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Naming for Sustainability: Interrogating the Efficacy and Sustainability of COVID-19 Metaphor and Nomenclature

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ABSTRACT
Language matters for sustainability, and diseases' names and attendant terminology should serve language users' extant and future needs. The currency and pandemic proportion of COVID-19, and the viral or pervasive use of its attendant vocabulary and metaphors, makes it an apt case for interrogating the sustainability of its nomenclature. This paper interrogates the efficacy and sustainability of COVID-19 related English vocabulary and metaphors among the Shona speaking people, as a microcosm of their efficacy and sustainability among Bantu African language speakers. The paper is framed by the Sapir-Whorf hypothesis, which posits that language filters people's reality and colors their attitudes and actions. By implication, unstainable and inefficacious language compromises an appreciation of one's reality. Acknowledging that any linguistic inventiveness should serve a utilitarian rather than ornamental function, the paper interrogates the sustainability and efficacy of the 'war' metaphor and lexical innovations replete within the COVID-19 discourse. The paper analyzes efficacy regarding the terms and metaphor engendering the desired or intended effects and sustainability of the terms' intelligibility, pronounceability, memorability, and translatability. The paper concludes that the selected English COVID-19 related terms engendered unintended thoughts and reactions within the language users, and that, owing to them being products of English lexical innovation, they defy translatability into, and intelligibility within, African languages; rendering the COVID-19 discourse exclusive and unsustainable.

KEYWORDS
COVID-19; lexical innovation; metaphor; naming; sustainability; vocabulary.

INTRODUCTION

Sustainable development has been defined as "…development that meets the needs of the present without compromising the ability of future generations to meet their own needs" (Zygmunt, 2016: p.112 quoting The International Institute for Sustainable Development in Canada). Language used to describe a phenomenon of pandemic proportion such as COVID-19 should accommodate extant and future communication needs of language users. The impetus for this study's focus on the COVID-19 language stems from the ubiquity of its use in current discourse; be it social or medical. Zygmunt (2016) posits the under-representation of the socio-cultural dimension (in which language plays a critical role) in discourses on sustainability, with focus disproportionately placed on the environmental and economic areas at the expense of the linguistic dimension. This paper advocates sustainability discourses to consider linguistic aspects and nomenclature; because any sustainability discussions of phenomena are couched in language that should be sustainable itself.

Theoretical Framing

The need for efficacious and sustainable nomenclature is informed by the seminal, yet contested, Sapir-Whorf hypothesis, and its twin lenses of linguistic determinism and linguistic relativity. Linguistic determinism posits that language filters people's reality by predetermining how and what they see around them (Sapir, 1956). Language is conceived as having a direct bearing on what is perceived by the mind. An overused but apt example from Sapir and Whorf is how Eskimos have a plethora of words for snow (around 50) to distinguish falling snow from snow on the ground and other subtle manifestations of snow. Another common example is how languages differ in the subtlety with which they arbitrarily discriminate the prototypical continuous dimension of colour differences. In both examples, the nomenclature predetermines and affects how the language users perceive the phenomena in question.

Linguistic relativism purports that distinctions encoded in a language are specific to that language. This claim explains why languages do not translate to each other in absolute terms. Cibelli et al. (2016) criticize proponents of an underlying "…universal foundation for human cognition" who consider thought and reality as preceding language, with language just coming in to order the world and make sense of it. Despite the barrage of criticisms levelled against the Sapir-Whorf hypothesis, that has seen a gradual toning down from linguistic determinism to linguistic influence, the relationship between language and the perception of reality is indisputable. While unfortunate word choices may seem innocuous, the incredible potency of words and their ripple effects, should never be underestimated. In that regard, the nomenclature of a phenomenon of global proportion such as COVID-19, that colours or is coloured by human perceptions, needs to be precise (clearly understood) and sustainable (globally accepted and acceptable). The incredible power of language and its subtleties transcends the language user, and is influenced by the language itself; hence, the need to consider the shift in the linguistic landscape courtesy of COVID-19 nomenclature.

Problem Statement

The dynamism of language is most marked and manifest in its lexicon, and the English lexical landscape has been fundamentally altered and broadened, courtesy of COVID-19 nomenclature. The exponential rise in the usage of the term COVID-19, and its overwhelming dominance on global discourse within a short period, has confounded lexicographers. COVID-19 has brought an array of terms; diverse in their formality, etymology, and in word formation processes that ushered them into existence and use. Lettau (2000, p. 734) observes that "Contemporary terminology related to infectious disease (ID) is a patchwork collection that includes foreign words, slang, euphemisms, misnomers, acronyms…." Some terms have taken on novel and nuanced meanings or broader use. Lettau (2000) further notes that some terms atrophy from disuse and others die because of political incorrectness. Other terms become archaic and only retain visibility in dictionaries, historical reviews, or archival medical literature. This paper argues that the disuse and dearth of disease nomenclature is, not just a function of the disease becoming infrequent or defunct, but also a measure of the unsustainability of these terms.

