



INFORMATION, THE PANDEMIC AND VACCINES

Recommendations and proposals
for journalistic coverage of the
pandemic and vaccination





RECOMMENDATIONS AND PROPOSALS FOR JOURNALISTIC COVERAGE OF THE PANDEMIC AND VACCINATION

Introduction

Vaccines have saved millions of lives all over the world since they were created. They have made it possible to eradicate smallpox, prevent measles, viral hepatitis, and other diseases, and, soon, to overcome poliomyelitis.

The outbreak of coronavirus keeps the international scientific community on alert, making an unprecedented effort to achieve results as quickly as possible. There are entire teams in dozens of countries dedicated to developing a vaccine. These vaccines have the potential to neutralize the threat of this disease, whose consequences are still not fully known. Some of these have been successful, even in an emergency regime, and vaccination campaigns are underway.

Communicators face a new challenge: to inform audiences about this situation in a clear and responsible way.

In the following sections, we present some proposals and recommendations for the journalistic coverage of the subject.



1

IMPACT OF INFORMATION

The pandemic brings us closer to disease and death. In some cases, it affects our loved ones. Topics such as how the health system is dealing with this crisis, the rapid development and production of vaccines, and vaccination plans have a direct impact on the mood of individuals and families and can determine or precipitate their decisions. The pandemic has increased and intensified the social responsibility of all types of communication. When giving information on this topic, our first proposal to journalists is to consider the effect on the feelings and the reactions of the audience.

2

COMMUNICATION AS A SERVICE

The Argentinean Audiovisual Communication Service Law (26.522) defines mass media as a right and as a public service. In this global emergency, individuals, families, and communities expect this communication to help them get through this crisis and take the best decisions. We recommend the communication of advice prepared by health authorities, specialized scientific institutions, and information about where to find help: venues, phone numbers, and websites as part of the service audiences expect and need. In addition, the audience should be informed about vaccination centers, registration systems, and other necessary information. TV banners, footers or other graphics with hotline information can be a useful resource.



3

HEALTH CRISIS DATA SOURCES

All over the world, official sources are the main source of information on the health system situation, the evolution of the pandemic, and vaccination. In Argentina, the federal, state, and local governments have health resources capable of surveying the entire territory. There are nearly no non-governmental organizations able to improve the general data available on the evolution of the pandemic, the number of cases, and deaths except in some small geographic areas.

The same extends to the rollout of the vaccination plan or inoculation schedule. The dissemination of data or projections that may question official information can affect public health campaigns, which is why it requires a prior understanding of its elaboration, how the information was collected, and its evidence.

4

SCIENTIFIC SOURCES

The pandemic, the evolution of the virus, the treatments to combat it, the development of vaccines, and their reach are in a state of constant scientific research. This means that not all health professionals have up-to-date and specific knowledge to make a statement. Faced with this situation, we propose to resort to researchers endorsed by CONICET, Argentina's main agency that fosters science and technology, and medical societies of the specific discipline, since their statements are the result of consensus and not individual opinions. In scientific journals, researchers are required to declare their conflict of interest when publishing as a method of transparency. Taking this practice into account, communicators should verify whether or not their sources have ties to the private firms interested in the provision of vaccines and drugs. If that's the case, their statements may be biased.



5

DISCREPANCY BETWEEN PROFESSIONALS

The publishing of opposing opinions usually recommended by the theory of journalism requires a careful review in the context of this emergency. The knowledge and scientific experience validated on vaccines, disseminated by the World Health Organization (WHO) and other specialized institutions have no equivalence with the knowledge of a person that, individually, discusses accumulated evidence. Speeches by governments of the most diverse political perspectives that are contrary to the global knowledge and the public health policies (such as how to vaccinate a population) are risky for people's health. The same applies to recommending or promoting products that are not authorized by official state agencies.

6

VACCINES

An unprecedented discussion arose in the media and social conversation: vaccine nationality. Before the pandemic, it was not considered relevant to ask about the country origin of a vaccine before receiving it. This new phenomenon is driven by political, geopolitical and economic reasons, and not by scientific knowledge. We suggest referring to vaccines by their official name, and not by the country of origin. Additionally, vaccines have precedents and they follow specific procedures. All this information is available. If a media outlet decides to give its opinion on issues that affect people's health, they must thoroughly study this information.



