. At least I would not have wanted that. For me, instead of strict government regulations of society, it comes down to the fact that people must get their act together to keep the infection rate low." - Maj-Britt (a)

The respondents with Swedish background also witnessed that the self-regulative survival capabilities given by the authorities was something positive and clarified that it was up to individuals to mitigate the pandemic:

"Regarding this issue of facemasks and what has been said by the Public Health Agency and Anders Tegnell, ever since the beginning, stressed that social distancing and washing your hands is the most important thing. Not facemasks. And of course, people who can work at home should do so, and that if you are symptomatic, you should also stay at home. And if people want to wear masks for various reasons, that is people's own decision to make. It is not the authorities' role nor the governments to force you to wear something that do not have scientific utility." - Kerstin (a)

The Swedish pandemic response has been characterized by self-reliance concepts such as social distancing, handwashing, and self-isolation when having symptoms. The group considered such advice to help mitigate the risks posed by the pandemic. However, the respondents with Swedish background (a) expressed that they were sceptical that the use of facemasks could increase their self-reliance capabilities:

Moreover, the testimonies from the respondents with Swedish background witness scepticism towards the capabilities of masks as enhancers mitigating the spread of the virus and protecting people from getting infected:

"We know that in those countries that have implemented employed strict facemask legislation, the infection rate is still high, indicating that facemasks do not offer the level of protection than many people hope for. I have no problem whatsoever that people choose to use masks, but I oppose those who believe it will solve this pandemic. [...] If people just learned to keep a distance, we would likely keep the transmission rates at lower levels in more extended periods. It is up to us to follow the rules." – Jesper (a)

The results show that the respondents with Swedish background (a) relied on the pandemic measures given from the Swedish PHA. Although some of the respondents (a) voluntarily chose

to wear facemasks in specific situations well before any general advice was put in place, all respondents (a) agreed that the efficiency of masks was highly uncertain. In the framework of Corina et al. (2016) and notions of previous research, the testimonies from the respondents with Swedish background (a) is consistent with individualistic risk-cultural dimensions, characterized by traits that direct accountability towards neglect and careless peers (Douglas 2003; Lupton 1999).

In the respondents with foreign background (b), there were more ambivalent attitudes towards the "freedom under responsibility" concept. On the one hand, the respondents (b) witnessed that it was reassuring not to be threatened with fines for violating restrictions. On the other hand, the respondents (b) witnessed that it was hard to accept that they lived in a country where the risks of getting infected were perceived as being more likely than in other countries. The fact that the infection might be easily transmitted in places where it was perceived as "impossible" to keep a distance was, according to the respondents (b), a shortcoming that the state was responsible for creating:

"I cannot understand the reason for not recommending facemasks in all public spaces. It is not like you spread more infection because you are wearing it. The arguments put forward by the PHA have been very *"Oh, we have no research to prove that facemasks work."* Why do all the other countries recommend facemasks if they do not work? Why has the WHO chosen to recommend facemasks? Is it because they think it is fun to do so?" – Kastriot (b)

The results show that the respondents with foreign background (b) primarily directed accountability towards the Swedish authorities for their ambivalence on the issue of facemasks. Moreover, the respondents (b) also found the authorities responsible for shaping an unpleasant and emotionally insecure environment where social distancing could not be granted:

"The problem is that we people must be accountable for ensuring that others are following the recommendations. I have personally had to tell people off for wandering into shops coughing and sneezing. People cannot be trusted to comply with the recommendations purely out of free will if they know that there are no legal consequences for breaking them."
Vlora (b)

The empirical results from the respondents with foreign backgrounds (b) show that they collectively tried to comprehend why the Swedish authorities chose to withhold mask recommendations long as they did. Moreover, their testimonies (b) witness a perceived cultural phenomenon that was observed among leading state and political figures:

"There is a mindset among politicians and leaders here in Sweden that implies that "we are the best at everything." "We do it right, and everyone else does it wrong." They think that they always do the right thing for the people, precisely because they are the most advanced people in the world. There has been such a variety of views on the effectiveness of facemasks, both in Sweden and internationally. It has resulted in a tendency to listen to the person closest to you, someone who is a Swede and who thinks in the same way as you do, i.e., Anders Tegnell. We Swedes have voluntarily chosen not to listen or to follow the way other countries have done things. We have ended up with something that has become a Swedish approach to the matter, something that stands out because somewhere along the line, we prefer standing out and demonstrate that we are a bit superior to everyone else. This is how I have perceived the Swedish approach to the issue of facemasks." - Khadro

(b)

Compared to the respondents with Swedish background (a), the respondents with foreign background directed accountability and blame towards the Swedish authorities. In the framework of Corina et al.' (2016) and notions of previous research, such attributions are related to state-oriented and hierarchical risk cultures, which perceives that the state carries responsibility and is capable of both preventing and take mitigating actions in all sorts of crises (Douglas 2003; Lupton 1999).