Of the established COVID-19 terms that have been resuscitated or accorded increased usage are words such as *key* or *essential workers, quarantine, self-isolation, lockdown*, *social distance(ing),* to mention a few. Etymological innovation, occasioned by COVID-19 and popularized by social media, has seen new entrants such as 'Covidiot', from a creative clipping and blending of 'coronavirus' and 'idiot'. Lexically, these words conform to the word formation processes (morphological processes), allow for ease of retention and recovery because of their structural elements, and conform to specific word class structures. Other lexical innovations such as 'quaranteams' have been creatively used as shorthand to designate online teams created during the COVID-19 lockdown periods. Even acronyms like WFH for working from home, have either broadened their use or been featured into colloquial language.

While the creativity around the extended use of established words and the creation of novel terms should be applauded, the inventive vocabulary should serve a sustainable communicative purpose. Regarding COVID-19 nomenclature, lexical inventions should equip language users with tools to express their ideas, hopes and fears about the pandemic. Unfortunate linguistic creativity can engender gloom and despondency among the language users, whereas sound acceptable linguistic innovation can inspire hope even when statistics project a dire trajectory. It is within this understanding, that this paper interrogated the term COVID-19, its related terms, and the ubiquitous 'war' metaphor, in terms of their efficacy and sustainability.

METHOD

Selection of the words

In selecting the terms and metaphor for interrogation, consideration was made of their ubiquity and currency of use in, not only scientific or medical COVID-19 discourse, but also everyday conversations and popular media. The researcher kept a notebook in which he consciously

noted the terms that arose in COVID-19 discourses on television, printed material, informal conversations, social media, and any other platforms in which such language was used by laypersons. This research yielded terms such as 'COVID-19', 'social distancing', 'quarantine', 'isolation', 'lockdown', 'positive' and 'essential/ key workers'. According to Sibanda and Baxen (2016, p.58), "The more frequently used a word is, the more useful it is" and that "the frequency of a lexical item corresponds to the speed with which it is recognized" (Sibanda & Baxen, 2016, p.59). The researcher also used his discretion to select terms he considered problematic in terms of efficacy and sustainability. This subjective process yielded terms such as 'patient zero', 'super-spreader' and 'flattening the curve'. Word selection, therefore, was biased towards perceived problematic terms from the researcher's subjective estimation, as well as the frequency of use in public discourse.

Factors considered in the analysis of the selected words

The interrogation of the selected terms was based on their efficacy (engendering the desired or intended effects) and sustainability (intelligibility, pronounceability, memorability, and translatability). Language is meant to serve specific communicative functions, and for pandemics such as COVID-19, imprecise language can compromise vital communication and lead to huge challenges. Communication should facilitate long-lasting transfer of ideas, thoughts, or feelings with precision. For language to meet sustainability requirements, it should also forge a common understanding between interactants. Efficacy and sustainability in language usage enhances access to the discourse, and impacts and legitimizes behavior. Effective and sustainable communication bridges the chasm between experts and lay persons regarding knowledge of the phenomenon under consideration, in this case, the COVID-19 pandemic.

An extensive discussion of conceptual nuances of the sustainability indicators of intelligibility, pronounceability, memorability, and translatability is not feasible for the purposes of this paper. However, these indicators are operationalized in this paper.

Intelligibility refers to understandability or lexical semantics occasioned by either the words' internal semantic structure or their semantic relations (e.g., synonymy, antonymy, polysemy, homophony, hyponym, and metonymy) that enhance word meaning recovery and understanding. Aspects of denotation and connotation, as well as collocation and usage, contribute to lexical semantics and intelligibility. Pronounceability is dependent upon phonetic construction, where unstressed syllables render words easier to pronounce than the stressed ones. Memorability stems from aspects such as word familiarity, word frequency, valency, concreteness, imageability, and/or saliency. Translatability denotes the similarities or differences between a source and referent language pair. This paper considered translatability into an African language, Shona, the author's home language. Linguistic diversities (occasioned by cultural and linguistic constraints) may result in lack of concept equivalence between languages, rendering the selected words untranslatable. The lack of a lexical or syntactical substitute in the target language is compounded by cultural untranslatability if there are no

relevant situational features in the target language for the source language term. Untranslatability can be referential or pragmatic. This paper applies these sustainability indicators in the way they were operationalized.

An avalanche of terms is characteristic of the COVID-19 discourse from which eight terms were identified, following their frequency of usage and the researcher's discretional interpretation of their problematic nature, as indicated earlier. The terms considered are presented in Table 1 below in the results section. The 'No' is the researcher's estimation of the COVID-19 related term lacking in the criterion under consideration, and the 'Yes' denotes the criterion under consideration being reflected in the COVID-19 related term. The basis for the discretional assignment of the No and Yes is the researcher's sound knowledge of both English and Shona, and their lexical parallels.