7

THE EFFECTS OF VACCINES

Knowing the effects the vaccines produce requires reading specialized material. Almost all vaccines can cause some discomfort or side effects, like most medication we often take. Additionally, we should not assume that any health problems people may suffer after vaccination is due to the vaccine. Causality must be determined through an evaluation and medical diagnosis. We propose that the media avoid causing panic or scaremongering about effects that are to a great extent foreseeable, mild, and temporary.

8

VACCINATION CAMPAIGN

Argentina has a proven vaccination history and infrastructure, which serves as a base for the current mass vaccination campaign. It has experience and protocols for transporting, storing, and using drugs, and has experienced specialists. However, the scale of the operation and the number of people involved will inevitably lead to errors and difficulties. These inconveniences require specialized knowledge to be informed to the public. We propose to consult qualified official and scientific sources for the coverage of the campaign.



9

VACCINATION, IDENTITY, AND PRIVACY

The vaccination campaign is a matter of public interest and, for that reason, journalistic coverage is recommended. However, attending a vaccination center and being vaccinated is within the sphere of private life. Each citizen can decide whether to appear in the media in these circumstances or not. Therefore, individuals must give their consent before their image or personal data is recorded or used. This procedure is in accordance with the Personal Data Protection Law (25.326). Instead, we recommend, in the case of photographs, to use open shots. Close-ups of needles and injections are discouraged, as they can cause fear. At the same time, we encourage making additional efforts to obtain testimonies from vaccinated people, because they can help to overcome resistance, ignorance, and mistaken or biased information that may cause distrust in vaccines. These testimonies can contribute to highlighting the fact that being vaccinated is an act of individual and social responsibility.

10

MAINTAIN SERIOUSNESS. AVOID PANIC

The huge number of cases and deaths turns the pandemic into a dramatic fact. You cannot set an optimistic tone if the news is bad. However, we suggest avoiding the reinforcement of data that is already serious and distressing with extra journalistic resources, such as music, sound or visual effects. A communicational message that spreads panic is a paralyzing factor in a society that must remain active in the face of the crisis. Conversely, minimizing or ignoring the seriousness of the problem can lead to a negligent message. If this leads the audience to reduce care measures that are still necessary, it becomes dangerous for public health.



11

THE SEARCH FOR THE BIG SCOOP. THE PRESSURE OF SOCIAL MEDIA

Media outlets are on digital platforms, which are part of the communication ecosystem in which a large part of the population acts and interacts. These platforms, the "social media", are used for the official or reliable flow of information, but also for spreading rumors and fake news, sometimes opportunistically.


This common ecosystem does not facilitate the distinction between what is published by a media outlet, an individual, a group with certain interests, or digital agitators. We encourage the media and journalists not to accept sources who do not follow the procedures of dissemination of information as a valid source. This requires obtaining reliable data and ensuring information consistency.

12

ACCESS TO INFORMATION

Citizens have the right of access to information to every matter of their interest, and the State must guarantee its satisfaction. Information has to be accessible to all audiences, even to those who are unable to understand technical or scientific language, especially during this pandemic. This requires communicators to make a special effort. When interviewing specialists, it is appropriate to encourage them to develop information and knowledge in plain language. The Audiovisual Communication Services Law (26.522) advises using communication resources and mechanisms designed for people with disabilities.





These recommendations were prepared within the urgency of these pandemic times. In order to elaborate them we consulted medical specialists, scientists, researchers and journalists. We especially highlight the contributions from the Argentinean Society of Immunology (SAI); the researchers Soledad Gori and Belén Almejun, members of Ciencia Anti Fake News, from CONICET and collaborators of confiAR platform; Mariana Manteca Acosta (Centro Nacional de Diagnóstico e Investigación en Endemo-epidemias - CeNDIE), ANLIS-Malbrán; María Soledad Santini (Centro Nacional de Diagnóstico e Investigación en Endemo-epidemias - CeNDIE), ANLIS-Malbrán, CONICET, and three members of the Argentine Network of Health Researchers (Red Argentina de Investigadoras e Investigadores de Salud - RAIIS): Alejandra Gaiano, pediatric infectologist; Mariano Pérez Filgueira (INTA-CONICET), and Rosa Bologna (Head of Epidemiology and Infectious Diseases Service of the Garrahan Hospital).



GLOSSARY FOR COVID-19 VACCINE MEDIA COVERAGE

AESI (Adverse Events of Special Interest).