When analysing how and whom the respondents with citizenship in countries (c), their collective testimonies witness that they believed that the Swedish government did not take the hazards posed by the pandemic seriously enough and delegated too much autonomy to its citizens:

"The Swedish government has not been clear enough about how emergent this pandemic is. By only recommending people how to act, it gives too much power in the public choice. As seen here in Sweden, the public make wrong decisions, and I do not blame people. However, such "wrong" decisions may even extend this situation and cost many more lives and damage the economic system more than necessary. I am sure that the Swedish government has not understood the dramatic impact such Coronaviruses have." - Xiopeng

(c)

The empirical findings also show that respondents with citizenship in other countries (c) were expecting a more proactive government, especially in the initial phase of the pandemic. According to the respondents (c), the absence of an active and responsive government led to unnecessary damage, especially in terms of mortality. By comparing how other countries acted in the early phase, they were able to gain a sense of reality surrounding the situation in Sweden:

"It was as if no one understood the seriousness of the situation. During the spring, nobody was keeping their distance. I felt that the government was absent and was unwilling to push any information about how people were supposed to behave. If I compare it to other countries, which daily pushed for distancing and facemasks and hand washing, I felt that there was some delay here in Sweden, as if they were hiding something, which caused a mistrust against the Swedish government." – Mila (c)

The testimonies from the respondents with citizenship in countries (c) witness that the Swedish government did not perform as they anticipated. When it comes to accountability concerning facemasks, blame for this was directed towards the Swedish authorities. This time referring to what they perceive as clear-cut evidence showing that facemasks do have utility in public spaces:

"In Sweden, I have felt uncomfortable in public situations because through the pandemic, especially after the summer, people have not worn masks and that. The data was clear by then, yet people here in Sweden did not use them, and that is when I felt unsafe and let down by the Swedish government. I have not felt safe in public spaces when it comes to safety restrictions, and yeah, because, here in Sweden, you have had freedom under responsibility. However, I think it would have been safer, especially felt safer, if there were clear guidelines for the usage of masks. Especially when many scientific papers have proven them to work in mass places." - Santiago (c)

Among respondents with citizenship in other countries (c), the empirical results show that the Swedish authorities were considered responsible for preventing risks in the pandemic and responsible for managing the crisis itself. Like other groups, their risk cultural norms concerning blaming are consistent with a state-oriented risk culture (Corina et al., 2016). However, compared to the other groups, their attribution of accountability was directed towards the Swedish government, indicating there were underlying expectations of a more proactive and crisis-engaged governing political authority. Thus, these results shed light on an additional element that might lack in Corina et al.'s (2016) risk-cultural typology. The following section analyses the results from the risk cultural norms and values across all groups.

Analysis of risk-cultural values

How can the empirical results then be understood in the light of previous research on risk cultures? A dominant feature underlying all respondents' testimonies was the perception of the pandemic as "man-made". All respondents consciously or unconsciously implied that humans' errors were involved in creating the crisis (Beck, 2005). However, the differences between the

respondents became visible when discussing the perceived likelihood that facemasks ought to have medical efficiency and whether they might help mitigate the virus spread. Studies from the United States have found distinct differences in the perceived likelihood that dangers and disasters may occur among different ethnic groups (Maldonado et al., 2016). Studies have revealed that Americans with origins in other countries were more likely to believe that hazards would occur, and affect compared to native-born counterparts. Similar empirical logic is found in this present thesis. There were distinguished differences in the perceived likelihood of whether the respondents believed that facemask might have more or less favourable effects on the virus spreading. As mentioned earlier, the respondents with Swedish background (a) had sceptical attitudes towards the medical efficiency of facemasks, as they perceived that it was not given that masks would be worn in a non-risky way. In comparison, other groups (b and c) believed that facemasks were a legitimate preventive pandemic measure. Both could serve as a protector of themselves and as measures to protect others from the asymptomatic transmission of the virus.

When relating the results to the previous research on risk cultures, similarities between the respondents with Swedish background (a) and Egalitarian risk cultures becomes apparent. Like In the framework of Egalitarian cultures, the respondents with Swedish background (a) strongly identified themselves with social norms established within the tribe. Norms, in this case, were established and maintained by both Swedish authorities and by peers related to the respondents' inner circles. In accordance with Egalitarian cultures, the respondents with Swedish background (a) were sceptical towards external norms (Lash, 2005). The external norms, in this case, involved the perceptions of how other nations and cultures managed the pandemic, who also supported mask-wearing practices. Following Egalitarian cultures, the respondents with Swedish background (a) considered that the state ought to act in a way that promoted the common good, which in their view implying that the state should be careful with interfering with civil liberties and people's agency to act. In the framework of previous research, the other respondents (b and c) expressed anticipations following Hierarchical risk cultures (Tulloch and Lupton, 2003). The respondents (b and c) testimonies witness that they anticipated that politicians, not public authorities, should act and serve as authorities when crises occur. The hierarchical notions were also expressed by their anticipation of a more vigorous and intervening state, which they believed was desirable to accurately prevent the deadly outcomes of the pandemic and ensure that every citizen complied with the crisis measures given.