RESULTS

This paper is illustrative rather than exhaustive in its interrogation of COVID-9 nomenclature. Thus, from the myriad terms available, only ten were selected for analysis.

Presentation of the results

The analysis yielded the results captured in Table 1 below, where **'**No' denotes the researcher's estimation of a particular sustainability criterion lacking in the term, and 'Yes' denotes the criterion being reflected in that term.

Table 1.

Estimation of the efficacy and sustainability of the term COVID-19 and related terms

	EFFICACY	SUSTAINABILITY			
Term	Precisely conjures the intended meaning in users	Intelligibility (Easy to understand)	Pronounceability (easy to verbalize)	Memorability (easy to remember)	Translatability (Easy to translate across languages)
COVID19	No	No	Yes	Yes	No
corona	No	No	Yes	Yes	Yes
novel	No	No	Yes	Yes	No
patient zero	No	No	No	No	No
positive	No	No	Yes	Yes	No
super-spreader	Yes	Yes	No	No	No
essential/ key workers	No	Yes	Yes	Yes	Yes
quarantine/ isolation/lockdown	No	No	Yes	Yes	No
social distancing	No	No	Yes	Yes	No
flattening the curve	No	No	No	No	No

Discussion of the selected terms

The term COVID-19

In relation to diseases, the cliché 'what's in a name?' does not hold because the names of diseases are often fraught with ethical implications. This fact explains why the World Health Organisation (WHO) urges caution when naming diseases. The potential backlash against particular communities that can emanate from the inappropriate naming of diseases can adversely impact their lives and livelihoods. Krisberg (2015, p.1) notes that:

> …diseases named after people, places and animals can contribute to significant, and often negative, social and economic impacts, such as the unnecessary killing of agricultural animals and the stigmatization of entire regions.

In cases in which the scientific community moves slowly to name a disease, those outside the community invent a name for it and popularize it through use (especially via social media) until it is entrenched within the lexicon of the language users. WHO (2015) has developed best practices for naming diseases, such as: using generic descriptive terms informed by the disease's symptoms (e.g., respiratory), disease's target population (e.g., juvenile), disease's severity or seasonality (e.g., severe, winter), and/or the pathogen that causes it (e.g., coronavirus). The restrictions regarding disease naming include refraining from naming diseases after; geographic locations (such as the former US President popularised), names of people, animal species or food (e.g., swine or bird flu), cultural, population, industry, or occupational groups, or by terms that incite undue fear (e.g., unknown). Unwieldy disease names may not be adopted by the language users. Disease names appeal to the human psyche and can potentially communicate or imply a threat; excite needless cultural, regional or economic offence; or communicate hope.

UNICEF (2020) identifies COVID-19 as a disease caused by a new strain of coronavirus, and notes that the name is a combination of 'CO' for corona, 'VI' for virus, and 'D' for disease. The name communicates information about a) how the disease appears under microscopic observation (a crown – one of the definitions of the word 'corona' given by the Merriam Webster Dictionary, 1888), b) its cause (a virus), c) it being a disease, and d) the date of its inception (2019).

The appendage '2019' (referring to the date when this disease was first medically recognized) is itself fraught with challenges. It suggests the memorialization of the disease. Its devastation and dominance in global discourse renders it, and the period of its reign, unforgettable. Because of its devastation, language users do not need to memorialize it and thus, 2019 is unnecessary. The '2019' may be suggestive of the inevitability of other coronavirus diseases, which makes the label '2019' a market of the current pandemic from anticipated future occurrences of 'covid', hence the expediency of appending the year of its inception as a distinguishing feature. The appendage evokes thoughts of an inescapable series of similar diseases, thus warranting the retaining of the name 'covid' and altering the appendage '2019' to the novel disease's incipiency. This connotation is aggravated when the COVID-19 is further distinguished into

waves of the '2019' one, which can only mean even the 'beyond -19' covids would potentially have variants. That can only engender gloom in the language users.

While COVID-19 is easy to pronounce and remember, it is not translatable to African languages owing to it being a blend of several English terms. The same reason renders it unintelligible to the lay or 'ordinary' language user. Its efficacy is compromised by the suggestion of the inevitability of similar diseases in future that is qualified through the current disease's '-19' appendage.

