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Covid-19

An Overview of the EU Communication Campaign

Abstract

The outbreak of Covid-19 pandemic triggered European countries' response at the beginning of 2020. The global crisis was managed through different emergency measures, and in so many ways that the EU, as a supranational political body, did not follow a common approach when dealing with member states. What was the role played by the EU during the pandemic crisis? And how did the EU institutions try to legitimate their action? The aim of this paper is to answer these questions through an interdisciplinary investigation on the EU communication campaign on Corona virus targeted to European citizens, in order to unveil the ideological frames behind European actions. Results show that EU discourse on the Covid-19 crisis reveals the interests and the goals of a global business player, rather than an independent political actor.

Keywords: Covid, EU, discourse, law, legitimation

1. Introduction¹

The first issue that emerges as one tries to investigate the way in which the EU managed the Covid crisis and interacted with EU citizens is the contrast between a supranational body and the national response that the management of the crisis immediately brought about.

The outbreak of Covid-19 pandemic triggered European countries' response at the beginning of 2020. News coming from China, along with WHO warnings about a potential global risk drove Italy to declare the state of emergency. Other EU countries followed, and the first cases and deaths forced governments to adopt strict measures of health protection. Italy was one of the first EU country to impose a national lockdown on its citizens. Citizens were not allowed to gather anywhere, as schools, shops, restaurants and other meeting points were forced to shut down without any information about the duration of this condition. Meanwhile, private and public research centres started intensive medical trials to develop suitable vaccines

¹ Although the entire article is the result of common work, Paolo Donadio takes responsibility for Sections 1, 3 and 4; Germana D'Acquisto for Section 2.

against the Covid-19 virus pandemic, which was spread all over the world by the end of 2020. Eventually, one year and a half after the viral outbreak, some major pharma companies such as Pfizer, Astra Zeneca, and Johnson and Johnson started the production of the vaccines that were later purchased and marketed all over the world.

However, the global crisis triggered by Covid-19 was politically nationalised through country-specific normative procedures, and in so many ways that it is quite hard to find an interpretative key to understand the role played by the EU as a supranational political body. Indeed, the EU took the stage a long time after national governments started protecting their own citizens. What was the role played by the EU during the pandemic crisis? How did the EU institutions try to legitimate their action? How was legitimation represented through discourse?

The aim of this paper, therefore, is to answer these questions through an investigation on the EU communication campaign on Corona virus targeted to European citizens, by adopting an interdisciplinary perspective. From a methodological-theoretical point of view, by discourse we mean to refer to the kind of linguistic conventions associated with a particular kind of social order—e.g., the teacher-student relationship or police investigation procedures. ‘Social order’ represents the space conventionally structured into distinct spheres of action and situations within a society and by different institutions, within which actors have different power, their own roles and tasks (Fairclough 1989). Discourse order concerns the linguistic codification of such differential and hierarchical structuring of social spaces, with its principles of exclusion from speech, rarefaction of speech and access to speech (Foucault 1971).

Our aim is to provide a discursive investigation on the EU communication campaign on Coronavirus and the management of the global crisis, in order to reveal the type of legitimation that was claimed by European institutions to justify their action. The object of our investigation and analysis will be the multilingual EU portal called “EU common response to Coronavirus,”² in which the EU displays a quite wide range of communication devices to ensure that proper information about the crisis is conveyed to citizens through the web and social media.

The theoretical framework is based on a broad corpus-assisted CDA approach (Hart 2011). Qualitative analysis will focus on the textual dimension in connection to the legitimation frames developed through discourse and analysed by Wodak (2021). Results show that EU discourse on the Covid-19 crisis reveals the interests and actions of a global economic player

² https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response_en. Last visited 10/05/2024.

working on behalf of its member states, rather than an independent political actor. In critical terms (Fairclough 1995), the EU constructs its own institutional identity through corporate discourse, which stands out as the dominant order (Foucault 1971) in our corpus.

As a whole, this paper is structured in a first part providing a contextual framework. After outlining some features of our corpus, we will concentrate our attention on legitimation as discourse and the “voices” that the EU adopted to interact with its citizens. The final remarks summarise the main points of the paper, and suggest some ideas that can be developed by further research.