Based on the empirical findings on the risk-cultural norms and values related to facemasks found in the three different ethnic and citizenry backgrounds, the empirical results show that they are associated with two-risk cultural segments. One of them is directly associated with Corina et al.'s (2016) typology, while the other represents a convergence of two separate categories. The first risk culture obtained, which is especially prominent among the respondents with foreign backgrounds and citizenship in other countries (b and c), was the state-oriented one. These respondents trusted, or more accurately, anticipated that the Swedish authorities could mitigate the pandemic. For the respondents with foreign background (b) and citizenship in other countries (c), facemasks were considered essential preventive property. Before the crisis struck, both respondent groups trusted the Swedish authority's crisis abilities. In retrospect, the respondents in (b and c) anticipated that the Swedish state could have been more active in mitigating the pandemic. Among the respondents (b and c), individual responsibility was perceived as secondary, where the primary responsibility was directed toward the Swedish authorities for not acting more decisively. Finally, they also expressed widespread scepticism towards the voluntary recommendations since they thought other citizens were reluctant to comply with such non-legislative procedures.

The second risk culture, most prominent among Swedish background (a), is characterized as a convergence of the state-oriented and the individualistic risk culture. Respondents with Swedish backgrounds (a) were also characterized by clear notions that anticipated that the Swedish authorities had some capability to mitigate the pandemic. They also expressed high media trust and a willingness to comply with the PHA's advice. However, what separated this group from the other respondents was their individualistic norms and values, expressed by their notions of accountability directed towards individual citizens, which they thought were responsible for mitigating the virus spread. The group had strong notions that stressed the individual's responsibility to prevent the crisis and take care of oneself, which was also expressed when it came to masks. According to the respondents (a), the PHA and the government essentially served as a communication channel, which provided them with information on how they could adopt (or not adopt) survival instructions. Ultimately, facemasks were considered an individual matter, which is best decided by individual citizens, not a matter for the state to regulate. Their individualistic values were also made apparent in terms of their views on the Swedish strategy. The respondents' testimonies witness reliance in the notion of "freedom under responsibility" approach while expressing scepticism towards more restrictive

and regulative pandemic measures. To summarize the two risk-cultural segments found in this present thesis: the respondents with Swedish background (a) emphasized strong individualistic notions, focusing on individuals' responsibilities and obligations, while at the same time expressing more purely state-oriented expectations towards the state. In other words, there were underlying notions that expressed the state as having some boundaries, which could not be imposed on without the support of the population. The respondents with Swedish background (a) followed individualistic and egalitarian values (Corina et al., 2016; Lash, 2005). While the other respondents (b and c) instead emphasized more procedural hierarchical expectations and prosocial values (Dyrhust et al., 2020; Douglas & Wildarsky, 1982). Since we can find norms and values in both the state-oriented and the individualistic risk cultures, the respondents with Swedish backgrounds (a) should be positioned somewhere in between. In other words, the respondents with Swedish backgrounds were characterized by a state-individualist risk culture.

6. Discussion and conclusion

This chapter summarizes this thesis's key empirical findings. After that, the conclusion of this present study and the research contributions, limitations, and directions for future research will be presented and discussed. The main results of this present thesis found that personal practices of wearing (or not wearing) facemasks are influenced by (1) the initial responses of the respondents first noticing's of facemasks in "in the outside world," (2) the extent to which the respondents relied on information on masks provided from public authorities, (3) meaning-making outcomes of public spaces, and on perceived notions of social responsibilities and, and peer pressure, and (4) different kinds of risk-cultural norm and values.

6.1 Summary of Empirical results

First noticing and initial reactions to the appearance of facemasks (Q1)

The first empirical question analysed how people initially reacted to the occurrence of facemasks in Sweden. Most respondents first noticed facemasks in news coverage of the unfolding situation in Wuhan and subsequently on public transportation and at outdoor public environments. Based on the respondent's initial noting of facemasks, most respondents perceived the object as somewhat remote in "the outside world." Previous research has shown that positive emotions and negative emotions can inhibit people from bracketing contradictory information cues until it is too late (Maitlis & Sonenheim, 2010; Kayes, 2004). The finding of this present thesis suggests that those who had adverse emotional outcomes on their first sight facemasks were also the respondents who were less prone to support general facemask recommendations. Such reactions were especially salient among the respondents with Swedish background (a) who expressed that mask-wearing initially was perceived as an overreaction and a ridiculous kind of behaviour. The respondents with other foreign backgrounds and citizenship in other countries (b and c) initially also found masks as remote objects in public settings. However, the findings suggest that those respondents had a more favourable initial Meaning-making process associated with an underlying recognition of other peers' risk perceptions. In the meaning-making framework, these findings suggest various kinds of initial negotiations of masks, which were related to the respondent's ethnic and citizenry backgrounds with more or less positive emotional culminations. A positive outcome is not necessarily a "correct" outcome. In line with Maitlis and Sonenheim (2010), the empirical findings showed

that those who first reacted less hostile, stating that masks could help prevent the pandemic, were also prone to favour facemasks recommendations.