Corona in coronavirus

The 'crown' meaning of the word corona (that is similarly verbalised and has the same meaning in Shona) conjures a positive image. A crown is something to strive for and to work towards. The Merriam Webster Dictionary (1888) defines corona as "a circle of light that can sometimes be seen around the moon at night or around the sun during an eclipse." The image of the word corona representing a hallo of light amid darkness is attractive. It is interesting to note that it is not the vaccine that is named corona to signify victory over the pandemic, but the disease itself. To conjure up positive images for this fatal disease's name, and then pronounce it a pandemic, is ambivalent. While the justification for the term 'corona', rendered by the virus' crown-like spikes protruding from the surface, is noted, the common language user is familiar with crowns of victory but most probably ignorant of the fact that, seen under microscopic radar, viruses have shapes. The term 'coronavirus' is almost suggestive of 'crowning the virus', an idea that connotes positive vibes among both listeners and readers. While 'corona' is easy to verbalise, remember and find an equivalent for in the African language used in this paper (Shona), it fails to communicate the intended meaning of a life-threatening disease, thus, rendering it unintelligible.

Novel in novel coronavirus

While the term "novel" in novel coronavirus, that is meant to distinguish it from previously identified coronaviruses, is infrequently used, it also presents challenges. Although the former designation '2019-nCoV' has given way to the term 'COVID-19', the appellation 'novel' in 'novel coronavirus' is still in contemporary use. Novelty only applies at the genesis of the disease, and nothing retains novelty indefinitely. The term novel is itself replete with positive and endearing undertones of something new, original, fresh, and unique; rendering the referent desirable. It is not an apt description of a deadly virus, and the appellation will become obsolete with time. The term 'novel' does not conjure the intended meaning owing to its propensity towards desirable features and transient attributes that are often lacking in sustainability. The precise equivalent in the African language used as reference in this paper, is missing.

Patient zero

The term 'patient zero' refers to the first carrier of a communicable disease, aligning with military expressions such as 'zero-hour' (when an action begins) and 'ground zero' (the point below which a bomb detonates). The ordinary usage of the word 'zero' connotes negativity. The Merriam Webster Dictionary (1888) defines zero as "an insignificant person or thing, nonentity",

or “the lowest point: nadir”. By extrapolation, the patient zero would then be a nonentity, the lowest being, of no importance, or worthless. The appendage ‘zero’ explains headlines such as ‘hunt’ for patient zero that appeared in the popular media, associating patients with animals for slaughter. The concept’s attendant connotations are meant to apportion blame. The irony is in the search for that index ‘person’ (a better term to use) that renders people significant. Alpha case would also be a better alternative to ‘zero’ as the former communicates the idea of beginning not nothingness, uselessness, worthlessness, or insignificance.

Positive

Taking from its predecessors such as HIV and AIDS, COVID-19 has continued debasing the positive connotation of the word ‘positive’ and made the word ‘negative’ more attractive despite it being undesirable in its denotative meaning. The ideal usage of positive and negative for ‘good’ and ‘bad’ respectively is reversed because testing negative to the virus is a positive and desirable outcome. The reversal of the denotative meaning of positive and negative as being ‘desirable’ and ‘undesirable’ respectively, renders the term unintelligible, ineffective, and lacking in translatability.

Super-spreader

Cave (2020, p.2) defines a super-spreader as one who “…has a greater than average propensity to infect a larger number of people”. The contagion is aggravated if the referent has an elaborate network of contacts. There is stigma and guilty suffered by ‘super-spreaders’ as the implication is that of them being complicit with the virus in its devastation trajectory. The connotation is that the virus does not spread own its own but is spread by individuals, chief of whom are designated super-spreaders. In South Africa, a church service hosting international guests in Bloemfontein led to scores of infections traceable to the church service. The event is credited with introducing the disease to the Free State and Northern Cape provinces; a stigma that the church may not be able to recover from. ‘Super’ has the connotation of excellence, rendering the spread of the virus attractive. ‘Spreader’ suggests intentionality and negligence on the part of the referent leading to apportionment of moral blame. Super-spreader conjures the intended image of one who propagates the virus. This term, however, lacks in pronounceability, memorability, and translatability because, while it communicates the intended image, the concept is not easy to recover from just hearing it being used – a fact that affects its intelligibility.

Essential /key workers

Words have the uncanny habit of communicating what they explicitly say as well as what they communicate by implication. Referring to some workers as ‘essential’ or ‘key’ boosts their egos and self-esteem, for belonging to the non-essential category suggests one’s dispensability, potential redundancy and expendability within an organisation. While its pronounceability favours its memorability, the African language in question has no equivalent and the term excites intended positive thoughts and images.

The terms quarantine, isolation and lockdown

The term quarantine potentially triggers fear because of its association with medical disasters and, thus, has a psychological effect. It potentially evokes similar reactions as the terms 'ostracism', 'exclusion' and 'rejection'. Quarantine suggests being asymptomatic but having had exposure to the virus, that is tantamount to questioning the individual's physical contacts. The term 'isolation' is not a favourable alternative because it transcends mere physical separation to include even emotional and social isolation. Isolation is meant for the containment of the infection, but it is severally used to refer to the containment of people arriving at a new destination. Placing one under isolation is tantamount to declaring them infected by some disease when physical separation is the intended meaning. The term 'lockdown' conjures images of compulsion by a higher authority, movement restrictions, as well as a disregard for people's needs. Lockdown has connotations of being immobilized and deprived of the society of one's family, friends and associates. While the three terms are easy to pronounce and retain in memory, they each convey unintended images.

