6. No hero outside the hospital lane. Governmental Committees, Pop Star Experts and Conflicts of Expertise in COVID-19-ridden Italy

Davide Caselli, Carlotta Mozzana, Daniela R. Piccio & Barbara Saracino

Abstract

Italian citizens have become accustomed to the recurrent presence of experts in the country's decision-making processes. As elsewhere in Europe, an increasing number of "technocrats" (i.e.: professionals with no former partisan involvement possessing recognized expertise which is directly relevant to the role occupied, see McDonnell and Valbruzzi 2014), have been holding ministerial responsibilities. Only in the last three decades, moreover, in a context of general de-structuration of the Italian political landscape, the country experienced three fully technocratic governments, a record in a comparative perspective (Fabbrini 2015). Overall, scholars have found surprisingly high levels of citizens' support for their political involvement, even in spite of the austerity measure they implemented (Bertsou and Caramani 2020; Ortoleva, 2012). Yet, never have experts played such a significant role in Italy's decision-making processes as during the first wave of the Covid-19 pandemic, when it has been the first and most hardly hit European country, currently featuring the enormous and still underestimated

How to cite this book chapter:
Caselli, D., Mozzana, C., Piccio, D. R., & Saracino, B. (2024). No hero outside the hospital lane. Governmental Committees, Pop Star Experts and Conflicts of Expertise in COVID-19-ridden Italy. In: Premat, C., De Waele, J.-M., & Perottino, M. (eds.), *Comparing the place of experts during the first waves of the COVID-19 pandemic*, pp. 297–338. Stockholm: Stockholm University Press. DOI: https://doi.org/10.16993/bco.g.

number of over 50.000 victims. The pandemic highlighted a number of significant structural problems of the Italian political and institutional fields, such as the quantitative and qualitative problems of public administration and public services and the uneven regional fragmentation of the social and healthcare system, particularly evident for the latter, marked by the scarcity of doctors and (in some regional models) the centralization of most of the activities within hospitals at the expense of territorial care (Giarelli, Vicarelli 2020, Gimbe 2019). In this context, shortly before the public recognition of the epidemic outbreak, the government declared the State of Emergency on 31st of January and, at the beginning of February 2020, the central and regional governments instituted "techno-scientific committees" (Comitato Tecnico Scientifico, CTS in Italian), i.e. collective entities charged of working with the political authorities in monitoring the epidemiological situation and adjusting and updating the emergency legislation for the sake of public health. From then onwards, Italy faced a fast sequence of emergency measures until 8 March 2020, with the declaration of the first severe nationwide lockdown in the European continent. In that context, a multiplicity of different committees were actually formed, at different levels. Apart from the CTS, over 15 national level task forces composed by over 450 experts were established at different ministries (Capano 2020) to deal with the more specific challenges posed by the Covid-19 crisis to individual policy sectors. Focusing on the scientific and medical fields, national and regional CTSs represented and still represent to this day the official, albeit territorially fragmented, expertise on Covid-19. They have been instituted and recognized by the political authorities, with which they have nevertheless had a controversial relationship, spanning from complete political submission to scientific and technical knowledge ("we will re-open economic activities only when Science agrees") to the reclamation of the primacy of the political actors ("the scientists and experts are to serve the government and not the other way around") resulting in a process of politicization of the expertise (Caselli 2020; Pellizzoni 2011). In this respect, particularly interesting is

the recent construction and use of classification tools based on quantitative informational bases for assessing and defining local lockdowns: research shows the nexus between the cognitive and normative dimensions of policy making, as well as the process of politicization of expertise and depoliticization of politics (Mozzana 2019).

1. Introduction

The year 2020 will be remembered as the year dominated by the COVID-19 pandemic, but in Italy it will also be remembered as the year in which the map of political power was significantly redrawn. While a verticalisation of power in the hands of the executive took place, limiting constitutional freedoms in order to contain the spread of the virus, simultaneously a new set of experts emerged as a crucial source of authority. As we shall see in this chapter, throughout 2020 Italy experienced a mushrooming of expert committees, crisis units and task forces at different levels of the polity. The pervasiveness of expertise, moreover, went well beyond the official organs set up by the national or regional governments, as scientific experts burst onto the media sphere, becoming almost permanent guests on television shows. This in turn had an important impact on how the public perceives and evaluates experts.

Comparative analyses that focus on the way in which different countries responded to the COVID-19 emergency have unanimously stressed the importance of political and institutional contexts as key explanatory factors. Whether governments have proved able to maintain control over the situation and produce timely, coherent and effective policy responses to the crisis has been largely explained by the specific institutional assets and formal power arrangements of the individual countries. Overall, scholars have shown that countries characterised by political polarisation, a federal institutional arrangement, and weak administrative capacity – like Italy – have responded more slowly, chaotically and less efficiently (Capano et al., 2020; Jasanoff et al., 2020). While the complex and multi-level

institutional arrangements in Italy undoubtedly played a role in shaping the configuration of experts that emerged during 2020, in this chapter we selectively focus on the place of experts and the ways in which they interacted with politics. We do so through the lens of two opposite processes: the politicisation of science, when politics leads decision-making processes based on scientific facts; and the scientification of politics, when experts instead take over and exercise a political authority. Therefore, what has been considered as the chaotic handling of the pandemics in Italy may be explained in the light of the instable relation between science and politics, with frequent and abrupt changes in content and direction between the two. The chapter is structured as follows. In section 2, we briefly introduce the theoretical framework that we use as a guidance throughout the chapter. In section 3, we present the main features of the Italian political and institutional context at the time of the outbreak. Section 4 describes the changing relationship between expertise and political authority during 2020, based on the two processes of the scientification of politics and the politicisation of science. Against this background, we will analyse the shaping of a specific form of the scientification of politics through the use of pandemic indicators (section 5), the role of the media in promoting the politicisation of science (section 6) and the perception and evaluation of these processes by the citizens (section 7).

2. Theoretical framework

In general terms we define experts according to three core characteristics: the applied dimension of their knowledge; the "hybrid" nature of their identity (due to the fact that they share both scientists' reliance on scientific and systematic knowledge and lay people's dependency on other actors' demands and timeframes); and the structural forms of dependence that being experts produces in their relationship with lay people (Pellizzoni, 2011). These characteristics imply that strategies used by experts in both the production and dissemination of knowledge are highly critical for understanding the knowledge-power nexus. As Eyal (2021) states:

> they [experts] are given a contradictory mission. […] They are asked policy questions – what should be the global warming target? – but told to stick only to the 'science' and the 'facts.' They are asked to provide assessments of risk, which always entail – whether explicitly or implicitly – a value-laden choice between alternative scenarios with different distributive consequences for different parties, yet they are told to remain neutral.

Overall, the technical and the political are hopelessly intertwined, and there are no accepted standards for how they should interrelate (Oppenheimer et al., 2019). The scholarly literature has often paired expertise, and technocratic decision-making more generally, with depoliticisation. Critical scholars in particular have highlighted the fact that science and expertise are crucial on two levels: first, that of discursive depoliticisation, i.e. problem-setting and problem-framing that emphasise the technical dimension of an issue, obscuring the political dimension of the problem; and, second, that of governmental depoliticisation, i.e. the delegation of political issues to non-representative institutions in the name of their overwhelmingly technical nature (Flinders & Buller 2006, Hay 2007, D'Albergo & Moini, 2019). In other words, as decision-making power is placed exclusively in the hands of competent experts, the terms of the debate are no longer open to dispute based on different values and interests, but they become a technical and undisputable matter. Other commentators have produced a more nuanced picture, showing how science and technical competence can be the vehicle for both depoliticisation and politicisation, depending on the way in which the two dimensions interact. As Pellizzoni (2011) shows, the relationship between expertise and politics can lead to four different outcomes, depending on the source of the authority (whether politicians or experts), and on the degree of politicisation of the issue at stake (whether increasing or decreasing). Figure 1 summarises the four possible outcomes representing four different policy-making styles.

The way in which we are used to conceiving policymaking under 'normal politics', is a system of authority based on elected officials whose task is to put forward policies that are comprised of

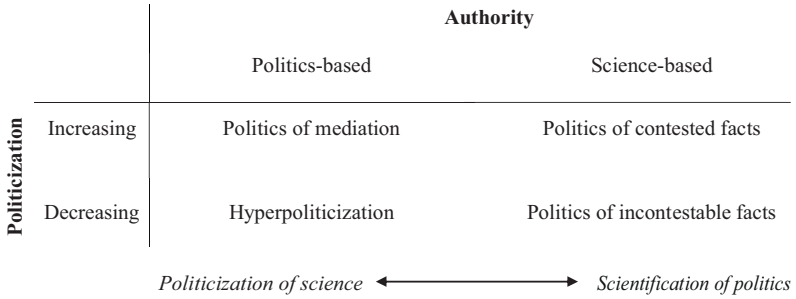


Figure 1. Policy-making styles.
Source: Pellizzoni (2011), as adapted by authors.

conflicting perspectives. This ideal-typical situation is labelled the 'politics of mediation' in figure 1. At the same time, a politics-based system of authority can also produce a situation of 'hyperpoliticisation', when social imperatives are imposed with no room for different values and interests to be expressed as the politicisation of the issues decreases. As science takes the lead, there are two possible outcomes. In a depoliticised context with little space left for different values and interests to be voiced, the policy-making style can be labelled the 'politics of incontestable facts'. However, when a science-based authority is challenged by an alternative science-based authority contesting the facts on the scientific ground itself, we are in the right upper quadrant of 'the politics of contested facts', where different scientific facts are debated and in conflict with each other on a very political issue. As we shall see in the following sections, not only does this typology contribute to a better grasp of the different moments and modes of interaction between experts and politicians over the course of 2020. It also fits well into the broader processes of the politicisation of science and the scientification of politics that we discussed in the introduction. All this must be combined with a focus on the role played by the media.