Moreover, the empirical findings suggest that people's underlying cultural backgrounds played a key role in people's initial meaning-making processes. Some interpreted masks as a disputable object, while others perceived the object as an applicable measure to prevent the incoming hazard. Ultimately, people's initial reactions were not merely shaped in a cultural vacuum but also by the information efforts on masks from different public health institutions (Weber & Glyn, 2006). As institutions worldwide have stressed the importance of masks in different ways, it also seems to have affected the respondents' Sensemaking of the object here in Sweden. The respondents with citizenship in other countries (c) witnessed that the early communicative efforts from their culturally close institutions influenced their sensemaking processes (c). In contrast, those with Swedish citizenship (a and b) were not encountered by any communication efforts explicitly proposing them to engage in facemasks wearing. In other words, institutions' information efforts regarding facemasks influenced peoples' first reactions to masks in the "outside world."

Media diets and factors determining people's information evaluations (Q2)

The second empirical question analysed how the respondents used media to seek information on facemasks and what influenced their evaluations of the information found. The empirical results showed that all respondents, regardless of their origin, made sense of the plausibility of whether facemasks could function as a legitimate preventive pandemic measure. Previous research shows that the main feature of crises is the emergence of multiple narratives, which may deplete audiences' capabilities to interpret information (Weick, 2020). The empirical results showed that all respondents experienced that they encountered diverse and often controversial media narratives about the advantages and the disadvantages of facemasks. Depending on their ethnic background and citizenship, the respondents made sense of such narratives in different kinds of ways. Despite experiencing an extensive media debate about the efficacy of facemasks, the respondents with Swedish background (a) relied on the PHA's information about facemasks, were they unconsciously or consciously chose not to consume information other than published by Swedish sources. While the respondents with foreign background (b) found it more challenging to accept the non-recommendation and had difficulties comprehending why the PHA did not advice facemasks in public spaces. By

complementing the news media from sources other than Swedish, it was possible to the respondent's foreign background (b) to acquire information presented in a journalistic manner that was different from that which was standard Swedish narratives (Eriksson, 2018; Ratzan, 2014). Such information behaviours also made it possible to actively decide whether to use masks or not. Respondents with citizenship in other countries (c) made sense of two nations' approaches towards facemasks simultaneously. The empirical results showed that these respondents (c) had different coping approaches with mixed widely mixed narratives on facemasks. Some respondents (c) entirely trusted information provided by the authorities and media from their home countries. The notion here was to trust that was most culturally close. In other cases, the respondents with citizenship in other countries (c) complemented information from both Sweden and their home countries by interacting with relatives and friends who gave their views on the issue. Despite such interpersonal communicative exchanges, the results showed that the respondents (c) actively searched for scientific articles to either disprove or prove the utility of masks. Once they made up their minds, they could settle on a personal course of mask-wearing in Sweden. Moreover, the results showed that the respondents with foreign backgrounds (b) and those with other citizenship (c) had media diets characterized by a multivocal rhetorical area composed of various sources and voices (Rodin, 2018). In comparison, the media diets among the respondents with Swedish backgrounds (a) were narrowed to one nation's media system.

Both Sensemaking theory and the empirical evidence from this present thesis suggest that meaning-making processes are entailed with identity issues, especially during moments of uncertainty and change (Maitlis & Sonenhein, 2010). This became apparent when comparing how the different groups were searching for information. However, the result also provided answers on why they have reached their conclusions. In this case, reliance upon media outlets and the information they are personally and culturally closely attached to be the determining factor. For the respondents with foreign background (b), identity also appears to play a role. Trust in what was closest to them, i.e., Swedish information was evident. However, their information seeking was influenced by an individual attempt to understand why Sweden, their home country, had a different position on the issue of facemasks. Such information needs were not at all salient among the respondents with Swedish background (a). Previous research shows that audiences make conscious efforts to find answers by consulting regular media choices for information seeking, where a subconscious evaluation of media credibility and accessibility

occurs (Vigsø & Odén, 2016). This was also true for the responders in this thesis. The respondents complemented their usual media diets with other sources, even scientific journals, to comprehend the facemasks' medical efficiency. In other words, trust and credibility played out in different ways.

Situational perceptions, Institutional Sensemaking, and Social Pressures (Q3)

The third empirical question analysed how other motivations than first reactions and media habits potentially shaped the respondents' meaning-making process of facemasks. Sensemaking is generally described as a process through which aggravating and uncertain events are interpreted for meaning and understanding through a dynamic process directed by societal cues enacted by the environment (Choo, 2007; Maitlis & Christiansson, 2014; Maitlis & Sonenshein, 2010; Weick, 1995). Based on this framework, the respondents' experienced and perceived that some areas were more crowded and riskier than others. However, the results showed that all respondents believed that mask-wearing might be legitimate at some places and in some situations. For example, whether or not people used masks, facemasks were considered helpful in public transports, travel terminals, shopping centres, and grocery stores.