The phrase 'social distancing'

The use of the term 'social distancing' to refer to physical distancing has a negative connotation of social isolation. Social interaction transcends physical contact. Considering how technology has eased social connectivity, the phrase 'social distancing' is a misnomer. Mental health requires social connection and humans are essentially social beings. Physical distancing does not preclude social contact. The term, therefore, while easy to verbalize, lacks efficacy and intelligibility as well as African language equivalence. For the Shona people who have idioms, proverbs and traditions that celebration social cohesion, not only despite, but also especially during crises times, 'social distancing' goes against being human.

The phrase flattening the curve

The phrase 'flattening the curve' is almost contrary to the war metaphor that seeks the annihilation of the virus. It is an acceptance that infections will occur and what can be done is to slow the rate of occurrence, to 'buy time', and ensure that the infected persons can be accommodated in hospital beds. It is meant to keep the number of infected patients within the range that the health system can contain. This phrase is an acknowledgement that efforts to contain the virus are possibly futile. It engenders a fatalistic attitude as the focus is not on exterminating the disease, but on easing the burden on the over-stretched health care system. The concept of 'flattening the curve', that depends on physical distancing, has evoked imprisonment metaphors of lockdown, confinement, and barriers among other terms. The phrase lacks in both sustainability and efficacy.

The challenges of disease nomenclature in relation to African Languages

A disease's name, and its related terms, is actuated by a desire to ensure resonance with the public through memorable, short, and easy to vocalize terms. The challenge with disease nomenclature is its highly technical nature divorced from the daily social use of the language, rendering the terms exclusive to those in the scientific community. This disadvantage that

manifests even in cognate languages, is aggravated in situations in which there is considerable orthographic distance between the language of naming and the user's language, as is typical of the orthographic distance between English and Shona, in this case. The meaning that can be derived from the word formation processes of compounding, derivation, affixation, blending, clipping, acronyms, reanalysis, analogy, and creative re-spelling among others, is lost to the language users outside of the naming language community.

Lexicographers can hardly cope with the rapidity with which new terms gain entrance and extant terms put on 'new robes'. Translation of these terms in a way that captures their nuanced and implied meanings is made doubly onerous by the urgency of the translated forms and the unavailability of the equivalent terms in the other language. Generally, the relative economy of English expression compared to that of African languages has single words in English translating to whole sentences or long phrases. This violates the element of brevity that is requisite for terms to have resonance within the language community. An English language user can deduce the meaning of 'covidiot' from their knowledge of covid and idiot, which would not be the case with the African language speaker. Language users outside of the naming language community do not have much, if any, recourse to general translation, a scenario that is even worse for the translation of technical or medical terminology. The translation of such terms would require technical, medical, and lexical expertise in both the naming language and the language of translation. That process alone needs a team of experts and extensive time, and the question to ask is, what knowledge – both linguistic and technical – would the language users outside of the naming language community be able to use to discourse around the phenomenon being discussed?

For Africans, names are sacrosanct and convey deep meanings and capture histories. As the illiterate and semi-literate African language users use some of these terms, they consider them mere identification labels bearing no meaning. Their participation in discourses replete with terms that are alien to them can only be compromised.

Acronyms simplify and expedite communication, enhance recall, and are economic in terms of time and space. Consequently, they are ubiquitous in communication. The acronyms only apply in the naming language and not make sense in another language because they cannot be directly transposed into that language.

Metaphor

Metaphors are powerful tools for meaning making and meaning creation, for cognition and cultural communication. They also advance or develop language through their associations. Metaphors are pervasive in scientific language (Taylor & Dewsbury, 2018) as analogical reasoning facilitates the scientific process. Taylor and Dewsbury (2018, p.47) posit that "a growing body of literature also suggests that metaphors shape the mind, structure our experiences, and influence behaviour". Metaphors do not merely serve decorative or ornamental rhetorical functions, but have indispensable heuristic functions. For McLeod and

Nerlich (2017), metaphors are thinking tools that determine how people relate to the world, and their responsible use matters. Metaphors help people to:

> map meaning from one knowledge and/or perceptual domain to another. When attempting to make sense of abstract, intangible phenomena, we draw from embodied experiences and look to concrete entities to serve as cognitive representatives (Taylor & Dewsbury 2018, p.47).

Metaphors describe one thing in terms of another, particularly in situations in which the former cannot be directly or literally observed. Ceroni (2014, p.1325) cites Lakoff & Johnson (1980, p.4-6) who state:

Our ordinary conceptual system, in terms of which we both think and act, is fundamentally metaphorical in nature... The essence of metaphor is understanding and experiencing one kind of thing in terms of another.