Since Rae Goodell's seminal work on visible scientists (1977), the role of scientific experts in public communication has become increasingly central due to changes in the media landscape as well as in the dynamics between science and society (Maasen

& Weingart, 2005, Cheng et al., 2008, Bucchi & Trench, 2014). In the past decades, social media have provided a platform for experts to engage more actively and directly in the public debate (Peters, 2014, Schiele et al., 2012). Discussions and controversies among experts that were previously confined to specialist communication contexts have become, at least potentially, accessible to general audiences (Gregory & Miller, 1998, Horst, 2013, Bauer et al., 2019). Not only that: nowadays, when talking about the public communication of science one has to bear in mind that we may be talking about at least two different things: a "routine", consensual and unproblematic trajectory, which can be described with a continuity model; and an alternative trajectory, represented by the processes of deviation towards the public level (Bucchi, 2010, p. 143).

In contrast to the traditional and diffusionist conception of the public communication of science (Hilgartner, 1990), and to the clear distinction between science and its dissemination, Cloître and Shinn (1985) identify four main levels within the process of scientific communication: the intraspecialist level, the interspecialist level, the pedagogical level and the popular level. With the continuity model, the two authors represent a cognitive trajectory for scientific ideas consistent with theories on the construction of the scientific fact (Latour, 1987). They describe the path from the intra-specialist level to the popular level as a sort of progressively narrowing funnel, along which knowledge loses subtlety and nuance and is reduced to a few elements to which certainty and incontrovertibility are attributed. The continuity model, however, describes an ideal flow of communication under routine conditions: in some cases – such as, perhaps, that of the COVID-19 pandemic – one can speak of a 'diversion' towards the public level, because the exposition of scientific ideas does not follow the funnel trajectory and passes directly to the popular level and then influences the specialist levels from there (Gregory & Miller, 1998). In cases of diversion, the public discourse of science does not simply receive what is filtered through the previous levels, but the public communication of science becomes the continuation of the scientific debate by other means (Bucchi, 2010, pp. 140–141).

3. Setting the context

At the time of the pandemic outbreak and until January 2021, the Italian government[104] was supported by a relatively broad parliamentary majority in the Chamber of Deputies (with a margin of over forty seats) and by a thin majority in the Senate (with a ten-seat margin). Government parties were at the time divided on a plurality of issues, and yet at the initial stages of the pandemic (February-March 2020) they presented a united front when dealing with the crisis. This was to change over the course of the year, as one of the government parties, Italia Viva, became increasingly critical of the measures introduced by the government. Italia Viva ultimately withdrew its support for the country's ruling coalition, creating a government crisis[105]. Additionally, the country was significantly polarised along the government/opposition divide, both at the elite and at the societal levels. The collaboration with opposition parties in dealing with the outbreak of the pandemic did not last long. From early April 2020 onwards, when the opposition parties voted against a decree law allocating the sum of 25 billion Euro to deal with the crisis[106], the government faced a strong and vociferous opposition especially from the two far-right opposition parties, the Lega Nord (LN) and the Fratelli d'Italia (FdI). They pointed to the slow, inefficient and too partial compensation provided by the government for the lost income of small business operators and contested the way in which the government handled the re-opening of travel within the country and of the economy as the emergency started to subside.

Further contributing to intra-government and government-opposition divides was the actual concentration of decision-making powers in the hands of the executive, and of the Prime Minister in particular. Indeed, one day after the World Health Organisation (WHO) declared that the COVID-19 outbreak was a public emergency of international concern (31 January 2020), the Council of Ministers declared a public health 'state of emergency'. The state of emergency (still in force at the time of writing) allows the government to act rapidly in response to the ever-changing epidemiological situation by issuing specific emergency Prime Ministerial decrees (Decreti del Presidente del

Consiglio, DPCM)[107]. The regular course of parliamentary politics, therefore, very soon lost touch with core decision-making on the pandemic. While allowing the government to act rapidly in managing the crisis, the 'state of emergency' exacerbated the political polarisation of the country, with the opposition demanding the right to a greater say in the decision-making process[108].

An additional aspect that is crucial for understanding the country's management of the pandemic as well as for explaining the configuration of experts that we will present in the following sections, is the multi-level governance system of the Italian state. Divided into twenty regional governments with significant levels of autonomy, specifically with regard to health care matters, Italy's institutional configuration requires a process of collaboration and coordination between different institutional levels of the polity. If the central government has legislative supremacy and is responsible for the principles of the national health system, then the regional level is responsible for the organisation, provision, and sustainability of health services at the local level: a situation that "makes the concrete exercising of state supremacy in an emergency dependent on the regional legislation for its implementation" (Capano, 2020, p. 328). This complex institutional arrangement, still undefined in so many aspects (Cammelli, 2020, Di Giulio, 2020), led to a pattern of continuous tensions and overt conflicts between the national and regional levels, with regional governments becoming increasingly more vociferous in claiming their right to be involved in the decision-making process in the pandemic emergency and in the issuing of decrees, often in contradiction with national level decrees (Baldi and Profeti, 2020).

As mentioned above, this ongoing conflict over competences, with mutual accusations, buck-passing and quarrels about the jurisdictions of the national and regional levels, played a key role in fueling chaotic dynamics" in the management of the pandemics. It also contributed, as we shall see, to the involvement of an exceptionally large number of experts at the different levels of the polity, who produced conflicting recommendations and guidance and who had a changing relationship with the political authorities (see sections 4 and 5) and, finally, who contributed to build in the

media a highly polarised debate that weakened the public trust in scientific expertise (see sections 6 and 7).

4. A year of experts: between the scientification of politics and the politicisation of science

As the state of emergency was declared, not only the executive but also a number of previously existing institutions increased their power, forming new commissions composed of experts from different levels of the polity. Based on the typology presented in section 2, we will show how political authority and this plethora of expert-based commissions have related to each other and how their interaction has changed significantly over the course of the pandemic. When considering the period from 31 January until the end of December 2020, we can identify five main phases.

31 January – 8 March 2020. One of the first measures taken by the government to respond to the pandemic emergency was the appointment of the Head of the Civil Protection Department[109]. The first decree issued by this body established a Technical-Scientific Committee (Comitato Tecnico Scientifico, CTS), i.e. a collective entity – chaired by the Head of the Civil Protection Department – whose task was to monitor the epidemiological situation and adjust and update the emergency legislation for the purposes of public health[110]. On 4 March 2020, the Civil Protection Department issued another decree establishing regional-level 'crisis units' with the aim of coordinating the action, control and communication between the different levels of the polity[111]. Each regional crisis unit was in turn flanked by local level task forces and scientific committees. The Civil Protection Department and the CTS, both strictly linked to the Prime Minister, became the key actors of the pandemic governance as they were responsible for over 80% of appointments to COVID-19 emergency management positions in 2020. Even more importantly, they have the power to appoint "implementing bodies" ("soggetti attuatori"), which are responsible for achieving specific goals. Furthermore, they have been authorised to act outside ordinary normative and financial constraints. Most of the experts involved in these institutions and the COVID-19 Task Forces had notably been appointed to their

public institutional role by previous governments[112]. Within the CTS we find a mix of public managers and senior civil servants, top medical professionals and scientific experts. Its composition primarily followed political and bureaucratic criteria, whereby one's institutional position played the key role.

Interestingly, despite the legitimacy that the CTS managed to acquire as a science-based authority in the very short time since the beginning of the pandemic, political authorities – the national government as well as the regional government of Lombardy – opposed the CTS recommendation to create a "red zone" (effectively a lockdown) in two small industrial villages to the north of Bergamo (Nembro and Alzano), which had been severely hit by the pandemic in its very early stages. In other words, the expert-based politics of facts introduced by the CTS was calling for a lockdown when there was still very little data for SARS-COV2, but this call was challenged by the political authorities, who wanted to avoid damage to the economy: a severe pause in economic activities would have resulted in too much economic loss. This case of hyper-politicisation did not, however, last long and it was soon followed by the implementation of the first regional, and then nationwide, lockdown in Europe.

9 March – 15 April. The implementation of the national lockdown on 9 March 2020 ushered in a second phase, which lasted until the second half of April. This period was marked by the highest rate of new infections, ICU bed occupancy (4,068 on 3 April 2020) and deaths (969 on a single day on 27 March 2020). This was also the phase in which scientific authorities took the lead, with the strengthening of a science-based politics of incontestable facts. In this phase, no single political or institutional figure dared to contradict or even inquire about the recommendations of the CTS. This situation is well captured by two public statements by important officials: the President of Lombardy (the most severely hit region), who stated that his government would re-open the shops and restaurants "only when Science will allow such a decision";[113] and the Minister of Regional Affairs, who asked the experts and scientists to "give irrefutable truths and not three or four different opinions for each issue" because "without clarity, there is no science"[114].

Consistent with the central role of experts and expert committees, this phase was also marked by the establishment of a new institutional role: after the CTS and the Civil Protection, an "Extraordinary Commissioner" was appointed by the Prime Minister, at the head of a task force of 32 members "for the implementation and coordination of the required measures for containing and confronting the epidemiological emergency" (DPCM 17/03/2020, art. 122). Moreover, in this phase a number of task forces and technical committees for issues other than medical expertise were established, to plan strategies for the social and economic re-opening. Hence, more than 450 new experts were appointed in different ministries to deal with the more specific challenges posed by the COVID-19 crisis for individual policy areas, including economic development, education, data and technology, challenging fake news, and gender equality (for a critical review, see Galanti and Saracino, 2021). This was the phase of the experts, where science and expertise become the bearers of incontestable facts in a sort of depoliticised context (Pellizzoni, 2011), where the lead for taking action was left to technicians and where there was little space left for different values and interests to be voiced (see also Camporesi et al., 2022).

Mid-April-mid-June. From mid-April 2020, with the pandemic emergency abating, the political and public debate started to revolve around the country's economic recovery. At this point, politics appeared to take over from science-based judgements. This phase is characterised by a purely symbolic use of experts by the political authorities, in which the discursive reference to scientific actors and tools was not followed by the actual consideration of their suggestions. This became clear when, in order to ensure that the return to 'normality' would not produce a second wave of epidemic, the CTS explicitly recommended a three-week trial before taking a final decision to reopen the country. Despite this recommendation, the government decided that after only two weeks the trial had worked, in the absence of any scientific data to support such an evaluation and without taking into account the fact that there is a delay in the appearance of SARS-COV2 symptoms, with an incubation period that can take up to three weeks to reach the peak of severe infection. These two episodes

show the emerging hyper-politicisation of the appeal to economic imperatives, with a strong focus on the recovery as well as the merely symbolic use of expert groups by the political authorities. In this climate, counter-expertise rhetoric gained traction, contesting both the CTS and the government and proclaiming the "clinical death of the virus", as a well-known anaesthetist-resuscitator (see section 6) said during a television debate at the end May 2020. At this point, the scientification of politics seemed to give way to the politicisation of expertise, a process that would become more radical in the following months.