This present thesis also found that respondents who, for various reasons, were incapable of avoiding "risky environments" in their daily lives used masks well before the PHA's recommendation on mask-wearing in public transports in 2021 was put in place. The underlying psychological defence mechanisms for people's use of masks were based on an intuitive belief that facemasks might keep them safe from other people's disobedience. Others wore masks to enhance a personal sense of security. While some respondents merely used masks with anti-social motives. Previous studies have found that people tend to construct psychological defense mechanisms to manifest and cope with crises (Mikkelsen et al., 2020), which also holds for how people made sense of facemasks. Based on the cues generated by the actions of other strangers in public spaces, all respondents ultimately sensed that masks served as a complement when social distancing could not be maintained. Such findings correspond with previous research that suggests that people act their way into knowing (Vigsø & Odén, 2016; Rerup, 2009).

In the testimonies, an underlying discrepancy surfaced as to whether the facemasks were meant to protect themselves from infection or protect others from becoming infected. Despite this purposive discrepancy, the results showed that this was not necessarily contradictory. Some respondents wore masks as an act of social responsibility, which was thought to protect them from becoming infected and avoid asymptotically spreading the infection to their partners or close relatives. Furthermore, the results show that there were purely social-psychological motives for wearing (or not wearing) masks (Barton & Kahn, 2019). Some respondents with foreign backgrounds (b) perceived an unspoken social pressure to wear masks in our living area. Respondents with citizenship in other countries (c) wore facemasks to implement a crisis strategy that was in place in their home country, while at the same time compromising with some aspects of their home country's strategy to fit in with Swedish culture. Other respondents with citizenship in other countries (c) stated that they wore facemasks because they have previously been wearing masks in similar crises. Finally, some respondents described avoiding wearing masks because they did not want to transgress with perceived non-face-mask-norms in encounters with non-mask wearers.

The results from empirical question three, in summary, showed that the behavior of others, regardless of one was a mask wearer or not, were described as motivated by notions of social responsibility, highlighting the role of peers in shaping meaning and subsequently one's actions. Although all respondents live in the same city, there were different perceived mask-wearing norms. For example, the respondents with Swedish background (a) were reluctant to violate the codes on masks established by the PHA. In contrast, the other groups (b and c) were more willing to act in accordance with social codes influenced by other institutions' way of viewing masks (Weber & Glyn, 2006).

State – and individualistic Oriented Risk Cultural Norms and Values (Q4):

The fourth empirical question analysed the risk-cultural norms and values that reflected the respondents' backgrounds and/or citizenship. The empirical results indicated that the respondents with foreign and citizenship in other countries (b and c) considered it legitimate for the state to "do more" to prevent the spread of infection, even if such measures restricted citizens' freedom of movement. The respondents, both with foreign backgrounds and other citizenship (b and c), were keener to argue that the Swedish state could have "done more" to

protect its citizens. They also anticipated that the state could have acted more decisively to reassure safety among its citizens. Against previous research on risk cultures, such norms and values are characterized by procedural and hierarchical cultures (Douglas & Wildarsky, 1982). Such cultures believe that the state can and should do its utmost to prevent crises and actively, through their institutional means, nurture their citizens and create group norms to *ensure* the safety of the most vulnerable citizens (Lash, 2005). The results showed an underlying notion of individualism among the respondents with Swedish background (a), which is in accordance with egalitarian risk cultures. Like egalitarian cultures, the respondents with Swedish background (a) were sceptical of state interventions, supported norms shaped within their assemblage, and were doubtful of external cultural interruptions (Douglas, 2003). In other words, the respondents with Swedish background (a) were pleased that the Swedish authorities had not executed more strict procedures (e.g., lockdowns or compulsory masks advice). The testimonies from the respondents with Swedish background (a) witnessed strong support from the Swedish authorities' "freedom under responsibility" approach and remained critical towards other nations' management of the pandemic. In contrast, the other groups were considerably more sceptical towards the freedom guaranteed by the Swedish authorities.

Worth mentioning is that the absence of more widespread fatalistic risk cultural norms and values is likely to be caused due to this present thesis strategic sample. Logically, given the diversity of the Swedish populations, such perceptions might be present among the Swedish population. Based on the previous research on risk cultures and Corina et al.'s (2016) typology, the empirical material distinguished two main risk cultural segments. The first risk culture was characterized by high reliance upon authorities and the media, which believed that the state should take (and have taken) a proactive role in preventing the pandemic. However, this culture was critical of extensive restrictions limiting people's freedoms and attributed responsibility towards individual public members to comply with the survival information provided by the PHA. Also, facemasks were perceived as a private matter. The authorities were not seen as a legitimate actor to interfere in, as the efficiency of masks was not considered stringent enough. The second culture also expresses high trust in authorities and media; however, their anticipations of how the authorities should have acted were significantly different compared to the first culture. This culture anticipated authorities to play an active and ongoing role and restrict people's lives for the common good.