2. Laws and legitimation discourses

The concept of legitimation, in politics, is closely related to the concept of ideology and the construction of consensus by power groups and at different levels of the social structure. The state, as a whole, is articulated into political communities, regimes and the government of the nation (Pasquino 2004). The principle of legitimation, in the case of the pandemic emergency, was of particular concern to the governments of European nations who faced, in a short time, the need to justify a deviation of power from existing democratic conventions. The consensus, necessary for the legitimization of political action by governments, was constructed in different forms from a discursive point of view (Wodak 2021), which either involved the enactment of specific laws or was based on compliance with virtuous behaviour on the part of individual citizens. In other words, the executive power of European democratic governments resulted into a form of legitimation that was translated through different types of normative approaches, but in the name of a common imperative: the protection of national public health. Following a critical theoretical approach based on the contextualization of discursive events (Reisigl and Wodak 2009), the link between the legitimation through institutional communication and the specificity of the regulatory instruments implemented can be fully understood if we delve into the issue at two levels: the European Union’s competence in health emergency management and the different legal possibilities for intervention by member states.

The health emergency was immediately “nationalized,” and thus managed in different ways and at different times, because the European Union has no room for intervention in matters involving the management of pandemic events and health emergencies. Article 168 of the Treaty on the Functioning of the EU (TFEU) restrains EU’s actions in relation to public health. According to the above article, “all member states retain their sovereignty in both

organization and delivery of health services and medical care, and the EU is obliged to respect that sovereignty” (Pazera 2021, 78).

7. Union action shall respect the responsibilities of the Member States for the definition of their health policy and for the organisation and delivery of health services and medical care. The responsibilities of the Member States shall include the management of health services and medical care and the allocation of the resources assigned to them.

Article 35 of the Charter of Fundamental Rights of the European Union also specifies that, in health matters, it is national laws that are to be applied, where health protection is to be a generic part of the definition and implementation of policies promoted by the European Union.

Article 35

Health care

Everyone has the right of access to preventive health care and the right to benefit from medical treatment under the conditions established by national laws and practices. A high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities.

Therefore, national management of the pandemic emergency has never been questioned by European institutions,

basically limited to encouraging cooperation between the member states. Most importantly, the EU is not responsible for implementing major legislation or centralize frontline healthcare provisions. Whatever the newly implemented national policies are, the EU cannot directly challenge them. it only possesses soft-law mechanisms, such as guidelines, recommendations and health promotions. (Pazera 2021, 80)

If we move to observe the policy action instruments implemented by EU member states, we can distinguish four different, but not incompatible, policy options that affected the first pandemic wave in 2020:

- i. constitutional states of emergency;
 - ii. statutory regimes;
 - iii. measures adopted under special legislative powers;
 - iv. measures adopted almost exclusively under ordinary legislation
- (Crego and Kotadinis 2020, 10)

In the case of the pandemic emergency from Covid-19, the first remark concerns the response provided by member states equipped with constitutions that include the possibility of

declaring a state of emergency in cases of public health emergencies. All member states, with the exception of Austria, Belgium and Denmark, are governed by constitutions that provide for the declaration of a state of emergency, but only 17 have a constitutional charter that also covers the case of pandemic risk.

Of the 17 Member States that are equipped with some sort of constitutional emergency clause suitable for use in a pandemic, only 10 member states chose to activate it during the first peak of the pandemic in Europe (Figure 1, map n. 1: Bulgaria, Czechia, Estonia, Finland, Hungary, Luxembourg, Portugal, Romania, Slovakia, Spain).

Seven Member States (Croatia, Germany, Lithuania, Malta, the Netherlands, Poland and Slovenia), who could in principle have declared a state of emergency, opted for a different solution.