Mid-June-Mid-October. From mid-June 2020, the government declared the start of a new phase, with the reopening of all industrial and commercial activities and the launch of a contact-tracing App. In this phase, the politicisation of expertise reached its peak. In those weeks, members of the opposition organised two significant initiatives: on 27 July 2020 the Library of Senate hosted a conference with politicians, prominent scientific experts and intellectuals affirming that the pandemic was over and praising the relaxing of all emergency measures[115]. On the following day, the press conference room of the Chamber hosted a similar meeting, with speakers affiliated to the association "L'eretico" ("The Heretic") claiming the existence of a global project for imposing a "hygiene dictatorship" and demanding the end of all emergency public health measures[116].

Additionally, the independence and transparency of the CTS was questioned from two different positions. First, the government was harshly criticised for keeping secret the minutes of CTS meetings: after a long legislative battle (started in April), in September the Fondazione Einaudi, a private foundation promoting neoliberal economic policies, obtained access to the CTS meeting minutes[117]. From that point onwards, CTS meeting minutes are published with a delay of 45 days on the Civil Protection website. Second, the WHO representative on the CTS, Dr. Guerra, has been at the center of a highly critical media scandal (which also became part of a judicial investigation, still in progress) for the immediate removal from the official website of a freshly released and fully approved WHO report highlighting the "lack of preparation" and the "improvisation" that the Italian government had

shown since the pandemic outbreak (WHO 2020). In particular, the report emphasised that the national pandemic plan had not been updated since 2006, implicitly pointing to the responsibilities of the highest figures in the Ministry of Health over the last 14 years, including Dr. Guerra himself. Media investigations suggested that Dr. Guerra was locked in a conflict of interest and – at the same time – was a crucial actor in the international strategy of the Ministry of Health in overlooking the lack of preparedness in the national health system. From this moment onwards, the politicisation of expertise that had emerged in the previous months became the general context from which the subsequent phases developed: see, for example, the opposition leader asking for a new CTS, elected by Parliament, at the end of October 2020. At the same time, the increase in the infection rate, which started in August, prepared the way for the return of medical expertise to the forefront of public debate.

Mid-October – End of December 2020. From October onwards, medical expertise had returned to the forefront, due to the "second wave" of the epidemic (40,092 new infections on 13 November), which led to the closure of certain commercial activities, and the first, positive, results from vaccine trials. This second appearance of the "politics of incontestable facts" is nevertheless very different from the first because it co-existed alongside an increasing trend for a politics of contested facts as well as contradictory trends of hyperpoliticisation, based either on public health or economic performance imperatives. In this context, at the beginning of November 2020, the set of indicators that had been elaborated by the CTS in April for monitoring regional trends become the basis of a three-colour classification system of the Italian regions developed by the government for defining different regional emergency regimes according to the epidemiological situation (see section 5). Finally, we note that the relationship between the government and expert groups and task forces was among the key questions raised by Italia Viva (a junior government coalition party) during the crisis, which led to the end of the Conte II government in the first half of February, with Italia Viva criticising the PM for his "excessive reliance" on "experts" at the expense of political parties and the Parliament.

5. The scientification of politics: the Italian set of indicators

So far, we have dealt with the double track of the scientification of politics and the politicisation of science, and its ambiguity and dynamics during the COVID-19 pandemic government. This section particularly focuses on the scientification of politics and in particular on another 'type' of expertise, not strictly linked to people or Committees but to public instrumentation. We will address it with reference to the actual tools that have been used to build models of action and intervention for COVID-19 pandemic management, i.e. the set of indicators that defined the confinement regimes of the Italian Regions. Since March 2020, the use and interpretation of certain indexes and indicators has become an almost daily matter for Italian citizens. In this respect, there was a massive use of quantitative data from the outset, which aimed both to provide information to the competent authorities in order to have a more or less precise snapshot of the situation, and to inform the public about the progress of the pandemic. This situation fits perfectly into the process of quantification and datification of contemporary life, which is rooted in the consideration of numbers as transparent, synthetic, objective and neutral tools for assessing situations, territories and people (Espeland and Stevens, 2008, Porter, 1995). But let us start at the beginning. In April 2020, a month after the official beginning of the pandemic, the CTS elaborated a set of 21 indicators to monitor national and regional trends for the spread of COVID-19. It aimed to "collect the data and better understand their quality, in order to achieve a rapid risk classification in the most correct way possible in consultation with the IIS (National Institute of Health) and the Regions", as the 30 April Decree of the Ministry of Health states. This determined the healthcare risk monitoring activities, which were strictly connected to the previous DPCM enacted on 26 April. Its function is to monitor the spread of the pandemic in order to assess and decide on the type of mitigation measures to be used on the basis of a risk coefficient of the health threat. The collected data are analysed through an algorithm which defines a matrix of risk, comprising a total of 5 different situations to

be envisaged (from very low to very high risk). In the case of medium to very high risk situations, the Decree stipulates a review of the data conducted by the Ministry and the Region in order to investigate the local situation and decide upon the measures to be implemented. Thus, initially the system itself did not directly define the mitigation measures to be taken, nor did it regulate the pandemic response.

The situation changed at the beginning of November 2020. Given the diversification of the virus spread within Italy and the different capacities of local healthcare systems (Casula et al., 2020), the government this time acted with a different strategy that established local emergency regimes according to the epidemiological situation. These are defined on the basis of a four-color classification of the Italian regions developed by the government, each corresponding to a different set of restrictions decided by an algorithmic calculus that considers the values of all the 21 indicators and that of the R_t index[118]. The link between numbers and policies here takes interesting, even unusual, forms: the system of 21 indicators, combined with the R_t index[119], became the tool for regulating territorial lockdowns and openings on the basis of the epidemiological situation, with a shift from a normative (i.e. related to value-based choice, in this specific case the choice of defining high/low-risk zones) to a cognitive dimension (i.e. related to knowledge, in this specific case the data and the system of indicators and the Rt index used to monitor the pandemic situation) in decision-making. Soon, a State-Regions conflict arose precisely because of the decision about the indicators: when the Government chose to use the 21 indicators to define the regional risk profiles, the "Conferenza delle Regioni e delle Province Autonome" (Conference of Regions and Autonomous Provinces) released an official statement on 17 November, in which it proposed a new way for defining the risk profiles through the consideration of only 5 out of the 21 indicators[120]. The proposal was officially justified by the need to move towards a "simplification of the system", in order to provide citizens with greater clarity. Indeed, the pressure exerted by certain economic groups that were particularly affected by the lockdowns (restaurateurs, retailers, etc.) on the regional Presidents to ease the measures led them to

ask for a simpler system. More specifically, the change proposed by Zaia and Toti, the Presidents of the Veneto and Liguria regions and members of the Conferenza Stato-Regioni, did not concern the system as a whole, nor the possibility of including indicators that would take into account different dimensions of those already defined, such as economic trends or the psychological wellbeing of the population, or even the existence of local services and interventions for social emergencies: the indicators chosen by the Conference were a selection of those already monitored, those considered easier to read and collect. Although several doubts have emerged with regards to the quality and methods of data collection (Zitelli, 2020), the politics of the indicators has been taken for granted, as was the monitoring of just a specific dimension of the COVID-19 pandemic, i.e. that related to the capacity of the health care systems to cope with the disease.

Interestingly enough, both at the national and regional level, governance by numbers has proved to be hegemonic: in both cases data are indeed considered as a form of neutral and indisputable expertise in a process of scientification of politics where numbers are used by politics as a form of problem-framing, the technical dimension of the instrumentation prevails and the political dimension is obscured. Such a shift produced an automatic definition of the risk zones through the principle of the non-debatability of epidemiological data and expert knowledge. In this way, the political decision-making process became blurry and the conflict was transferred to a different level, that of the definition of indicators with the use of a less political and more technical debate and vocabulary, which led to a politics of incontestable facts (Pellizzoni, 2011). Politics thus decided to shift the decision-making to an almost automatic and deterministic tool, cloaking an eminently political process in science and creating a politics of incontestable facts. The indicator system, originally elaborated with the aim of monitoring the pandemic risk, "naturally" became the way for regulating the risk itself, with the subsequent disappearance of decision-making processes and of the political debate around them. Through the use of data and their algorithmic composition (in a process not even clearly explained in the official documents), human judgement was removed in favour of

the evidence of numbers (Porter, 1995). This, however, is followed by the rejection of public deliberation on the conventional foundations of measurement and data production (Diaz-Bone, 2019). In this case data are conceived as a "true representation" of a pre-given social reality and are presented as a non-debatable argument that automatically decides. Nonetheless, the disappearance of human beings in indicators and algorithms and the crystallisation of power in numbers seem to act as a counterbalance and as a highly political argument in response to the great personalisation of expertise that emerged during the early stages of the pandemic: as if to clean up and contain the loud and different positions and the media hype observed in the early stages of the pandemic (see section 6), in order to restore sobriety to the process.

To sum up, governance by numbers has important consequences, including the extreme relevance of experts as well as the politicisation of their knowledge and the potential for them to influence the shaping of the political agenda. In the Italian case, the use of a quantitative instrumentation grounded in one discipline, epidemiology, led to the silencing of most of the non-epidemiological aspects of the pandemic: although the situation was shown to be a syndemic rather than a pandemic, i.e. a situation "characterised by biological and social interactions between conditions and states, interactions that increase a person's susceptibility to harm or worsen their health outcomes" (Horton, 2020), only the economic issue has at times – often expressed in numerical terms – been able to limit the mechanical authority of epidemiological numbers. At the same time, by passing off choices that are eminently political as technical decisions, the problems became blurred, difficult to challenge and debate. What numbers did in this case was to govern, at the same time making it difficult to recognise this process, and therefore to amend the government. In the Italian case, numbers seemed to reinforce the anonymity of both technical and political processes and moved the decision-making process to another level, formally technical but essentially political. In this process, they narrowed the public debate about options and choices on mitigation measures because, despite their apparent neutrality and clarity, their definition remained a complex process which only "experts" have access to.