Perrault and O'Keefe (2019:1) claim that "metaphors can be useful in explaining complex topics, as they present the new in terms of the familiar".

Metaphors are multi-dimensional and should be acceptable, not only at the conceptual, but social and political levels as well. Hence, Taylor and Dewsbury (2018, p.47) view metaphors "…not just as heuristic and rhetorical devices, but also as social and political 'messengers' rooted in cultural dynamics and power relations." Metaphors make the unfamiliar understandable and the abstract concrete. Ribeiro et al. (2018) call the former anchoring and the latter objectification. They posit that what is familiar (the source domain) is mapped onto what is unfamiliar (the target domain), enabling people to conceive or frame one thing in relation to another. Such framing requires saliency that comes from apt association and cultural consonance or relevance. Taylor and Dewsbury (2018) suggest that a growing body of literature attests to metaphors' proclivity to shape people's mental frames, organize their experiences, as well as subtly and covertly determine their behavior. In this vein, metaphors are:

> … not mere linguistic embellishments. Rather, they are foundations for thought processes and conceptual understandings that function to map meaning from one knowledge and/or perceptual domain to another (Taylor & Dewsbury, 2018).

The cliché metaphor 'time is money' is an apt example in which "… this linkage between money and time structures our experience with time, in that we conceptualize it as a form of currency that can be spent, invested, valued and/or wasted" (Taylor & Dewsbury, 2018). The use of war metaphors for COVID-19, helped the public to understand the new phenomenon (COVID-19) from their schema of the known phenomenon (war). The metaphor does not indicate which war features people need to import to their understanding of COVID-19 and which they should preclude. Metaphors "create frames but do not force interpretations, and readers differ in how they respond to and interpret metaphors" (Perrault & O'Keefe, 2019. p.4).

While a plethora of metaphors have been used in the discourse on COVID-19 (e.g., confinement and force metaphors), this paper confines metaphor discourse to the war

metaphor. The war metaphor, with its narrow contextualization, is a frame or abstraction for meaning making, and shapes people's individual and collective response to phenomenon.

In the COVID-19 dispensation, humans were inundated with militaristic metaphors in popular media and scientific literature. Arguably, the chief among these was the invasive war metaphor. Taylor and Dewsbury (2018) posit that invasion metaphors create a siege mentality, incite fear, blur facts, and encourage militaristic responses. The authors advise careful vetting of metaphors on the basis of their conceptual, social, political, and historical considerations to ensure they are not estranging. The war metaphor, for instance, comes with an entourage of terms such as 'enemy' and 'warfront'.

Arguments for the war metaphor

Proponents of the war metaphor extol it for reflecting the seriousness of the matter to which it is being compared, and thus, counters passivity and laxness. War signifies the gravity or enormity of a crisis that allows for swift mass mobilization of people and resources around the common challenge at momentous times of upheaval. It galvanizes the spirit of action and foments the spirit of sacrifice in acts such as self-isolating, remaining indoors and surrendering certain civil liberties. The lack of medical and scientific certainty about a pandemic gives the war metaphor expediency, prominence, and legitimacy.

The war metaphor places humanity on one side and the disease on the other side, thereby creating a sense of fraternity. It capitalizes on humans' propensity for survival that predisposes them to process danger-related messages faster, and retain this knowledge.

Arguments against the war metaphor

War metaphors appeal to the use of force, power, and domination in the resolution of problems. The use of the war metaphor is not new in relation to the fields of medicine and science and the various arguments that have been advanced against this metaphor are applicable to its use in relation to COVID-19. War metaphors have had much traction in medicine and 'wars' have been declared on emerging diseases, particularly from the early 20th century and appeals for patriotism in the fight against such diseases made. Nie et al. (2016, p.7) observe that:

> Today, phrases like the following are so common to medicine that their military connotations pass almost unnoticed: pathogens (bacteria or viruses) invading or attacking', 'the body's defences', 'medical intervention', 'doctor's orders', 'the magic bullet', 'fighting diseases', 'the patient's condition is under control', 'the patient is winning or losing the fight', 'medicine as a battle against death and disease'.

Nie et al. (2016, p.9) further observe that the war metaphors:

> …can reinforce the biomedical model by giving undue emphasis to the physical and biological aspects while downplaying, if not totally ignoring, the psychological, spiritual, communal, and social dimensions of illness and healing.

The opportunity to reify meaning in a way that brings communal and mutual experiences and support is often lost through the use of metaphor. Nie et al. (2016) continue their argument by stating that "Military metaphors reflect the Western preoccupation with progress through

dominating nature, quite contrary to the traditional African view of peaceful coexistence with nature." War metaphors align well with the Western myths of invincibility and the obsession with victory and conquest that are the antithesis of the African ideal of collaboration and tranquillity. Such metaphors, therefore, serve Western societies differently from African societies in which diseases are conditions to be managed.