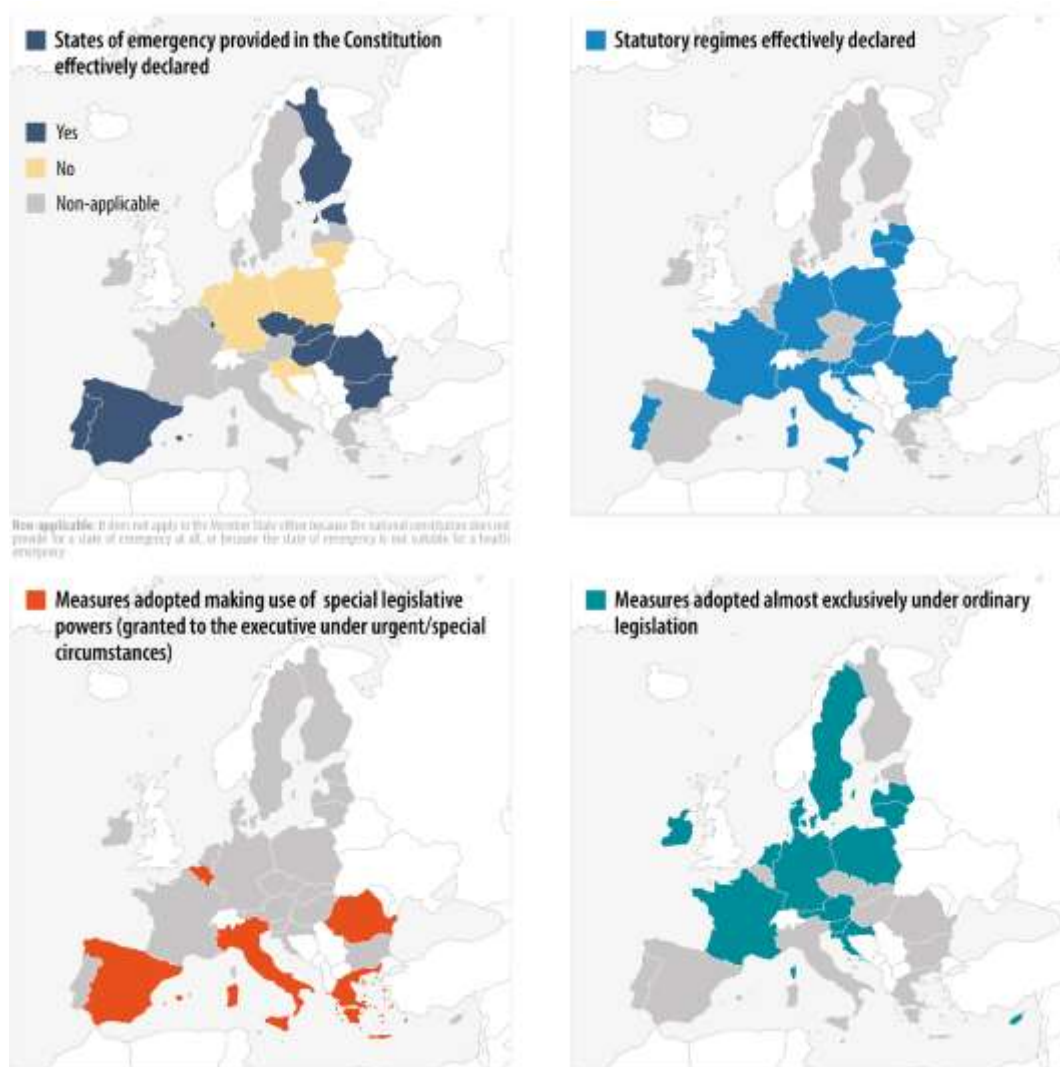


Fig. 1: Constitutional/legislative framework of the main measures adopted to contain the coronavirus pandemic at the national level (not regional) during the first wave of the pandemic (EPRS 2020 in Crego and Kotadinis 2020, 16)

As we can see from Figure 1 (map 2 on Statutory regimes), statutory regimes were implemented in 14 member states (Bulgaria, Croatia, France, Germany, Hungary, Italy, Latvia, Lithuania, Malta, Poland, Portugal, Romania, Slovenia, and Slovakia). These statutory health or civil protection regimes aimed at introducing predetermined measures of an exceptional and practical/operational character. Some states decided to declare both a state of emergency and a statutory regime, to serve different purposes. In some cases, the statutory regimes were declared instead of a state of emergency, because either this was not suitable to respond to a pandemic, or because declaring a state of emergency was not desired.

Special legislative powers exercised by the executive were used in only a handful of states (Fig. 1, map 3: Belgium, Greece, Italy, Romania and Spain). In all these countries, except Spain, special legislation provided enabling rules for the government to introduce containment measures.