6. The politicisation of science: experts in the media

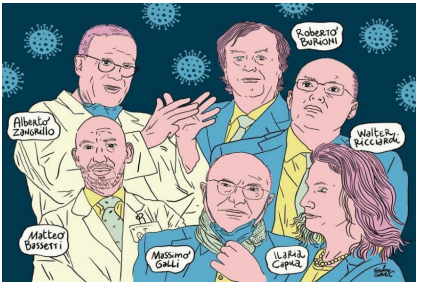
Politicisation of science has not only been fuelled by the political-institutional choices summarised in section 4, but also by the way in which political and scientific issues have been debated in the media and especially – as we will show in this section – on television. The COVID-19 pandemic has indeed been characterised by an unprecedented presence of scientific experts in media coverage and exposure of the public to the advice of experts.

Since the very beginning of the emergency, communication has played a key role both in framing the issue and in providing citizens with relevant information and instructions on how to minimise the risk of contagion. Information was available from a variety of institutional sources (WHO, National Government, Civic Protection Agency, National Institutes of Health, Local Authorities, Medical Staff) and through a variety of media (radio, television, newspapers, institutional online channels, social media). In this section we will discuss the presence of experts in the Italian media and the role of the media in promoting the politicisation of science.

Unlike in other countries (Metcalfe et al., 2020), from the very beginning of the pandemic the Italian media favoured the emergence of a plurality of experts with different perspectives and expertises on the pandemic, as virologists, epidemiologists and infectiologists, as well as the notable appearance of "pop star experts". The Virologists' sticker album (instead of football stickers) that circulated on social media during the lockdown period in Italy and the cartoon published in a popular newspaper in late October 2020 give an idea of both of the high number of scientific experts that characterise Italian public communication and of the extent to which they have permeated the social imaginary (Fig. 2).

After the outbreak of the pandemic, through the media, numerous experts became familiar figures to Italians. Some held official positions, such as the President of the Istituto Superiore di Sanità, Silvio Brusaferro, the President of the Consiglio Superiore di Sanità, Franco Locatelli, and the Director General for Health Prevention at the Ministry of Health, Giovanni Rezza. Others were assiduously approached by the media in search of expert

Source: Huffington Post, 16 May 2020. Licence: CC BY-NC-ND.



Source: Domani, 25 October 2020. Licence: CC BY-NC-ND.

Figure 2. Cartoons on scientific experts.

figures in addition to the official voices. This second group was asked to comment on the evolution of the pandemic and containment measures as well as to offer recommendations to a public concerned about the serious health situation. Most of them were media neophytes, mostly unknown to the general public, with the exception of Ilaria Capua, an internationally renowned scientist and former Member of Parliament of the Italian Republic, and Roberto Burioni, already known as an online science populariser and described as an "internet savvy advocate for science" in a Science article (Starr, 2020).

The media themselves have proposed and compiled various rankings of the presence of scientific experts. One of the most frequently quoted is based on a study conducted on more than 1,500 sources of information, including local and national newspapers and magazines, the websites of major magazines, radio stations, television and blogs, which monitored the presence of experts in the Italian media, drawing up a ranking of the most-quoted experts between 21 February (the day the news about Patient 1 broke) and 20 April, and then again in October 2020.

According to the top ten list on mediamonitor.it, during the first months of the emergency the most quoted expert in the media was the President of the Istituto Superiore di Sanità, Silvio Brusaferro. Brusaferro was the protagonist of the daily Civil Protection press conference, updating audiences on the number of contagions and hospitalisations. After him came Walter Ricciardi, special advisor to the Ministry of Health on the epidemic and member of the WHO executive, and Roberto Burioni, virologist at the San Raffaele hospital. Next was Massimo Galli, chief infectologist at Milan's Sacco hospital, while in fifth place came the US immunologist Anthony Fauci, who at the time was director of the US National Institute of Allergy and Infectious Diseases and scientific advisor to President Donald Trump on the Coronavirus emergency. Franco Locatelli, President of the Consiglio Superiore di Sanità, was sixth, followed by Giovanni Rezza.

According to the same source, in the ranking of the most quoted experts in the media between 21 February and 20 April 2020, were also Ilaria Capua, virologist and Director of the One Health Center of Excellence at the University of Florida, and Fabrizio Pregliasco, Medical Director of the IRCCS Istituto Ortopedico Galeazzi in Milan. The list is rounded off by Andrea Crisanti, a virologist at the University of Padua, and Pierluigi Lopalco, epidemiologist at the University of Pisa and coordinator of the Coronavirus emergency in the Puglia Region. If we consider only radio and television broadcasts, Walter Ricciardi was in the lead, followed by Franco Locatelli and Massimo Galli.

In October 2020, virologists, epidemiologists, and infectiologists remained prominent in the media, providing comments and recommendations[121]. According to Mediamonitor, six months after the first monitoring, Walter Riccardi, Andrea Crisanti and Massimo Galli dominated the scene. While Ricciardi and Galli each gained one position and thus confirmed their popularity, Andrea Crisanti jumped from tenth to second place, partly because of his conflicts with the president of the Veneto Region. On the other hand, Silvio Brusaferro, President of the Istituto Superiore di Sanità, lost his first place in the ranking, due to the suspension of the daily Civil Protection press conference, and he dropped to fifth place. The

same fate befell Giovanni Rezza, another protagonist of the daily Civil Protection press conference, who fell seven places to fourteenth in October. Roberto Burioni's media visibility also fell significantly, from second to twelfth place. Franco Locatelli and Ilaria Capua's visibility declined less, with both dropping three places to the ninth and eleventh positions respectively.

In addition to Crisanti, Matteo Bassetti, Director of the Infectious Diseases Clinic at the San Martino Hospital in Genoa, climbed up the list from twelfth to sixth position. The rankings of Fabrizio Pregliasco and Pier Luigi Lopalco also rose. In May 2020, Pregliasco was appointed scientific supervisor of the Pio Albergo Trivulzio in Milan – a nursing home for the elderly that has received much attention due to the number of deaths recorded there. In October 2020, Lopalco was appointed counsellor for Health and Welfare of the Puglia Region. Pregliasco climbed five places to number four, while Lopalco moved up from eleventh to seventh place. The mediamonitor.it ranking also includes new names, such as: Nino Cartabellotta, president of the GIMBE Foundation (a health policy think tank); Antonella Viola, immunologist at the University of Padua; and Alberto Zangrillo, head of Intensive Care at San Raffaele in Milan and personal physician to Silvio Berlusconi. In October 2020, the ranking of appearances of experts limited to radio and television broadcasters in the previous 30 days saw Walter Ricciardi in the lead, followed by Andrea Crisanti and Fabrizio Pregliasco.

As a further indicator of their near-constant presence on Italian television, experts have even become the subject for articles by entertainment and lifestyle journalists, emphasising their personalities and assigning them report cards. In a newspaper article published in November 2020, for example, a journalist notes that the experts are spreading in an epidemic of presenteeism that infects morning, afternoon and evening television programmes and that each one has their own different approach to television, more or less strategic in terms of their image, while each expert also has their own fanbase. The journalist then asks: which expert penetrates through the screen the most?[122] According to this journalist, Roberto Burioni ranks first because of several advantages he enjoys over the others. He is the "guest sommelier", because

he rarely takes part as a regular guest on only one programme shown on one of the public service networks, and he is divisive: already well-known before the pandemic, his clear media positions have generated both consensus and dissent among public opinion over the years. Matteo Bassetti, on the other hand, is "ubiquitous, charming and calming". Capable of racking up countless guest appearances on competing networks and broadcasts, he racks up statements aimed at calming tempers ("the virus has been exaggerated", "talking about lockdown only frightens people", "I say no to terror"). His statements are often against the tide and it is no coincidence that Matteo Salvini (leader of the opposition to the Conte II government) admires him. Alberto Zangrillo is the "celebrity virologist" and has, according to the journalist, an impeccable stage presence: "perfect television timing, decisive intonation, imperturbable posture with folded arms, a sly and confident smile". He was the first Italian expert to be mimicked by a comedian. Massimo Galli is the "wise old man": prudent and severe at the same time, he smiles rarely and constantly reproaches journalists, who according to him always ask him the same questions, the public and also politics. Ilaria Capua is "unfriendly, obnoxious and proud to be so; in a single word: irresistible". In her speeches she makes constant calls for individual responsibility and, according to the journalist, does exactly the opposite of what everyone else tries to do on television: she says everything people don't want to hear. Finally, Andrea Crisanti is "the least TV-like of them all": he interacts with his interlocutor with a vague air of condescension, he never looks into the camera, he does not seek empathy with the viewer, and he does not care if in his utterances he sometimes even uses dialect. Of course, given this plurality of personalities who have become regular guests on talk shows and in the infotainment industry it is of no surprise that they often disagree one with another and they often have vivid quarrels. The quarrels increase the personalisation and spectacularisation of the scientific experts in front of the public and the plurality of opinions also means that no single and clear message is conveyed to the population.

The quarrels are fuelled by the experts' appropriation of media space, which in the past was the exclusive domain of the media-political relationship, and by the tendency of journalists

to present scientific issues as a political debate, with the equal-time rule (Tipaldo 2019).

The Italian media have a predisposition to polarised narratives (Hallin and Mancini, 2004). Research showed that the press participated in the management of the emergency by supporting the decisions of the institutions in the first phase, but that then, in the following phase of "living with the virus", in which the economic and social implications of the pandemic became more evident, a more conflicting narrative emerged (Mazzoni et al., 2021). Experts invited on the media were assigned to a dual function: on the one hand, that of journalism "at the service of the community" providing information and recommendations; on the other, that of the animated spectacle of debate and divergent opinions especially on potentially controversial issues (Lorenzet 2013).