Moreover, the cultural norms and values expressed that the non-compulsory recommendations were seen as threatening since people were perceived as imperfect and reluctant to comply with such regulations. Facemasks were not seen as a private matter, rather seen as a device that increased human agency against the pandemic. The dividing line between the two risk cultures, i.e., the "*state-individualistic*" and the state-oriented risk culture, is principally placed in views of the main functions of the state. The state-individualistic risk culture argues that the state is responsible for leading crises but simultaneously maintain/guarantee individual rights and freedoms. The state-oriented risk culture demands that the state, by almost all means, protects its citizens from facing risks, although it may involve certain limitations of individual freedoms and rights. These empirical findings raise questions as to whether Sweden theoretically belongs to the state-oriented risk culture classification, an issue which future research should address more deeply.

6.2 Conclusions

This present thesis demonstrates that trust was an essential determinant of how the crisis information on facemasks was interpreted. The first conclusion of this thesis is that trust in authorities during crises is associated with anticipations of how authorities should act when crises strike. In other words, people may have high levels of trust in authorities while experiencing that the authorities do not correspond to one's risk-cultural norms and values. This thesis shows that depending on the respondents' ethnic backgrounds and citizenship, people have different perceptions and beliefs on how authorities ought to act concerning facemasks. The second conclusion of this present thesis is that the news media play a central role in people's meaning-processes of crises. At the same time, this thesis shows that one cannot underestimate people's social contexts. This present thesis reveals that people's social context is crucial when making sense of crisis information and crisis news. The same pieces of information were understood and evaluated in different kinds of ways. In this sense, the present thesis found that risk-cultural norms and values were important in how messages on masks were subsequently evaluated. The third conclusion is that the Swedish risk culture, regardless of whether it is categorized as state-oriented or state-individualistic, is unique in several dimensions. This mixture of perceived anticipations might, in the eyes of other cultural horizons, appear exceptional. It is perhaps, after all, not so surprising that the "Swedish strategy" has been given much attention in international media. The fourth conclusion is that people's decision to wear

facemask is mediated by standpoints on efficacy, based on scientific knowledge and/or risk-cultural norms and experiences. The last and fifth conclusion is: given the widespread support among the respondents with Swedish background (a) for the "freedom under responsibility" strategy; it is reasonable to assume that most of the Swedish population would comply if the Swedish PHA would have recommended facemask earlier stages of the pandemic. According to the respondents' testimonies, facemasks did have more properties than purely medical and were considered helpful in more places than just on public transports. Many mask-wearers wore them both to protect themselves and others. Masks were also worn to enhance emotions of security. After all, the emotional advantages of masks were an essential motive to why people wore them - an aspect that the Swedish PHA seems to have ignored entirely.

6.3 Contributions, limitations, and directions for future research

Contributions

This present thesis has gone beyond previous research in several ways. First, it has shed new light on the sensemaking perspective by studying people's media use to make meaning on a specific object and by relating people's own media behaviours with their social experiences and backgrounds. By applying such an approach during an ongoing crisis, this present thesis provides insights into how meaning-making in moments of crises is more than just an evolutionary process. Second, this present thesis confirms that institutional trust among respondents with Swedish background (a) and foreign background (b) was high, but that the groups had different anticipations of the Swedish authorities. In other words, there is reason to be cautious in taking such high confidence levels for granted. In the future, Swedish crisis authorities should therefore deepen their understanding about how the population has experienced the COVID-19 pandemic - intending to expand the confidence levels across all the country's constituencies. Third, by strategically considering the ethnic and citizenry background, this present thesis allowed analyses of risk-cultural norms and values in a slightly unorthodox way. Concretely put, this thesis serves as an example of how future risk and crisis communication studies could be designed in the future.

Limitations

First, one might be critical of some of the previous research referred to in this present thesis. Sensemaking research has studied all kinds of crises, both from the public and organizational

standpoints. Common to the previous research is that it has, compared to this crisis, been studying considerably smaller crisis cycles, which do not tend to focus on an object in a larger crisis context as this present thesis has done. However, despite these differences from a purely contextual perspective, this present thesis shows that the previous insights and Sensemaking logics, cultural norms, and values consistently hold in a crisis context like no other in the contemporary era. Second, this thesis also fails to account for people's partisanship, which may affect how they evaluate the Swedish government's performance among those with backgrounds in Sweden. As the thesis cannot rule out such affiliations, the possibility of underlying partisan bias in respondents' evaluations of the Swedish government's handling of the pandemic might be existing. However, one group of respondents was affiliated with the Liberal Party, which may have contributed to them not being as "regime-critical" as other political party affiliations might imply. However, respondents have sought to remain as objective as possible, putting their political views aside as best they could, which was a prerequisite for participating in the study.