The majority of Member States, either relied on a range of enabling laws that existed prior to the current emergency (Cyprus, Czechia, Estonia, Finland, France, Germany, Latvia, Lithuania, the Netherlands, Portugal, Slovakia, Slovenia and Spain), or adapted pre-existing laws to the new emergency (Bulgaria, Croatia, Denmark, Hungary, Luxembourg, Malta, Poland and Romania). In very few cases (Denmark, Ireland, the Netherlands, Sweden), the power to introduce containment or mitigating measures derived exclusively from ordinary legislation that either existed prior to the current crisis, or that was adopted or even adapted to what was needed to fight the pandemic (see Crego and Kotadinis 2020, i-ii).

Looking at the data and maps, the approaches pursued by governments have seen a deep division between some northern European states (4: Denmark, Ireland, the Netherlands, Sweden), to which we can add three other Central and Southern European states: Austria, Cyprus, and Malta, and the rest of European countries. These states (7) just applied ordinary laws pre-existing the pandemic emergency, without giving governments additional powers or prerogatives.

The majority of European states, on the other hand, as mentioned above, either declared a state of emergency as provided for in their respective constitutional charters (10) or established emergency regimes (13: Bulgaria, Croatia, France, Germany, Hungary, Italy, Latvia, Lithuania, Poland, Romania, Portugal, Slovenia, Slovakia), sometimes associated with the state of emergency declared under their constitutional charter (5: Bulgaria, Hungary, Portugal, Romania, Slovakia).

Along with the Northern European approach, we can identify another approach to the crisis that was quite typical of some Eastern European states (Bulgaria, Hungary, Romania,

Slovakia) declaring, at different times, both a state of emergency under the constitution and special legal regimes. Hungary embodied the most extreme position, having also given the government special powers that would ensure more timely intervention.

By virtue of an approach to the pandemic emergency that, in general, is quite differentiated and difficult to standardize, we can observe that the two above mentioned models characterized by regulatory diversification (the Eastern European model) or an absence of regulatory production (the Northern European model) followed two different paths in terms of legitimation through discourse. The four frames identified by Wodak “to mitigate the ‘dread of death’” (Bauman 2006 in Wodak 2021) conform to the more or less extensive implementation of special laws enacted during the pandemic peak period.

- The religious frame: legitimation through moralisation
- The dialogic frame: legitimation through rationalisation
- The war frame: legitimation through authorisation
- The trust frame: legitimation through institutional trust

On the one hand, implementation of the law at the lowest possible level is legitimized through the trust frame, and this is represented by the approach of Sweden and other northern European states. The appeal to fight the spread of the virus is targeted to the individual citizen goodwill and his/her commonsense, or what Wodak calls a rational appeal to sacrifice the few on behalf of the many.

On the other hand, the management of the crisis through the construction of a complex normative system of control on citizens follows a different legitimization path, as it is represented by the case of Hungary. In this case, here based on the implementation of the law at its highest possible degree, the legitimation strategy is based on the war frame. The appeal to fight the spread of the virus excludes individual citizens' freedom and responsibility, and constructs a biopolitical normative system of control and punishment (Foucault 2001).

3. European legitimation

Due to its inability to act as a political entity, the European Union, on the basis of the European treaties, played a mere coordinating and supporting role on behalf of the member states. In order to understand what kind of legitimation frame was adopted by the European institutions to obtain the consensus of citizens, we have examined the portal in English (it is however available in all European languages, and also in Russian and Turkish) through which

the European Union managed part of its communication with citizens to legitimate its action to fight the pandemic. The discursive frames, as a supranational body that could not legislate on the matter, seem partially different from those identified by Wodak (2021).

The homepage of the portal (in English) is named as the EU's "common response" to Covid-19 infection:

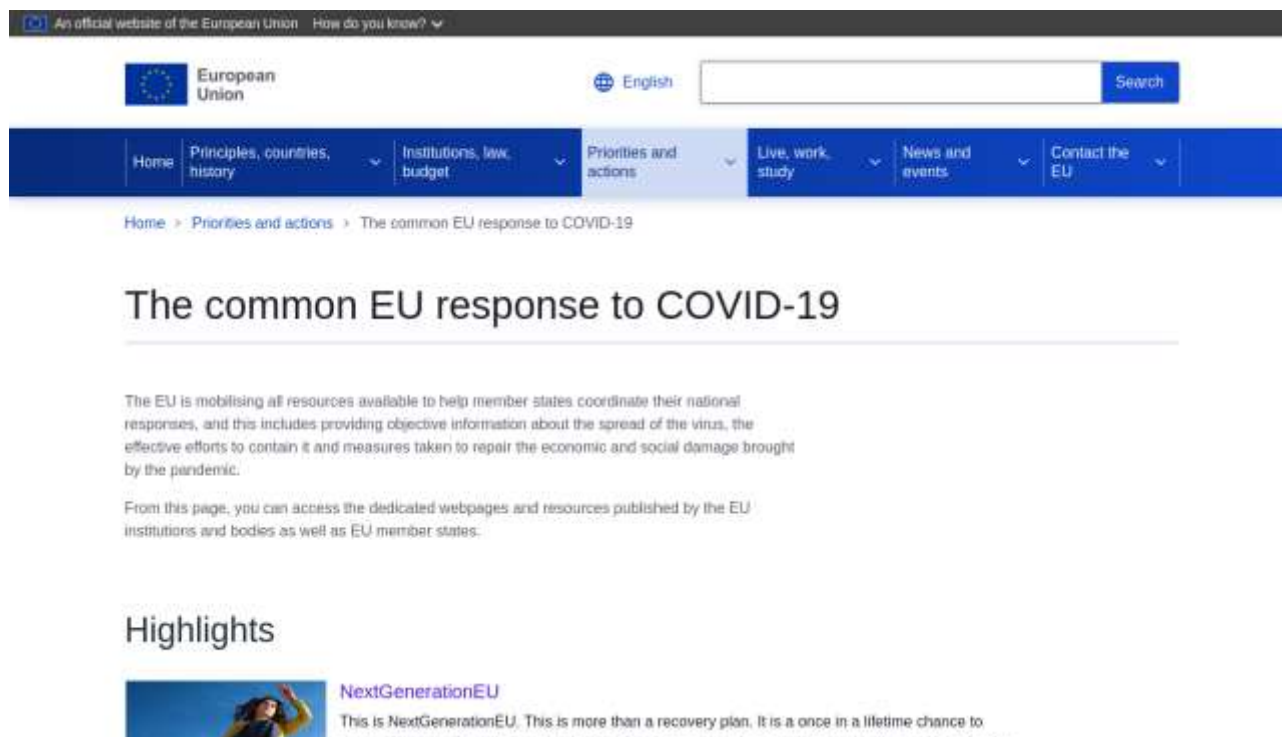


Fig. 2: EU common response to Covid-19 (Homepage)³

The homepage (viewed and downloaded in September 2023) is structured into eight subsections to which correspond several links to as many webpages that made up our corpus (see Tab 1 below).

As a whole, there are 8 main Sections contained in a portal page and 32 links that provide access to an equal number of subsections and pages. Section 2 (Timeline) adds 4 more links and therefore four more webpages for every year of Timeline (2020, 2021, 2022, 2023), which is a chronological account of European actions. The corpus has been downloaded manually and counts about 100,000 words.

³ https://european-union.europa.eu/priorities-and-actions/common-eu-response-covid-19_en. Last visited 10/05/2024.

Portal's Sections	Number of links	Webpages
1) Highlights	3 links	Link 1) Next Generation EU Link 2) Recovery Plan for Europe Link 3) Corona Virus Response
2) Timeline	1 link + 4 sublinks	Timeline of actions taken by EU institutions (+ Timeline 2023, Timeline 2022, Timeline 2021, Timeline 2020)
3) EU Action	12 links	Link 1) European Parliament Link 2) Council of European Union Link 3) European Commission Link 4) Court of Justice of the European Union Link 5) European Central Bank Link 6) European Court of Auditors Link 7) European External Action Service Link 8) European Economic and Social Committee Link 9) European Committee of the Regions Link 10) European Investment Bank Link 11) European Investment Fund Link 12) European Data Protection Supervisor
4) European Solidarity in Action	3 links	Link 1) Europeans Against Covid-19 Link 2) Coronavirus: European Solidarity in action Link 3) Europeans versus Covid-19
5) Fighting disinformation	3 links	Link 1) How to fight disinformation (European Parliament) Link 2) Fighting disinformation (Council of the European Union) Link 3) Fighting disinformation (European Commission)
6) Recovery plan for Europe	2 links	Link 1) A recovery plan for Europe (Council of the European Union, latest developments and timeline) Link 2) Recovery plan for Europe (European Commission)
7) EU member states and European Economic Area	1 link	Sources of information in EU Countries
8) Follow the latest progress and get involved on social media	7 links	Link 1) #StrongerTogether Link 2) #EuropeansAgainstCovid19 Link 3) #UnitedAgainstCoronavirus Link 4) #GlobalResponse Link 5) Tweets by health authorities in EU Member States Link 6) Other social networks Link 7) Images and videos from EU countries