Brusaferro, Locatelli and Rezza have shared the label of official expert; but at the same time, many other scientists without an institutional role at the national level have been hired by newspapers and infotainment programmes. The logic of the Italian infotainment system sees the talk show as the protagonist of television schedules (Novelli 2016): the various programmes, often in direct competition with each other, need a certain number of guests to get on air and often compete with each other to the point of offering fees in order to secure them. Scientists without official roles in the pandemic governance were selected by the media for their adaptability and predisposition to the broadcast format, which intentionally predisposes participants to confrontation. After a year of the pandemic, the public communication appears so confused that a journalist in the pages of Italy's most widely read daily newspaper even went as far as to ask the scientific experts to stop arguing on television. He listed a series of opposing views expressed by the experts and the not very flattering reciprocal comments[123]. Here are some examples:

- On live television, Massimo Galli claimed that his hospital department "is flooded with new variants" and that he agrees with the need to consider a new strict lockdown; Fabrizio Pregliasco shares his alarm but believes that "socially it would be too strong a blow".

- On 20 November 2020 Andrea Crisanti declared: "normally it takes five to eight years to produce a vaccine; for this reason, without available data, I would not have the first vaccine if it arrived in January". On 2 January 2021, however, and on live television from the hospital where he works, he was vaccinated.
- Marco Bassetti claims that "Ilaria Capua is a veterinarian, she can't talk about vaccines". Alberto Zangrillo then harshly criticises Massimo Galli's opinions: "how cool it is to save human lives, while jackals who have never held the hand of a sick person, shoot bullshit on television".

7. On the other side of the screen: the confusion of citizens

How has everything that has been described so far about the situation in Italy been perceived by the citizens? The *Observa Science in Society Monitor* has been monitoring opinions and attitudes toward science and technology in Italy since 2003[124] and a specific focus on the pandemic time has been carried out throughout three different surveys in 2020. The first one was conducted between 3 and 10 March 2020, interviewing 1,002 subjects. The total number of cases was 979 after weighting in order to make the sample structure identical to the Italian population in relation to the variables of gender, age and education level. The second survey was conducted between 2 and 9 April 2020, interviewing 1,048 subjects (1,029 after weighting). The third survey was conducted between 21 and 30 October 2020, interviewing 1,001 subjects (991 after weighting). In all three surveys, data collection was done through Computer Assisted Telephone Interviewing for 30% of the sample, and through Computer Assisted Web Interviewing for the remaining 70%. The aim of the three surveys was to find out about Italian citizens' relationship with information and their trust in sources, their judgement on the work of those involved in managing the emergency, and to explore the role of science and scientific experts.

The *Observa Science in Society Monitor* has been monitoring, with the same questions since 2007, exposure to science via the

television, press, internet and radio. Since 2015, it has also investigated the viewing and sharing of posts, images or videos dealing with scientific information on the most widely-used social media (Bucchi & Saracino, 2020). In recent years, television has been the most widely-used media used in Italy to access science-related content, followed by the daily press, websites and blogs, magazines and the radio. However, the usage and sharing on social media of content relating to science and technology has increased significantly.

As far as the pandemic time is concerned, the data show that between 3 and 10 March 2020 most Italians stated that their sources of news about science were mostly television and/or radio news broadcasts (52%). Next came national institutional websites, such as that of the Ministry for Health, the Department for Civil Protection, and regional or municipal websites (20.5%). Only a minority obtained their main information from social media (7%) (Fig. 3). While television and/or radio news broadcasts were the main source of Coronavirus information relating to prevention measures, trust in institutional sources was high: the recommendations provided by ministries and local institutions were the most trustworthy sources (41%). Next came one's own family doctor (28%) and television and/or radio programmes (17.5%). Less than 5% of Italians mentioned relatives and friends as the most trustworthy source, and even fewer relied primarily on the daily press, internet forums or social media posts (Fig. 4). Concerning the work of the different actors involved in the management of the emergency evaluated by the citizens, the most positive judgement is for the Civil Protection Department, followed by local governments and WHO, while evaluations are less positive for the National Government and the media (Fig. 5).

One month after the first survey on information about the pandemic, two-thirds of Italians mainly followed television and/or radio news broadcasts (Fig. 2). The number of those who relied on news from the online channels of national institutions like the Ministry for Health, the Department for Civil Protection, and Regional or Municipal websites decreased (15%). Daily newspapers remained stable, while there was a further reduction in the percentage of those who relied on social media posts or on their family doctor.

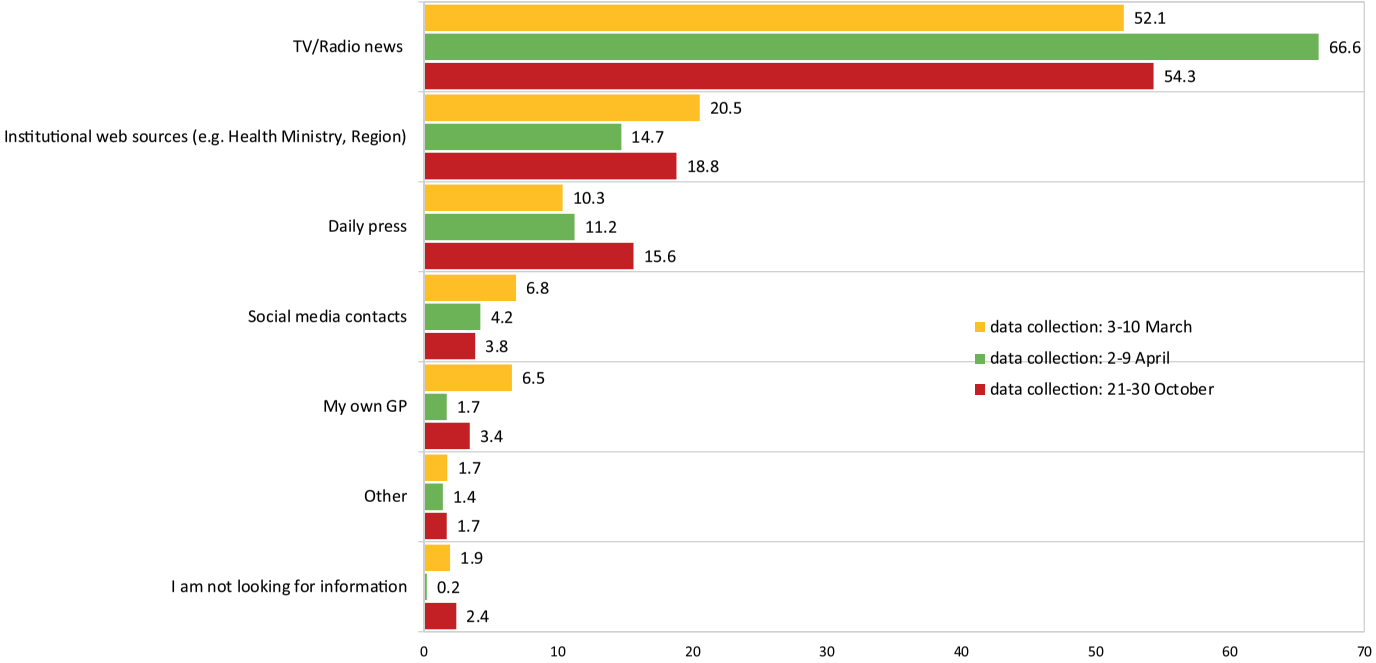


Figure 3. Where do you mainly look for information about COVID-19? (%).

Source: Observa Science in Society Monitor (n March 2020=979, n April 2020=1029, n October 2020=991). (Licence: CC-BY-NC-ND).

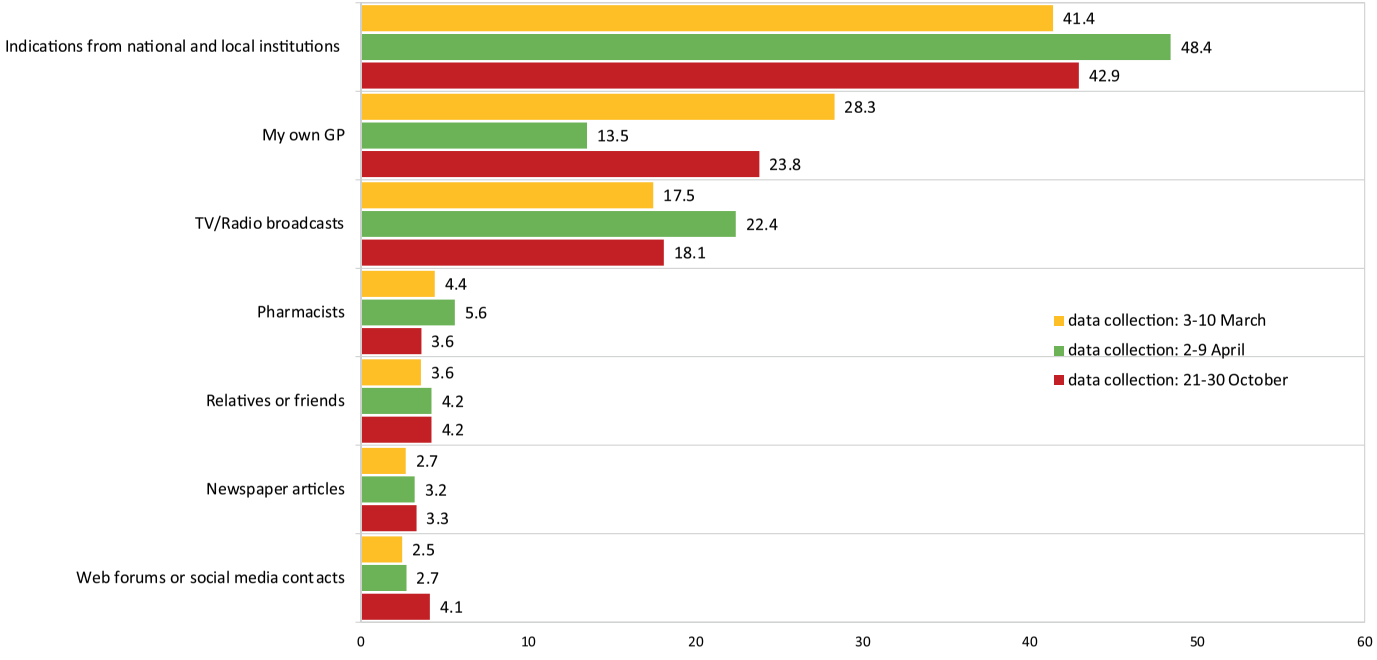


Figure 4. Which of these sources do you trust most for the measures to avoid infection? (%).