Directions for future research

First, risk-cultural analyses deriving from non-random samples based on individuals' origins will potentially miss a range of social factors that have led to people's risk cultural norms and values. For future studies applying such theoretical frameworks, it would be beneficial to analyse risk-cultural norms and values in different ethnic groups living in Sweden. Such studies will allow Swedish crisis authorities and other public institutions to understand better what anticipations such communities have towards the state and what risk perceptions risk different communities have. With such insights, future crisis information efforts could target specific ethnic groups with information that resemble theirs risk-cultural norms and values, or in the best case, can provide minority groups with information on why the "Swedish culture" manages crisis as they do. In other words, such research may also be relevant in terms of integrating minorities to the majority society. Second, as news media have been crucial actor in this crisis, they have had to perform in a complex epidemiological scientific context, an area that some journalist might have found challenging. The testimonies from the Swedish-speaking (a and b) indicate that people experienced that the media reporting of facemasks in autumn 2020 was confusing and sometimes contradictory. Future studies should empirically investigate to what extent and how news media framed the issue of facemasks to determine whether the respondents' media impression was consistent and with their perceptions of confusing media

discourse. Third, since this thesis did not intend to generalize on age, it is nevertheless relevant. Future studies should explore how different age groups have negotiated the phenomenon of facemasks, partly to understand how different 'risk groups' have viewed masks as a protective action or not and address which age groups wore masks during the crisis. Such insights may be crucial for future pandemics.

By gaining insights from those most vulnerable in this crisis, future pandemic responses can be better equipped to address any shortcomings these groups might have encountered. Fourth, future research should consider whether mask-wearing will become a socially accepted practice even after the pandemic. If so, future research should bear in mind how to distribute information to guide people in wearing them sufficiently, even outside hospital settings. Finally, this thesis concluded that the Swedish authorities' crisis information on facemasks were perceived and negotiated differently through the respondents. Although the crisis is coming to an end with vaccination efforts, recent data show an under-representation of vaccinated foreign-born Swedes. Therefore, it is timely to investigate how different groups in Sweden have perceived information efforts on vaccination (in terms of, e.g., availability and guidance on the web). Here, experimental research design testing senders' information messages, using written and audio-visual material (associated with, f.x., socio-cultural conventions, and in different languages) testing it through, for instance, social network sites. Such studies would help better understand the effectiveness of informational messages and how receivers process information and identify if people would change their behaviours or follow the given messages communicated.

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Appendix 1. Request Sheet

Facemask or not?

The features of risks, and medical utilities of facemasks in public spaces have been an ongoing debate for almost a year. Epidemiologists, opinion-formers, and politicians have argued in various contexts for the positive and negative assets that facemasks offer.

The research project explores how people evaluate and negotiate the presence of facemasks in their everyday lives. Concretely, the study explores how people have used different news media to inform themselves on the phenomena and evaluate the information they find.

Focus groups of 6-8 people are applied as a research method. The discussions will revolve around risk cultural norms and values that people collectively share and how it potentially shaped individuals' experiences and negotiations about facemasks in everyday situations.

I am looking for you who want to discuss and share their experiences of the pandemic situation in Sweden and feel compelled to elaborate their thoughts and opinions with others. The discussion is expected to last for about 60 minutes and is organized through the program Zoom. No special preparation is required to participate.

It is okay to participate anonymously. If you want to be anonymous, none other than the researcher will then be aware of who said what in each group. The study follows research ethics guidelines, which means that participation is voluntary, and that the information is treated confidentially.

Hopefully, you find this interesting, and I am very grateful if you want to participate!

Tim Arasimowicz

Master's student, Political communication

The Department of Journalism, Communication and Media

Gothenburg's University

gusarati@student.gu.se

+4600191417

Appendix 2. Information Sheet

2021-03-16, starting: 17:30.

Facemasks or not? - Focus group interview

The purpose of the focus group is to create and encourage a productive in-depth discussion (hopefully entertaining too!) about how you, together with others, have experienced the phenomena of facemasks amid the COVID-19 pandemic.

The first part of the interview revolves around your information-seeking/exposing habits throughout the pandemic. The second part of the discussion revolves around your everyday experiences relating to facemasks and risks. The last part revolves around your personal opinions and confidence in the Swedish institution's management of the crisis in general, and specifically focusing on facemasks.

Before tomorrow's meeting, please take a glance at the following question:

- Think of a word or formulate a shorter sentence that best describes how you have experienced the COVID-19 pandemic. *How would you describe your experience?*

The question works as an introduction to the discussion and sets the tone for the rest of the interview. There are no right or wrong answers; you do not necessarily have to consume Swedish news media to contribute to the discussion. It's your opinions and reflections that are the center of attention.

The discussion will approximately last for 60 minutes and is arranged through Zoom. If you have access to a computer, please use it!

Practical instructions will be specified when we meet tomorrow. I appreciate it if you can log in five minutes before the scheduled time!

Thank you for participating,

Tim

Appendix 3. Interview guide

STARTING POINT AND INTRODUCTIVE QUESTION:

Think of a word or formulate a shorter sentence that best describes how you have experienced the COVID-19 pandemic. How would you describe your experience?

Control questions:

- Do you mean that "_____”?
- Have I understood you correctly if you mean “_____”?

RQ1 & RQ2: What were the three groups' initial reactions to the presence of facemasks? & How did the three groups use media to seek information on facemasks, and what factors influenced their evaluations of the information found?