Tab. 1: Structure of the portal “The common EU response to Covid-19”

3.1 The language of solidarity

At a first glance, the pages of the European portal dedicated to the management of the pandemic emergency show a dichotomy between two discursive frames, partly different from those that emerged at national level. The frames through which European communication tried to legitimate its actions are those of a) solidarity and b) business discourse, sometimes juxtaposed in the same section.

The principle of solidarity, used as a discursive frame of legitimation is articulated as 1) mediating between the individual and the community, 2) cementing group unity and compactness, and 3) implying moral obligations for the individual (Scholz 2008, 18-19). An example of this legitimation frame at a national level can be observed in the change of strategy by Macron, who first portrayed the national response to the virus in the terms of a war, and later, after declining in popularity, appealed to social cohesion through the principles of solidarity and equality (Wodak 2021).

European solidarity, as a discursive practice, is a form of promoting one's social and political action and persuasion. In this case, the dominant tool of the persuasive message chosen by the European institutions is that of the testimonial. The testimonial changes in the different sections of the portal: social networks (Section 8, Link 1, Link 5), especially Twitter, show institutional testimonials, such as the European Commission President Ursula Von der Layen or the European Council President Carl Michel. Their endorsement is global, pan-European. In other sections, particularly Section 4 explicitly devoted to European solidarity, the testimonial is the ordinary European citizen, and citizens' stories are local in scope, but no less morally uplifting.

From a promotional perspective, solidarity is translated through the strategic use of inclusive pronouns and storytelling (Ahrabi and Rucker 2022; Ahrabi 2018), which are often combined within the same text. European leaders' statements, conveyed through social networks and particularly through Tweets (Section 8, Link 1), are often articulated around the representation of a cohesive community in which there is no distinction between institutional and social levels.



Fig. 3: Von Der Layen’s statement/pic in #Stronger together (Section 8, Link 1)

The example of the President of the European Commission (Tweet posted on 15 April 2021) becomes a mini-narrative in which the institutional pronoun WE (“after we passed”), turns into a first-person account of her own experience in a conversational tone (“I’m very glad... I got ... my first shot...”) to eventually become an inclusive WE in the final appeal (“The swifter we vaccinate, the sooner we can control the pandemic”).

Another institutional example, dating back to June 2021, features the President of the EU Council, Charles Michel, promoting the vaccination campaign through a different social network (Facebook) and posting his message in two languages. Being a Belgian politician who got his “shot of freedom” in Brussels, French language comes first:



Fig. 4: Charles Michel’s statement/pic in Other Social network (Section 8, Link 6)

Charles Michel's post is even more colloquial than Von Der Layen's, as it does not introduce any institutional level through the exclusive pronoun WE. In this Facebook post, the first-person plural pronoun NOUS/WE is an inclusive one (all of us EU citizens) in all the occurrences ("what we cherish the most" ... "helping us" ... "we have to remain vigilant" ... "we are on the right track"). Charles Michel's personalises his interaction by addressing the health worker displayed in the picture (Nadia). He is not a representative of the EU institutions, but "one of us," who gets his first dose of vaccine, thanks the nurse and believes that the situation will be better soon. His interaction is personalised from the beginning of the post, which starts with an initial JE/I that is then turned into an inclusive first-person plural pronoun. The construction of the political leader identity is that of the "normal person," a quite recognizable and conventional rhetorical style in today's politics (see Fairclough 2000, 98).

In Section 4, "European solidarity in action" we find the stories of individual European citizens, who represent ethical-moral role models to emulate. The stories involve individuals who have contributed by their own actions or expertise to help other citizens in need. The stories in Section 4, Link 1 are provided with photographs that summarize the solidarity message contained in the individual story.



Fig. 5: Europeans against Covid-19 (Section 4, Link 1)

Links 1) and 3) in Section 4) are very similar and differ only in page format. In addition, Link 1) provides the opportunity to participate in story collection ("Get involved") and share one's story through social networks. The depiction of the testimonial, its identification through a name, and the possibility of being led to identification through storytelling follow the principles of effective advertising persuasion in a multimedia and interactive online context (Rogers-Thorson 2012; Braverman 2008).