Source: Observa Science in Society Monitor (n March 2020=979, n April 2020=1029, n October 2020=991). (Licence: CC-BY-NC-ND).

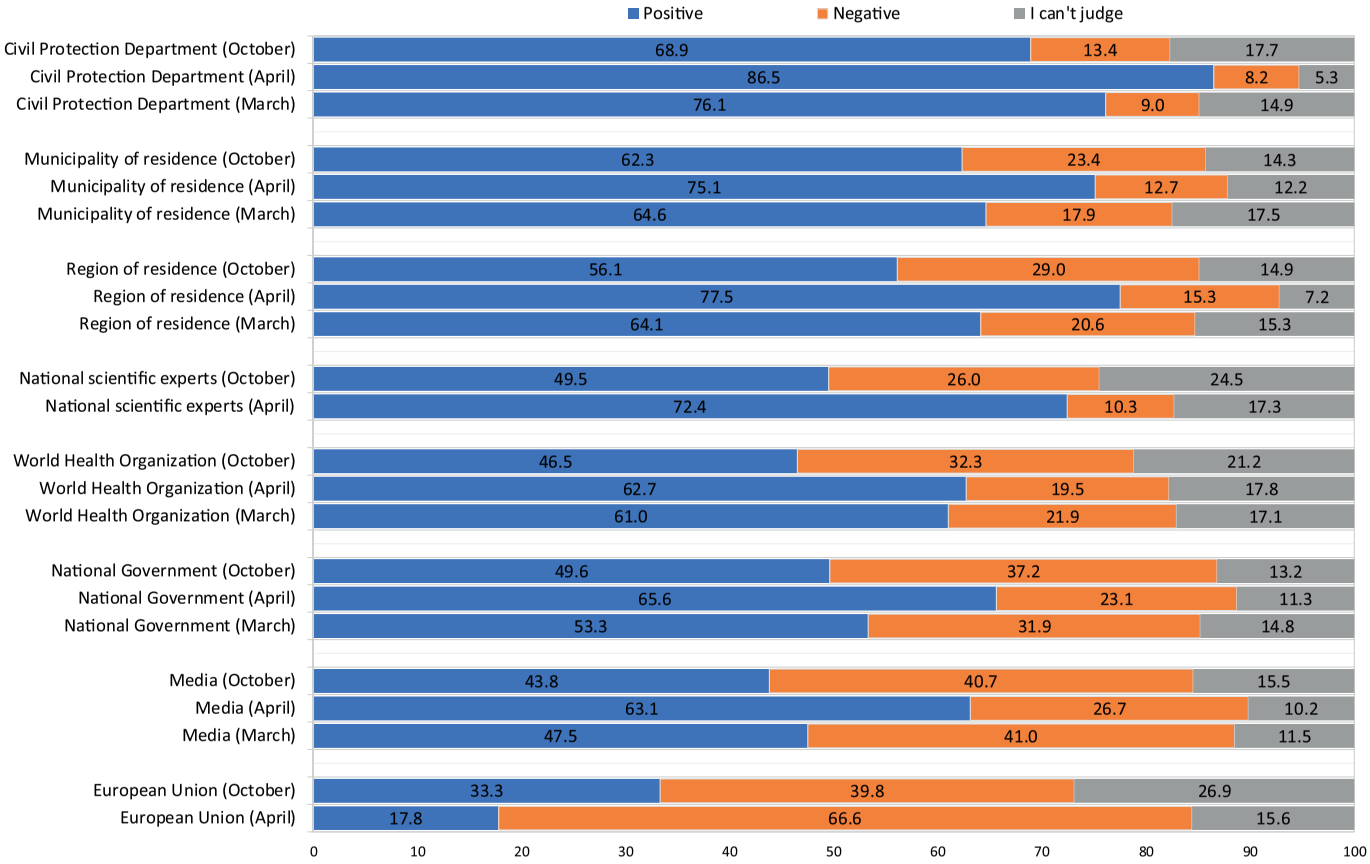


Figure 5. How do you judge the work of the following bodies in the management of the COVID-19 emergency? (%).
Source: Observa Science in Society Monitor (n March 2020=979, n April 2020=1029, n October 2020=991). (Licence: CC-BY-NC-ND).

Regarding the precautionary measures that were to be adopted, compared to the beginning of March 2020, trust in national and local institutions had strengthened, and there was also a slight increase in the role of television and radio (where information campaigns had increased). In this case too, the role attributed to information provided by one's family doctor dropped significantly, but this may be because the development of the emergency in some circumstances made it more difficult to access information from them (Fig. 3).

The April data collected by the *Observa Science in Society Monitor* allow us to analyse the perceived role of science and scientific experts, giving some insights on how this process of scientification of politics and politicisation of science has been perceived by citizens. Expectations for overcoming the pandemic thanks to research are extremely high – only 3% of respondents did not believe that scientists will be able to find a solution – confirming the trust that Italians place in science as reported over the years by Observa (Bucchi & Saracino, 2020). However, the communications role of scientific experts in this emergency was judged more critically.

In the ranking of positive opinions about the work performed by different actors during the emergency, scientists were ranked fourth, after the Department of Civil Protection, municipalities and regional bodies (Fig. 4). This opinion seems to be linked to modes of communication. Public opinion is quite divided on the communications of scientific experts. Only one Italian out of three gave a clear-cut positive opinion. Almost one respondent out of two believed that the diversity of advice provided by experts had caused confusion (48%) and a further 8% recognised the merits of scientific experts but judged their communications skills negatively, showing the impact of the contradictory relation between science and politics as presented in and fuelled by the media. Another 11% of the population expressed the wish that, in order to avoid confusion, scientific experts would share their points of view confidentially only with institutions and policy makers (Fig. 5). About a quarter of the respondents over the age of 60 and those with low levels of education thought that it would be better if the experts provided their advice confidentially only to

the institutions. The younger respondents and those with a higher educational level were relatively more convinced that scientific experts had caused confusion. In the North-East and Central Italy, the people interviewed tended also to agree more with this view, while in the South and the Islands there is a higher percentage of those who believe that public statements by experts had been clear and effective. The number of those who perceived public expertise as confusing and contradictory was over 50% among those who accessed news about the Coronavirus mainly via the online channels of the local and national institutions and the social media pages of their friends and acquaintances, as well as among those who placed their primary trust in the recommendations provided by the institutions regarding the precautions to be taken. Forty percent of those who placed their trust in family or friends agreed that it would be better for the experts not to give their opinions publicly.

In the midst of the so-called 'second wave', six months after the second survey, the *Observa Science in Society Monitor* returned to monitoring perceptions and attitudes towards the pandemic. As far as information on the pandemic is concerned, the picture has not changed much compared to the spring: television and radio news prevail, with a slight increase in the relevance of the daily press and the online channels of national institutions such as the Ministry of Health or the Civil Protection and regional and municipal authorities. The use of social media, which is often considered a breeding ground for "denialist" positions, decreased further, engaging less than 4% of citizens (Fig. 3). Regarding the precautionary measures to be adopted, compared to the spring the most significant change concerns the role of family doctors, whom a quarter of Italians now see as their preferred source of practical information. Confidence in national and local institutional sources remains high (Fig. 4).

But how is the work of the different actors assessed? Compared to the management of the "first wave", with rare exceptions (including the European Union), in October the judgement of the citizens became more negative towards almost all the actors involved. Citizens' positive evaluation of how the Civil Protection Department was handling the crisis, for example, decreased by

18% compared to April. For the National Government, positive opinions decreased by 16%, and for the regional governments by 21%. Almost 30% of Italians now evaluate the decisions and measures taken by their own regions to fight the pandemic negatively. Negative evaluations have also increased for WHO and the news media. The most negative data concern opinions on the activity of scientific experts, whose appreciation went down by 23% (from 72,4 to 49,5%), with a negative opinion held by one quarter of the citizens in October (Fig. 5).

This judgement on the place of experts is also confirmed by the perception of their communication role. The opinion that the interventions of experts are confusing, which was already high in April, increased further to 62% of citizens in October, while the share of those who consider their interventions in the media to be effective fell below 20% (Fig. 6). Institutions and scientific experts had accumulated, between March and April, a significant trust capital; but, between May and October, this capital had partly dissipated showing how this contradictory relation between science and politics in Italy created a gap in communication with citizens. Moreover, the increasingly negative opinions also affect attitudes towards the vaccines against COVID-19. In Italy at the end of October only 36% of citizens expressed their intention to receive the vaccine as soon as it would be available. A similar proportion (38%) expressed the intention to receive the vaccine, but not immediately. Over one in five does not intend to be vaccinated. But these attitudes are not the expression of a generic scepticism toward science, nor towards vaccination in general. In Italy only 4% of citizens firmly oppose vaccination (Bucchi and Saracino, 2018) and not even of a so-called 'negationist approach' towards the gravity of the pandemic. The skepticism about the COVID-19 vaccine is most frequently associated with a negative judgement of the actors involved in the emergency and a negative view of the communications role of experts.