Health personnel are considered 'frontline employees' evoking the idea of soldiers on the offensive. The politicians become the 'generals' giving commands at a distance without any direct knowledge of what actually transpires in 'the trenches'. The exigency associated with war justifies militaristic responses by governments. By declaring a disease or a virus an enemy, the patient who harbours that enemy is implicated and stigmatized as an enemy and lambasted and censured for non-compliance with the specified restrictions, leading to what Sontag (1990) calls a shift from "fighting the disease to fighting the patient". For her, the military metaphor "...overmobilizes, … overdescribes, and … powerfully contributes to the excommunicating and stigmatizing of the ill" (Sontag, 1990, p.182). The growing body of research attesting to asymptomatic transmission justifies treating everyone as an enemy in this 'war'.

The war metaphor conflates disease with irresponsibility on the part of patients who are then made culpable. The image of hordes of patients waiting to receive care from personnel under siege, who have to protect themselves and then render a service to the patients, with administrators as onlookers waiting to compute statistics of causalities, does not inspire hope and metes an injustice to all stakeholders concerned (patients, medical staff, politicians, and administrators. Medical staff become the 'commanders', patients the 'combatants', the healthcare team the 'allies', and medication the 'weaponry'. Patients are also reduced to the battlegrounds upon which the 'war' is waged. War images of a siege and bombardment conjure thoughts of being overwhelmed, rendering the frontline staff as powerless as the patients. Implicit in the war metaphor is the possibility of defeat, a fact that is hardly reassuring to the patient. In some cases, the responsibility for contracting the virus and dealing with it is placed on the patients who are urged to 'fight' the disease. In most cases, acceptance (not resignation) should precede healing, but the various war metaphors do not collocate with acceptance. As the patients feel themselves 'wasting away' and gradually 'succumbing' to the enemy, they can only blame themselves for not fighting harder or earlier. An adversarial tone with outcomes dichotomized into victory and defeat is promoted. The pressure on both the doctor and the patient is enormous, and each cannot help but take some blame; one for not prescribing accurately, and the other for not fighting enough. Patients who are encouraged to fight may end up masking their emotional distress and maintain a semblance of positivity. When medication regimens are changed, it signals retreat and re-strategizing, and when patients are moved to palliative care, it signals that the battle is lost.

The war metaphor excites fatalistic and gloom-ridden expectations of casualties, of being caught in the crossfire, of sacrifice of some for the good of the majority, and so forth. Death is written off as inevitable, collateral damage, or honourable and heroic martyrdom. The rhetoric of

underlying conditions preceding COVID-19 infection renders some people disposable. When hospitals are reduced to war zones or war trenches, people increasingly become hesitant to access medical care even for non-COVID-19 related symptoms or conditions. The overuse of the war language, that places a low premium on human life, normalizes the language and society's view of the sanctity of life, and escalates people's anxiety levels.

Owing to the war being waged against COVID-19, some at-risk groups have a predisposition to contract the disease and should be kept away from the battlefield. Calls are often made for people aged 60 and older, and those with known medical conditions, to work from home rather than go to their normal place of work. This instruction has the effect of shifting the battlefield to the workplace. This practice happens during a war – normally the healthy and able-bodied, who qualify to enlist in the defence forces, sometimes pay with their lives, while the frail, who are disqualified from the battlefront, are kept safe. What further buttresses the war mentality is the ritual of statistical reporting based on infection rates and deaths.

The war metaphor instils aggressive intervention and discourages some important preventive behaviors. One may doubt the efficacy of a simple preventive measure as washing hands, personal hygiene, cough etiquette, avoidance of public gatherings, and the practice of social distancing, that are neither combative or belligerent enough in the face of a formidable and invisible enemy that has ravaged nations. The war metaphor impels people into combative action through which one confronts the enemy rather than hiding from them. This practice is inconsistent with defensive measures such as remaining indoors. The war metaphor can engender recklessness. People stay indoors during hurricanes or tsunamis not during war. The preventive measure is then sidestepped in search of more aggressive warlike measures to flush out and exterminate the enemy virus. There may even be preference for prolonged painful treatments rather than palliative care. The metaphor inspires fear for the disease and for the treatment, and may lead to postponement or avoidance of such treatment. The metaphor is restrictive in as far as it can 'blinker' people's focus and blind them to available restorative options.

The invocation of the war metaphor is an appeal to chaos. People associate war with death, destruction, and action at any cost. Draconian measures are instituted and rationalized, while humanitarian issues are set aside. There is an obsession with the enemy at the expense of several other important aspects of life. In the stringent COVID-19 lockdown restrictions, some countries, such as South Africa, implemented measures to safeguard the livelihood of their citizens whose incomes were diminished, while other countries, such as Zimbabwe, announced similar lockdown restrictions without making provision for the bulk of their citizens whose survival depended upon the informal sectors for which no work equalled no income. The media was abuzz with people expressing a preference for contracting the virus while going about their daily business, rather than starving under lockdown conditions. The declaration of war on the virus and its resultant disease was sufficient for governments to suspend human rights and

disregard people's livelihoods with impunity. Social media videos abounded with images of security forces' heavy handedness in the enforcement of lockdown restrictions, punishing offenders with extreme penalties, such as having them rolling in what looked like flowing sewage that, ironically, is hazardous to one's health.

