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Topic of Research: Sociology of Rumours during a Health Crisis: A Study of COVID-19
Pandemic

Findings

This thesis examines rumours as disruptive as well as generative forces, particularly during times of crisis and uncertainty like the COVID-19 pandemic, where they reveal the tensions between knowledge, belief, and power. The literature on rumours sheds light on ambiguity, especially during crises, where they can either reflect or challenge prevailing societal norms and beliefs. The digital age has accelerated the spread of rumours, often amplifying misinformation and affecting public sentiment. The study employs Discourse Analysis and Critical Discourse Analysis to understand how language perpetuates inequality and power dynamics. CDA reveals how ideologies, represented through media and public discourses, shape social practices and societal norms. The study examines how dominant discourses, such as those around health and governance, contribute to legitimising and controlling social practices during the pandemic. The concepts of interdiscursivity and intertextuality are also explored. The theoretical framework incorporates Foucault's ideas of power-knowledge and dispositif, examining how institutional power structures shape the production and dissemination of knowledge, particularly in the context of the pandemic. The study combines primary data from 73 interviews and observations with secondary data from media reports, speeches, social media posts and videos, and government directives. The field of research is New Delhi, where data was collected during the pandemic 2020-2023 in areas such as Jamia Nagar, Saket, and Khirki Village.

The thesis explores the history of epidemics and pandemics to look at how these health crises extend beyond their immediate medical effects to shape political and social landscapes. The Spanish flu of 1918, for instance, was heightened by wartime censorship and widespread speculation about its origins. Similarly, the Black Death and other epidemics/pandemics saw the rise of theories about divine punishment, poisoned wells, and the scapegoating of marginalised groups, further intensifying social unrest. Through the historical study of epidemics/pandemics, we also understand how rumours provided collective sensemaking and also contributed to scapegoating and the breakdown of social cohesion. The patterns of discrimination are not just a feature of contemporary pandemics but have been a persistent thread throughout history, shaping the course of past health crises. Amid disrupted routines and systemic breakdown, a fractured

epistemic landscape emerged, where scientific authority, personal narratives, and rumours vied for legitimacy. The so-called “regime of truth”, anchored in scientific discourse, struggled to maintain its dominance as lived experiences revealed scepticism and mistrust, exposing the dimension of knowledge and power.

Spatial behaviour (proxemics) and rumours intersect with social control during the pandemic. The pandemic led to the *securitization* of societal issues, with migrants demonised as threats. Narratives are built by media and political agendas, create societal divisions and weaponise fear. There is a selective portrayal of in-group heroes (health workers and police) and the negative depiction of the out-group (Muslims, Chinese, and external actors like TikTok), reinforcing a “us vs. them” feeling. *Healthworlds* are also discussed. This framework emphasises the relational and cultural factors that shape health practices, positioning health as not only an individual concern but also a collective one. In the context of the COVID-19 pandemic, this conceptualisation of *healthworlds* is evident in the diverse health-related practices and beliefs that emerged, particularly concerning traditional medicine, skepticism toward public health measures, and vaccination debates. The use of ethnomedicinal practices, such as herbal concoctions (e.g., kadha), illustrates the tension between cultural knowledge systems and the scientific evidence required by mainstream medicine. The hesitancy towards the vaccine rooted in concerns about the rapid development of the vaccine and the perceived profit-driven motives of pharmaceutical companies has been explored. The bodily autonomy and personal choice complicating the moral and political dimensions of health interventions during the pandemic has been explored.

Rumours emerge as a response to knowledge gaps, embodying societal fears. Religious narratives provide comfort and moral frameworks but may conflict with scientific understanding, leading to resistance against public health measures. Politically, crises become arenas for narrative manipulation, where information is weaponized to deflect blame or consolidate power. Scientific discourse often struggles with public mistrust, especially given its evolving nature and the plenty of information which comes with noise against the area of lack of information, which many times takes the shape of customised knowledge.