Returning to the starting question of this section: How has everything that has been described about the situation in Italy in the previous sections of this article been perceived by citizens? Considering the data presented, it can be said that the two opposite processes of scientification of politics and politicisation of

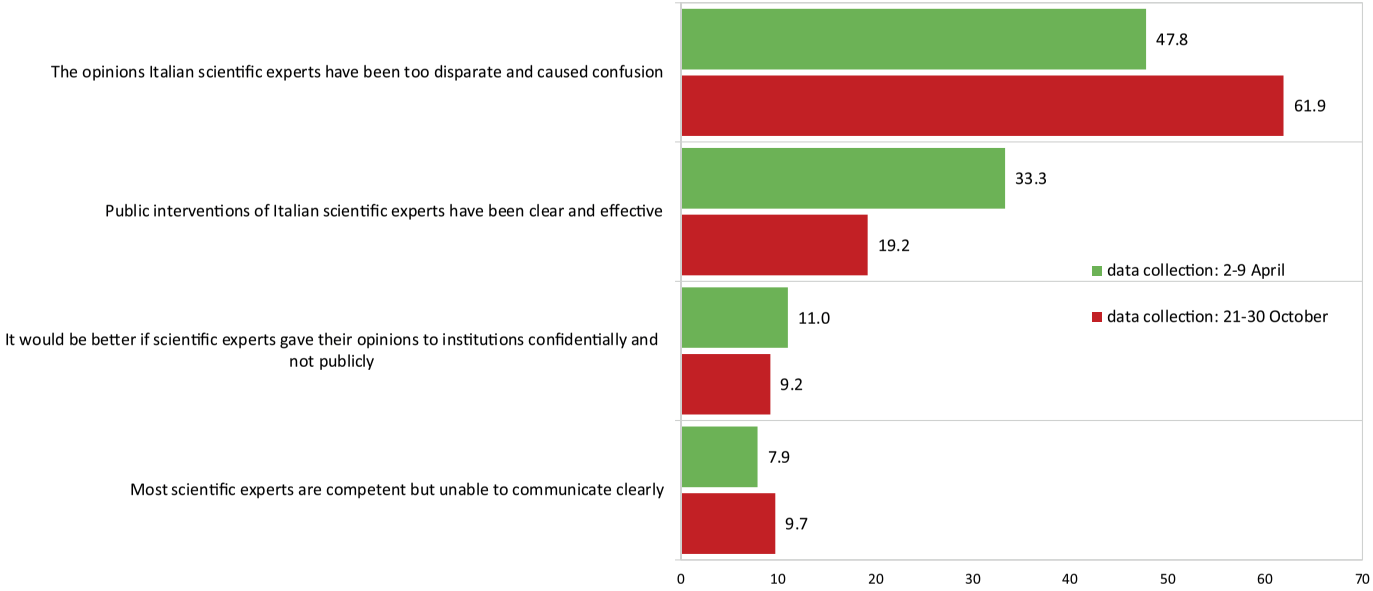


Figure 6. Please consider the scientific experts who have intervened publicly (e.g. on television or social media) on COVID-19 and select the statement that you most agree with. (%).

Source: Observa Science in Society Monitor (n April 2020=1029, n October 2020=991). (Licence: CC-BY-NC-ND).

science, the chaos due to the continuous changes in the content and the direction of the relationship between politics and expertise, and the plurality of voices presented by the media in highly polarising formats, have created confusion among citizens, with consequences also on the decisions regarding the vaccination against COVID-19.

8. Discussion and conclusions

In 2020 the map of power in Italy was significantly redesigned in the name of efficiency and expertise. In this chapter we have examined the relationships between politics and expertise and considered the double track of scientification of policy and politicisation of expertise, paying attention to its capacity to produce both forms of politicisation and depoliticisation. From this perspective, it would be inappropriate to force this plurality of experts into one specific 'type', the configuration of experts being too diverse and the relationship with political authorities having shifted too frequently. Italy did not indeed experience the emergence of one "super-expert" (Premat, 2020) or even one single group of experts chosen by the government as the official representatives of the scientific community. Rather, as a consequence of the country's complex and multi-level institutional configuration, Italy witnessed a variety of expert committees, crisis units and task forces. The pervasiveness of scientific experts, moreover, went well beyond the official organs set up by the national or regional governments, as experts burst onto the media sphere, becoming almost permanent guests on television shows: the empirical analysis we presented in section 7 shows clearly what the consequences of this over-abundance of experts are in the eyes of public opinion, as a large majority of Italian citizens consider the messages they convey as confusing and too disparate. As a consequence, the media industry has played a significant role in spectacularizing 'new' personalities and in politicising different scientific orientations, inserting them in the frame of extremely polarised media political debates.

However, this outcome also appears as the direct consequence of the ambiguous and multi-faceted use of experts by the political authorities. Throughout 2020, the relationship between

political and scientific authorities changed various times. In the first phase of the pandemic emergency, politicians called up experts and formed a multiplicity of committees and task forces. Although not always following their advice, as the episodes of Nembro and Alzano revealed, they used experts and expertise as a fundamental compass for decision-making. This remained the case in the second phase that we identified, as a process of the scientification of politics took place and science appeared as an "irrefutable truth" in policymakers' eyes. In this same period, the number of expert committees and task forces further increased and expanded to other policy sectors, so as to tackle the numerous social and economic consequences of the health emergency. Overall, it seemed that the role of expertise – discredited by the growing populist discourse that the country had been experiencing over the past years – gained a revenge victory. Yet, as soon as the most critical emergency restrictions were relaxed and the country's priorities shifted to the need for economic recovery, politics took over from scientific advice. From mid-April onwards, the political authorities started using scientific expertise in a symbolic and instrumental way. In other words, a new process of politicisation of expertise started taking place, with a combination of politicisation (through the politics of contested facts and the rise of different types of counter-expertise) and depoliticisation (through forms of hyper-politicisation and the politics of incontestable facts). Such a trend became endemic in the relationship between the experts and the authorities (and within each categories among different factions) in the phases that followed, a relationship that has been characterised by contrasts and blame-shifting.

Declaration of conflicts of interest

Nothing to declare.

References

Baldi, B., & Profeti, S. (2020). Le fatiche della collaborazione. Il rapporto stato-regioni in Italia ai tempi del Covid-19. *Rivista Italiana di Politiche Pubbliche, 3*, 277–306. doi: https://doi.org/10.1483/98731

Bauer, M., Pansegrau, P., & Shukla, R. (Eds.) (2019). *The Cultural Authority of Science. Comparing across Europe, Asia, Africa and the Americas*. London: Routledge.

Bucchi, M. (2020). *Scienza e Società*. Milano: Raffaello Cortina.

Bucchi, M., & Trench, B. (Eds.) (2014). *Handbook of Public Communication of Science and Technology (2nd edition)*. London: Routledge.

Bucchi, M., & Saracino, B. (2018). Scienza, tecnologia e opinione pubblica in Italia nel 2017. In Pellegrini, G. (Ed.), *Annuario Scienza Tecnologia e Società 2018* (pp. 11–39). Bologna: Il Mulino.

Bucchi, M., & Saracino, B. (2020). Scienza, tecnologia e opinione pubblica in Italia nel 2019. In Pellegrini, G., & Rubin, A. (Eds.), *Annuario Scienza Tecnologia e Società 2020* (pp. 11–41). Bologna: Il Mulino.

Cammelli, M. (2020). Centro e periferia: l'emergenza fa cadere il velo. *Il Mulino, 3*(20), 396–407.

Camporesi, S., Angeli, F., & Dal Fabbro, G. (2022). Mobilization of expert knowledge and advice for the management of the Covid-19 emergency in Italy in 2020. *Humanities and Social Science Communication, 9:54*, doi: https://doi.org/10.1057/s41599-022-01042-6

Capano, G., Howlett, M., Jarvis, D. S. L., Ramesh, M., & Goyal, N. (2020). Mobilizing Policy (In)Capacity to Fight Covid-19: Understanding Variations in State Responses. *Policy and Society, 39*(3), 285–308. doi: https://doi.org/10.1080/14494035.2020.1787628

Caselli, D. (2020). *Esperti. Come studiarli e perché*. Bologna: Il Mulino.

Casula, M., Terlizzi, A., & Toth, F. (2020). I servizi sanitari regionali alla prova del Covid-19. *Rivista Italiana di Politiche Pubbliche, 3*, 307–336. doi: https://doi.org/10.1483/98732

Cheng, D., Claessens, M., Gascoigne, N. R. J., Metcalfe, J., Schiele, B., & Shi, S. (Eds.) (2008). *Communicating Science in Social Contexts: New Models, New Practices*. Switzerland: Springer.

Cloître, M., & Shinn, T. (1985). Expository Practice: Social, Cognitive and Epistemological Linkages. In T. Shinn, &

R. Whitley (Eds.), *Expository Science: Forms and Functions of Popularisation* (pp. 31–60). Dordrecht-Boston: D. Reidel Publishing Company.

Costa, G. (2020). Salute diseguale con le risposte alla pandemia. In *Sbilanciamoci*, 20 settembre 2020. https://sbilanciamoci.info/salute-diseguale-con-le-risposte-alla-pandemia/

Desrosières, A. (2011). Buono o cattivo? Il ruolo del numero nel governo della città neoliberale. *Rassegna italiana di sociologia, 3*, 373–398. doi: https://doi.org/10.1423/35257

Diaz-Bone, R. (2019). Statistical Panopticism and Its Critique. *Historical Social Research, 44*(2), 77–102. doi: https://doi.org/10.12759/hsr.44.2019.2.77-102

Di Giulio, M. (2020). Per non sprecare una crisi. L'emergenza Covid-19, i rapporti centro-periferia e le lezioni che dovremmo apprendere. *Il Mulino – la Rivista*, 23 marzo 2020.

Espeland, W., & Stevens, M. (2008). A Sociology of Quantification. *European Journal of Sociology, 49*(3), 401–436. doi: https://doi.org/10.1017/S0003975609000150

Eyal, G. (11 January 2021). Futures Present. The Pandemic and the Crisis of Expertise. LISIS-IFRIS Seminar.

Eyal, G. (2019). *The Crisis of Expertise*. Cambridge: Polity Press.

Galanti, M. T., & Saracino, B. (2021). Inside the Italian Covid-19 task forces. *Contemporary Italian Politics, 13*(2), 275–291. doi: https://doi.org/10.1080/23248823.2021.1916858

Goodell, R. (1977). *The visible scientists*. London: Little, Brown.

Gregory, J., & Miller, S. (1998). *Science in Public: Communication, Culture and Credibility*. New York: Plenum Press.

Hallin, D., & Mancini, P. (2004). *Comparing Media Systems. Three Models of Media and Politics*. Cambridge: Cambridge University Press.