1. If you think back to the first occasion where you noticed facemasks in context of this pandemic – can you remember where it was? What were your thoughts about facemasks back then?
2. Have you actively searched for information about facemasks? Or have you received information about facemasks without searching for it? Please explain how your information habits have generally been.
3. Concerning facemask, what kind of information have reached you? Or have you gained knowledge in other ways?
4. From which country or countries does such information / news come from?
5. In what ways have you updated or reshaped your understanding of facemasks over time? What purposes have such practices had?
6. How have you sorted and or prioritized information about facemasks throughout the crisis? What purposes have your prioritized information had?

7. Have there been specific points in time where you have chosen to expose yourself to new content about facemasks? If so, what purposes have it had?
8. What kind of information or signs depletes/strengthens your beliefs about face masks? Where and how do you notice such information or signs?
9. What kind of information on facemasks have you purposefully avoided? What purposes has it had?

RQ3: How did the three groups use media to seek information on facemasks, and what factors influenced their evaluations of the information found?

10. What made you decide to wear or not to wear facemasks? Can you explain how such decisions have been processed and give examples of such situations?
11. In what ways do you feel that face masks have changed your everyday lives? What kind of emotions or situations have facemasks changed?
12. How do you motivate these changes in your everyday lives? What kind of practices related to facemask have you established?
13. In what kind of situations do you use or avoid using facemasks? What kind of emotions does such a situation evoke?
14. What effects do you believe that facemasks have in terms of preventing the virus from spreading? How have you come to these conclusions?
15. In what ways have other people's behaviors, such as your friends' or family's behaviors or people you see outside, affected your actions relating to facemasks? Have discussions with people in your social (physical) network affected your facemask practices?

16. In general, how has it felt being outside publicly here in Sweden? For instance, when you have met others in malls or grocery stores? Try to compare the feeling to how it felt at the beginning of the crisis. Or how it felt during the summer of 2020? Have these feelings changed?
17. Imagine meeting or crossing someone wearing a facemask downtown in a crowded area; how do you think such behaviors from others affect how you trust such a person? Trust in the sense that you trust/believe that the “other” is healthy or not.
18. If we imagine the opposite then, meeting or crossing someone wearing a facemask out in the park or walking in a forest, how do you think such behavior affects how you trust such a person? 19. Are there any situations that feel safer when wearing facemasks? Or are there situations that feel more insecure without the presence of facemasks?
19. Are there any situations that feel safer when wearing facemasks? Or are there situations that feel more insecure without the presence of facemasks?

RQ4: What kind of risk cultural norms and values was found in the three groups?

20. If you compare, do you perceive that some news outlets or information platforms have had better reporting on the crisis in general and about facemasks in particular? If so, why?
21. In what ways have you used social media sites to gather information about facemasks? How have you followed discussions about facemasks on social media platforms? Have you been actively engaged in conversations about facemask via SNS?
22. How have your parents and your relatives perceived facemasks? How has the discussion with them been? What pros and cons have been featured in discussions with them?
23. What are your opinions about the Swedish Public Health Agencies and other authorities’ approach towards facemasks?

24. What are your opinions on other aspects of Sweden's managing of the crisis, such as Social distancing? Handwashing? Restaurant restrictions? Limits in private gatherings? Limitations of cultural and public gatherings? In what ways do you think that other methods of approaching facemasks could have had changed the pandemic situation in Sweden? Or do you think that the way that the PHA and other authorities have dealt with the issue sufficiently?
25. Why do you think that the Swedish authorities have applied this approach? If you had the power to change any aspect of the "Swedish strategy," what would it be? What kind of outcomes do you think it would have? (Blaming/Disaster framing)
26. Do you perceive that other countries' public health authorities have approached facemasks differently? Or do you sense that the Swedish authorities have acted similarly?
27. In what ways do you think other countries' authorities have acted differently? (Trust)
How have you come to terms with this?

Appendix 4: Focus group respondents

Focus group	Origin	Citizenship	Name	Age	
a	Sweden	Swedish	Karin	28	
	Sweden	Swedish	Jesper	27	
	Sweden	Swedish	Hanna	23	
	Sweden	Swedish	Elias	24	
	Sweden	Swedish	Lovisa	25	
	Sweden	Swedish	Anderas	31	
	Sweden	Swedish	Vibeke	81	
	Sweden	Swedish	Helena	78	
	Sweden	Swedish	Wanda	80	
	Sweden	Swedish	Monica	84	
	Sweden	Swedish	Maj-Britt	84	
	Sweden	Swedish	Kerstin	81	
	b	Iran	Swedish	Nima	25
		Vietnam	Swedish	Jessica	27
Albania		Swedish	Vlora	26	
Iran		Swedish	Sara	27	
Iraq		Swedish	Said	32	
Syria		Swedish	Belit	28	
Eritrea		Swedish	Kafiyo	45	
Czech republic/ Azerbaijan		Swedish	Bashar	51	
Kosovo		Swedish	Kastriot	40	
Somalia		Swedish	Khadro	34	
Iraq		Swedish	Amir	38	
Serbia		Swedish	Loudia	43	
c		Germany	German	Mila	24
	Germany	German	Klaus	25	
	Spain	Spanish	Santiago	27	
	China	Chinese	Xiaopeng	34	
	Guatemala	Guatemalan	Joaquín	26	