3.2 The corporate frame

Unfortunately, as it happened with other international crises, the European Union has proven to be a first-rate economic player, but politically weak (Renda and Castro 2020; Townend 2020; Yann and Van Hamme 2013; Cavalli 2004). We cannot help but notice that economic-financial goals have been prioritized in European approaches to crises (see Kopania 2022).

Perhaps the most remarkable step in the direction of further integration of the Member States can be noticed in the vaccine purchasing and distribution process. The EU's reasonable concerns over strategic autonomy accelerated the developing of a common strategy. This prevented the Member States from not treating each other as competitors in vaccine rollout (Kopania 2022, my emphasis).

The role of a corporate “buyer” (see Bargiela-Chiappini et al. 2007) played by the European Union was attributed by the Union itself, which in the Timeline 2020 (Section 2, Link 1) of the portal defines the Union as a “big buyer” (Feb. 28, 2020) acting on behalf of the member states.

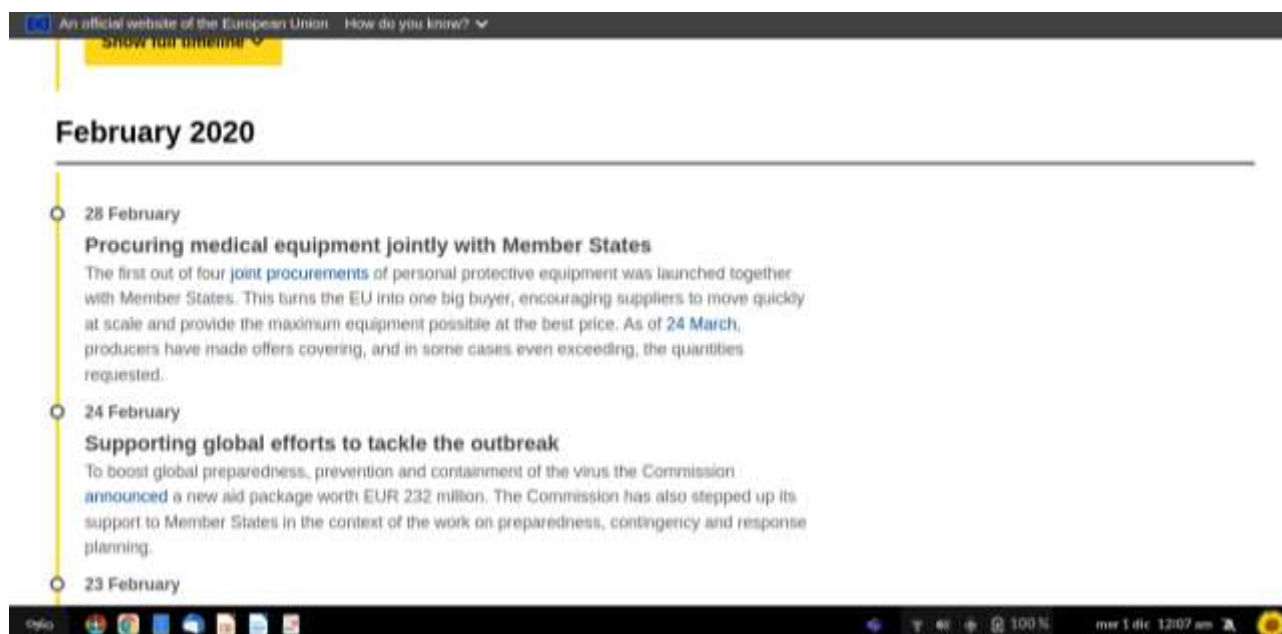


Fig. 6: Timeline 2020 (Section 2, Link 1)

The corporate role of the Union (Feb. 28, 2020) is restated by the function of negotiating with “suppliers” and the need to obtain a large quantity of products (“maximum equipment possible”) at the best possible price (“best price”).