Hilgartner, S. (1990). The Dominant View of Popularization: Conceptual Problems, Political Uses. *Social Studies of Science, 20*(3), 519–539. doi: https://doi.org/10.1177/030631290020003006

Horst, M. (2013). A Field of Expertise, the Organization, or Science Itself? Scientists' Perception of Representing Research in Public

Communication. *Science Communication, 35*(6), 758–779. doi: https://doi.org/10.1177/1075547013487513

Horton, R. (2020). Offline: Covid-19 is not a pandemic. *Lancet, 396*, 874. doi: https://doi.org/10.1016/S0140-6736(20)32000-6

Jasanoff, S., Hilgartner, S., Hurlbut, J. B., Özgöde, O., & Rayzberg, M. (2020). *Comparative Covid Response: Crisis, Knowledge, Politics*. Harvard Kennedy School, Interim Report.

Latour, B. (1987). *Science in Action. How to Follow Scientists and Engineers through Society*, Cambridge (MA): Harvard University Press.

Lorenzet, A. (2013). *Il lato controverso della tecnoscienza. Nanotecnologie, biotecnologie e grandi opere nella sfera pubblica*. Bologna: Il Mulino.

Maasen, S., & Weingart, P. (Eds.) (2005). *Democratization of Expertise? Exploring Novel Forms of Scientific Advice in Political Decision-Making*. Switzerland: Springer.

Mazzoni, M., Pagiotti, S., Stanziano, A., Mincigrucci, R., Verza, S. (2021). La rappresentazione del Covid-19 in un sistema mediale polarizzato. Un'analisi del ruolo dei media in tempo di pandemia. *Comunicazione politica, 3*, 413–436.

Metcalfe, J., Riedlinger, M., Bauer, M. W, Chakraborty, A., Gascoigne, T., Guenther, L., Joubert, M., Kaseje, M., Herrera-Lima, S., Revuelta, G., Riise, J., & Schiele, B. (2020). The Covid-19 mirror: reflecting science-society relationships across 11 countries. *Journal of Science Communication, 19*(07). doi: https://doi.org/10.22323/2.19070205

Mozzana, C. (2019). *Welfare, capacità e conoscenza. Le basi informative dell'azione pubblica*. Carocci: Roma.

Novelli, E. (2016). *La democrazia del talk show*. Roma: Carocci.

Oppenheimer M., Oreskes, N., Jamieson, D., Brysse, K., O'Reilly, J., Shindell, M., & Wazeck, M. (2019). *Discerning experts. The practices of scientific assessment for environmental policy*, Chicago: Chicago University Press.

Pellizzoni, L. (2011). *Conflitti ambientali. Esperti, politica e istituzioni nelle controversie ecologiche*. Bologna: Il Mulino.

Peters, H. P. (2014). Scientist as Public Experts: Expectations and Responsibilities. In M. Bucchi, & B. Trench (Eds.), *Handbook of Public Communication of Science and Technology* (pp. 70–82). London: Routledge.

Porter, T. (1995). *Trust in Numbers. The Pursuit of Objectivity in Science and Public Life*. Princeton University Press: Princeton.

Schiele, B., Claessens, M., & Shi, S. (Eds.) (2012). *Science Communication in the World: Practices, Theories and Trends*. Switzerland: Springer.

Starr, D. (2020). This Italian scientist has become a celebrity by fighting vaccine skeptics. Virologist Roberto Burioni's blunt putdowns win fans but dismay some. In *Science*, 2 January 2020, https://www.science.org/content/article/italian-scientist-has-become-celebrity-fighting-vaccine-skeptics. 25/06/2022

Tipaldo, G. (2019). *La società della pseudoscienza. Orientarsi tra buone e cattive spiegazioni*. Bologna: Il Mulino.

WHO (World Health Organization). *An unprecedented challenge. Italy's first response to Covid-19*. Copenhagen: World Health Organization Regional Office for Europe.

Zitelli, A. (2020). Seconda ondata: come funziona il sistema di monitoraggio, le criticità e lo scontro Governo-Regioni. In *Valigia Blu*, 13 November 2020. https://www.valigiablu.it/seconda-ondata-monitoraggio-criticita-regioni/

Endnotes

104. The Italian Government was comprised of four main political parties: the Movimento 5 Stelle (M5S), a protest party self-positioning as 'nor left nor right' in the party system, with the relative majority in the parliament and the majority of the Ministries in the government; the Partito Democratico (PD), the main centre-left, with seven Ministries; Italia Viva (IV), a splinter party from the PD with two Ministries; and finally, Articolo 1, another splinter party comprised of an electoral cartel of leftist groups known as the Liberi e Uguali, with one Ministry, the Public Health Ministry, and Health Minister Roberto Speranza.

105. Intra-government disagreements exploded in December 2020, as the leader of Italia Viva objected to the Prime Minister's spending plans for the Next Generation EU funds.

106. Decreto 'Cura Italia', https://www.repubblica.it/politica/2020/04/09/news/coronavirus_senato_decreto_cura_italia_fiducia-253532274/ [accessed on 15 February 2020].

107. Unlike other decrees, which can be issued by the government, emergency decrees do not require parliamentary approval, nor do they allow for any intervention (ex-ante and ex-post) by the President of the Republic or by the Constitutional Court.

108. For an overview of the marginalisation of the Italian parliament due to the state of emergency, see Beniamino Caravita di Toritto, *L'Italia ai tempi del coronavirus: rileggendo la Costituzione italiana*, in *Federalismi.it*, n. 6/2020; Fulvio Pastore, "Emergenza Covid e dinamiche dei rapporti tra Governo, maggioranze e minoranze", *Rivista Dirittifondamentali.it*, 03/06/2020.

109. The Civil Protection Department was established in 1992 to deal with risk management. It comes under the direct control of the Prime Minister.

110. Ocdpc n. 630 del 3 febbraio 2020. *Primi interventi urgenti di protezione civile in relazione all'emergenza relativa al rischio sanitario connesso all'insorgenza di patologie derivanti da agenti virali trasmissibili*.

111. Misure operative di protezione civile per la gestione dell'emergenza epidemiologica da Covid-19, http://www.protezionecivile.gov.it/amministrazione-trasparente/provvedimenti/-/content-view/view/1222234 [accessed on 15 March 2021].

112. The Head of the Civil Protection was appointed in 2017 by a previous government. Eight out of the 13 members (and, more recently, 9 out of 20) of the national CTS are also directors and top managers in the Ministry of Health and other key public institutions, having been appointed to their roles by previous governments. In addition to the CTS, this is also the case for the Istituto Superiore di Sanità (Italian National Institute for Health, ISS) and the Consiglio Superiore di Sanità (Supreme Council for Health, CSS). Other members of the CTS are members of the Ministry of Defence, the National-Regional coordination structure,

the National Agency for Pharmacological Surveillance (AIFA), the National Institute for Occupational Health, the State Police, the National Institute for Infectious Disease, the presidents of two professional associations of physicians, and two physicians and a manager of the main Catholic hospital in Rome. Particularly relevant is the presence in the CTS of a World Health Organisation representative, Dr. Ranieri Guerra, former General Director for disease prevention at the Ministry of Health and Italy's former Chief Medical Officer, currently Assistant-Director General of WHO. Moreover, the relationship with WHO has been strengthened by the appointment of Dr. Walter Ricciardi, former Head of the Istituto Superiore di Sanità and currently member of the WHO European Advisory Committee on Health Research.

113. Interview on Canale 5 TV Channel, 17 April 2020: https://www.mediasetplay.mediaset.it/article/mattinocinque/coronavirus-attilio-fontana-malati-nelle-rsa-una-proposta-dei-tecnici_b100000535_a11636 [accessed on 15 March 2021].

114. Interview in Corriere della Sera, 20 April 2020: https://www.corriere.it/politica/20_aprile_13/boccia-chi-vuole-riaprirene-sara-responsabilee-ora-scienziati-diano-risposte-chiare-bd518522-7dc6-11ea-bfaa-e40a2751f63b.shtml [accessed on 15 March 2021].

115. https://www.radioradicale.it/scheda/612093/covid-19-in-italia-tra-informazione-scienza-e-diritti [accessed on 15 March 2021].

116. https://youtu.be/C-fx5kUQ3ec [accessed on 15 March 2021].

117. https://www.fondazioneluigieinaudi.it/cts-comitato-tecnico-scientifico-2020/ [accessed on 10 January 2024].

118. The four scenarios were described in the document "Prevention and response to Covid-19: strategy evolution and planning during the transition phase, fall-winter period", a report developed by the Istituto Superiore di Sanità, the Ministry of Health, Regions, Civil Defense, AIFA (Agenzia Italiana del Farmaco – Italian Drugs Agency), WHO and other actors.

119. The R_t Index is the net reproduction number of the infectious disease during a particular period, i.e. the average number of infections transmitted by each infected person in a certain period. It depends on three parameters: the chance for an individual to become infected following an encounter with an infected person, the number of social contacts of the infected person, and the duration of the infection.

120. Namely: the percentage of positive swabs excluding all screening and re-testing activities of the same subjects, an Rt calculated on the basis of the ISS integrated surveillance, the occupation rate of the total Intensive Care Unit beds for COVID-19 patients and that of the total Hospital beds for COVID-19 patients, as well as the possibility of guaranteeing adequate resources for contact tracing, isolation and quarantine and the number and type of professional figures and time/personnel dedicated in each territorial service to contact tracing.

121. https://www.repubblica.it/cronaca/2020/11/03/news/coronavirus_la_staffetta_degli_esperti_sui_media_ecco_le_star_della_seconda_ondata-272815175/ [accessed on 8 March 2021].

122. https://www.today.it/media/tv/classifica-virologi-tv.html [accessed on 10 January 2024].

123. https://www.corriere.it/politica/21_febbraio_17/liti-allarmi-visioni-opposte-quei-virologi-sempre-tv-3d08cd0c-70a1-11eb-8f84-ab1601eaf9fe.shtml [accessed on 8 March 2021].

124. The surveys described in this section of the chapter were conducted with a national sample, proportional and representative by gender, age and area of residence for the Italian population aged 15 years and above. Observa Science in Society is a non-profit, independent, legally recognised research centre promoting the study and discussion of interaction among science, technology and society, with the aim of stimulating dialogue among researchers, policy makers and citizens. Barbara Saracino is a member of the Steering Committee. https://www.observa.it