According to the Council for International Organizations of Medical Sciences (CIOMS), established jointly by WHO and UNESCO, an AESI is an event or reaction based on criteria previously defined by researchers/agents responsible for the clinical trial. It is considered of interest and should be reported and monitored for better characterization and understanding.

https://cioms.ch/wp-content/uploads/2017/01/Mgment_Safety_Info.pdf

Vaccine surveillance includes the reporting and monitoring of post-application reactions, as science seeks to determine whether or not these are linked to the product. The reaction may be severe or mild and may require, depending on the case, further research to characterize and/or understand it. We suggest avoiding this acronym commonly used in scientific documents, but not easily assimilated by the public.

ANMAT (Administración Nacional de Medicamentos, Alimentos y Tecnología Médica)

A decentralized agency that reports to the Ministry of Health. It controls and guarantees the efficacy and safety of medicine, food, and medical devices. It carries out the process of authorization, registration, development of standards, surveillance, and control of the products under its competence across all the national territory. It is an internationally recognized institution.



VACCINE CARD AGAINST SARS-CoV-2

All vaccinated persons will receive it. It will state the type/brand of the vaccine administered, the lot number, the vaccination date, the date of administration of the second dose, if applicable, and the signature of the acting health professional. This is an essential document that should be safely stored. A photo of it can make it readily accessible.

CoNaSeVa (Comisión Nacional de Seguridad en Vacunas)

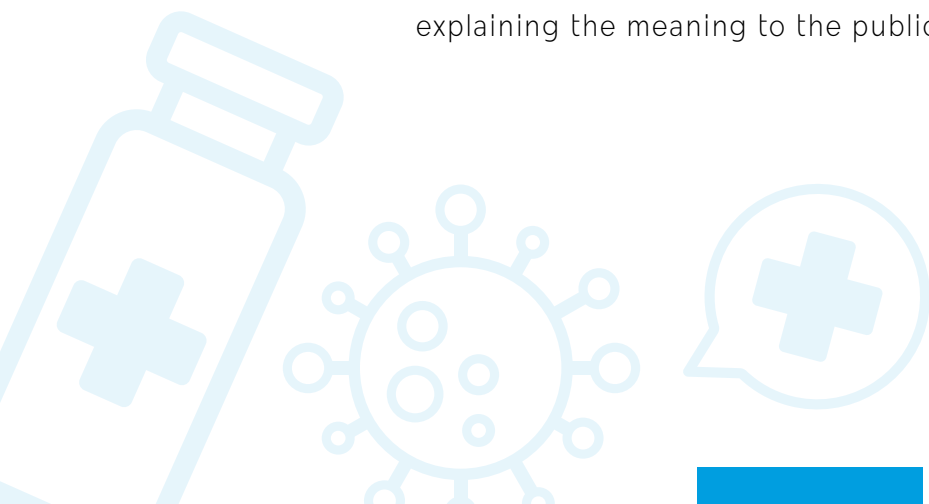
The main objective of this technical advisory organization is to develop a surveillance system to detect, analyze and classify reactions to vaccines and immunization to guarantee their safety. We suggest avoiding the use of this acronym and naming the institution.

CoNaiN (Comisión Nacional de Inmunizaciones)

A technical organization aimed to be representative and federally organized. Its members include independent experts and representatives of scientific societies related to the subject, as well as heads of immunization programs of the 24 jurisdictions of the country. It generates consensus recommendations for health authorities, non-binding, based on scientific evidence, which provide confidence and transparency for both the health team and the population. We suggest avoiding the use of this acronym and naming the institution.

EESA VI (Events Supposedly Attributable to Vaccination or Immunization)

Any unexpected health effect (unfavorable or unintended sign, abnormal laboratory finding, symptom, or disease) that occurs after vaccination and does not necessarily have a causal relationship to the vaccination. It is important to clarify that this concept applies to all vaccines, not only to COVID-19 vaccines. We suggest avoiding the use of this acronym and explaining the meaning to the public.



Severe ESAVI

Any event that causes or prolongs hospitalization, results in significant or persistent disability, congenital anomaly, or death. The occurrence of such an event, while denoting a temporal association, does not necessarily imply a cause and effect relationship. The causality between the problem and vaccination will be determined by an investigation. In Argentina, these events must be reported to the National Ministry of Health, for the National Vaccine Safety Commission to know and analyze them. We suggest avoiding the use of this acronym and explaining the meaning to the population.