The buyer role, therefore, is constructed through lexical choices that are quite typical of company discourse and its investment strategies. The new discursive frame, which we can call “corporate frame,” constructs the legitimacy of its action on the ground of its organizational capacity to identify the necessary resources for the company at the best purchase price. In this case, however, the corporation is a supranational political body such as the European Union. This mediating function, aiming to purchase vaccines for EU citizens, has been especially relevant in the business negotiation with some big pharma companies, such as Pfizer (US), Astra Zeneca (Anglo-Swedish), Johnson and Johnson (US), and Moderna (US).

Securing safe and effective vaccines for Europe and the world

- Economic measures
- Public health
- Borders and mobility
- Fighting disinformation
- Documents
- Related links

Securing doses of vaccines and supporting vaccination in EU countries

The Commission has built a diversified portfolio of vaccines for EU citizens at fair prices. Contracts have been concluded with 7 promising vaccine developers, securing a portfolio of up to 4.6 billion doses:

- [BioNTech-Pfizer](#) for up to 2.4 billion doses
- [AstraZeneca](#) for up to 400 million doses
- [Sanofi-GSK](#) for up to 300 million doses
- [Johnson and Johnson](#) for up to 400 million doses
- [CureVac](#) for up to 405 million doses
- [Moderna](#) for up to 460 million doses
- [Novavax](#) for up to 200 million doses
- [Valneva](#) for up to 60 million doses

Between December 2020 and March 2021, the Commission granted **four conditional marketing authorisations** for COVID-19 vaccine: to BioNTech and Pfizer (21 December), Moderna (6 January), Astra Zeneca (29 January) and Johnson & Johnson (11 March).

Deliveries of vaccine doses to Member States have increased steadily since December 2020. Vaccination gathered pace across the European Union, and by the end of August 2021, 70 % of

Fig. 7: European Commission response to Coronavirus (Section 3, Link 3)

The transparency of the promotional discursive frame of European solidarity is matched by the obscurity of a text understandable only to insiders, particularly experts in finance and marketing procedures for pharmaceutical products, which are subject to stringent experimental controls before mass distribution.

The expression “portfolio building” generally refers to financial investment transactions in which there is a diversification among types of financial instruments, such as equities, bonds, and mutual funds. Here, instead, the term “portfolio” refers to vaccines to be purchased and distributed to member states and is repeated twice, indicating in quantitative terms the size of the investment (4.6 billion doses).

The European Union is portrayed as a company being able to sign a contract (“conclude a contract”) with seven different third parties, in this case big pharma companies—that is to say, the world’s largest pharmaceutical companies that hold a monopoly on drug production and constitute one of the most politically influential lobbies, holding a power that is able to condition national health policies.

In addition, while never mentioning the EMA (European Medical Agency), whose website is not included in the “EU Common response to Covid-19” portal, the European Commission decides not to explain the meaning of “conditional marketing authorization,” which means the temporary marketing of a drug in the absence of the normally required clinical-experimental data, but in view of the potential benefit of the drug’s immediate availability.

The European Medicines Agency (EMA) supports the development of medicines that address unmet medical needs. In the interest of public health, applicants may be granted a *conditional marketing authorisation* for such medicines on less comprehensive clinical data than normally required, where the benefit of immediate availability of the medicine outweighs the risk inherent in the fact that additional data are still required.⁴

A “conditional marketing authorisation” is, as we learn from the EMA website, a fast-track procedure that has been used in several cases and, in particular, in the case of the Covid-19 pandemic.

4. Final remarks

The European Union, obliged by the treaties to act in order to support member states and coordinate their actions on health matters, has played the only possible role to avoid the perception of its own political weakness: that of a purchasing and empowered parent company acting for and on behalf of its corporate subsidiaries. The portal devoted to the European response clearly shows the absence of active policies other than economic and financial ones, with the only exception being Section 5 devoted to fighting disinformation.

European legitimation is constructed through an ideological frame which is quite different from the national frames based on rationality, institutional trust, and the authority of state bodies as explored by Wodak (2021). In the case of the European Union, it is the corporate frame to be dominant and pervade much of its institutional communication. The deviation from the corporate frame represented by the discourse of solidarity is actually just part of a

⁴<https://www.ema.europa.eu/en/human-regulatory/marketing-authorisation/conditional-marketing-authorisation>. Last visited 10/05/2024.

corporate promotional strategy: solidarity, conveyed in particular through narratives and personalization has been driven by the typical tools of advertising campaigns: testimonials, social networks, the construction of visually appealing, but factually poor—in terms of scientific information—messages.

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