While surveillance is necessary to track the spread of the coronavirus, the use of the war metaphor can lead to its enforcement in ways that have no regard for individuals' privacy. The surveillance justified the setting aside of liberties such as privacy and ethical trade-offs between public health and personal privacy. Israel provides an example of a country in which the health ministry reported confirmed 'cases' (a highly impersonal term) to the intelligence services, who, in turn, provided a list of everyone whom each 'case' had come into contact with during the previous two weeks. Communication was then sent to those on this list ordering them to self-isolate (remain out of contact with people). The police used mobile-phone location data to ensure that people complied with the order to self-isolate. The High Court adjudged the invasive digital surveillance a violation of privacy, with the state arguing that the right to life took precedence over the right to privacy. The invocation of a militaristic mind-set occasioned these violations.

Wars are political decisions but responses to diseases should be informed by medical science. Invoking the war metaphor rationalizes the pre-eminence of political decisions over scientific decisions, hence more politicians were heard pontificating about the COVID-19 pandemic than medical personnel. The humanitarian crisis that ensued after the lockdown measures was placated by the military metaphor indoctrination. The fact that people were without food because of the loss of their livelihoods was glossed over as inevitable collateral damage for a 'greater good'. In a war, victory comes at a price, and the war metaphor readies the public to accept social upheaval as the ultimate price for consequent victory.

Once politicians start exercising uncontested authority, they soon develop an appetite for it and gradually turn into dictators. Constant recourse to the war narrative conditions the citizenry to accept excesses of political power and view executive powers as transcending the rule of law. The emergency powers so gained during the 'war' may not be relinquished even post the emergency. The war metaphor communicates the message that sacrifices are about to be made that had hitherto not been made because they had not been necessary in peace times. Society even expected health workers during the COVID-19 pandemic to 'soldier on' even without personal protective equipment (PPE), and to take risks as valiant patriotic 'warriors'. The vigilance engendered by the war metaphor may, and sometimes did, lead to counterproductive behavior.

Evoking the war imagery makes people sufficiently frightened to allow for expeditious enactment of legislation and policy changes. This practice constitutes the 'weaponization' of fear to promote militarized responses. Armed with the military metaphor, India imposed a three-week lockdown with only four hours' notice, and Singapore just gave four days' notice for its month-long lockdown. For South Africa, it was four days' notice for an initial three-week

lockdown. The jostling that followed such emergency pronouncements exposed the general public to an even greater risk of contracting the virus. The use of the war metaphor absolves governments of any blame for such occurrences.

CONCLUSION

There is a risk of disease nomenclatures (within the use of the supposed global language of English) leading to what Lodge (2020) calls “cultural homogenisation” that can obliterate the cultures of non-English speaking people. African languages are rendered invisible, not only in the scholarly or scientific discourse, but also in general discourse on the subject and relegated to non-critical functions such as ‘small talk’ and folklore. The practice of naming among Africans is replete with meaning unlike in the western world where naming serves purely a referent purpose. For African societies, naming cannot be divorced from socio-political circumstances.

The above discussions of the selected terms used in relation to the COVID-19 pandemic show that they are largely inefficacious and unintelligible because they conjure unintended images. The ideal would be to refer to the disease negatively (rather than positive words such as corona and novel) and refer to individuals positively (rather than through the term ‘patient zero’). Terms such as ‘flattening the curve’ cannot be used to communicate with people outside the speaker’s language group or with those with low literacy levels without having to ‘talk down’ to them. It is impossible to give less aggressive meanings to war metaphors and the solution lies in replacing the metaphor altogether. The irony of the language of healing being interwoven into the language of warfare as part of the COVID-19 discourse, when the coronavirus can only be controlled and managed, not vanquished and eradicated; is stark and graphic. Healthcare ceases to be pacific and takes on a heroic stance, during which the annihilation of the enemy is the target.

Taylor and Dewsbury (2018) see metaphors as impeding scientific reasoning, occasioning public misunderstandings and, inadvertently, engendering stereotypic messages that compromise inclusivity. Overused and outdated metaphors, such as the war metaphor in medicine, blinds people’s perception of and responses to diseases. The heuristic value of war metaphors is suspect because it does not accord novel insights into an anomalous domain. The default war metaphor on epidemics has lost novelty and offers no fresh meanings and connections. While the war imagery evokes emergency and inspires fervour and funding, it is largely negative in its implications.

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