CORONAVIRUS

Coronaviruses are a family of viruses that can cause disease in animals and humans. In human beings they can cause respiratory infections ranging from the common cold to more serious illnesses, such as the Middle East Respiratory Syndrome (MERS) and the Severe Acute Respiratory Syndrome (SRAS, more commonly referred to as SARS). SARS-CoV-2 is the seventh coronavirus capable of infecting humans. First found in China in November 2019 -although Chinese authorities claim it did not necessarily emerge there-, it was declared by the World Health Organization on March 11th, 2020, to be causing a pandemic.

COVAX

This global initiative aims to ensure rapid and equitable access to COVID-19 vaccines for all countries, regardless of their ability to pay. It is a coalition integrated by public and private agencies, such as the World Health Organization (WHO), the Global Alliance for Vaccines and Immunization (GAVI), the Bill & Melinda Gates Foundation and the Coalition for Epidemic Preparedness Innovations, among others. Initially, it announced that during 2021 it would facilitate the delivery of 2 billion vaccines doses in 190 countries.



CHLORINE DIOXIDE

Yellow or reddish-yellow gas used as bleach in paper manufacturing, as a disinfectant in public water treatment plants, and in the building decontamination process. When chlorine dioxide reacts to water, it generates chlorite ions. Both chemical species are highly reactive. Thus they can eliminate bacteria and other microorganisms in aqueous media and also damage the membranes of our cells.

ANMAT informs that the use of chlorine dioxide for COVID-19 or other diseases treatment is not approved for its sale and use as a medicine. The Pan American Health Organization (PAHO) reported on the adverse effects of ingesting this product for being toxic to the body. It has not been approved for medical use by any regulatory institution in the world. (<https://www.paho.org/en/news/5-8-2020-paho-warns-against-use-chlorine-products-treatments-covid-19>). This product is also known as Sodium chlorite (CDS) and miracle mineral solution (MMS) in the market.

VACCINATION SCHEDULE

A technical guide that indicates, for the vaccines approved in a country, which are the specific groups and ages of application, the number of doses, the route of application, and the amount of vaccine per dose. A complete vaccine schedule protects against immune-preventable diseases.

INCUBATION PERIOD

This is the period that elapses between the entry of an infectious agent into the organism, such as a virus, or microorganisms such as bacteria, fungi or parasites, and the appearance of the disease symptoms. According to available data, in the case of SARS-CoV-2, this period ranges from 1 to 14 days and averages 6 days.



INFODEMIC

According to the World Health Organization (WHO), the world is not only facing a pandemic in the case of COVID-19, but also an "infodemic". Infodemic refers to an excessive amount of information publicly circulating about a problem that makes it difficult to find a solution. During a health emergency, infodemic can lead to the spread of errors, misinformation, and misinformation. It can also hinder an effective response.

"ARGENTINE DOCTORS FOR THE TRUTH" AND "ARGENTINE PHYSICIANS FOR THE TRUTH" / "MÉDICOS ARGENTINOS POR LA VERDAD" Y "EPIDEMIÓLOGOS ARGENTINOS METADISCIPLINARIOS"

Group of physicians, virologists, immunologists, and other health professionals who oppose the use of face masks and isolation measures for healthy people. They distrust the worldwide scientific evidence on vaccines. They question PCR testing and the animal origin of COVID-19. They promote chlorine dioxide as a treatment. The group was officially launched in Argentina in July-August 2020. In their digital platforms, they spread messages and videos full of claims without any scientific support, especially against the consensus of the scientific community specialized in this subject.

NOMIVAC (Registro Federal de Vacunación Nominalizado)

It manages the vaccination coverage of the whole country in the SISA platform (Argentine Integrated Health Information System, see below). It allows registering each application of a vaccine that a person receives and details the date, dose, lot, and establishment, among other relevant data. It is also not advisable to use it in notes to the public.



NOMIVAC Mobile Application (NOMIVAC Mobile APP)

Cell phone application that works online and offline for field registration of vaccine applications to the population. It offers portability, avoids the paper form and speeds up the loading of personal data by scanning the barcode of the identity card.

STRATEGIC PERSONNEL

Any person who performs management and/or leadership functions and strategic functions necessary for the proper functioning of the State. Includes Security and Armed Forces, State officials and Prison Service personnel. They will have priority in the application of vaccines to guarantee their strategic functions. Teachers and non-teachers of all levels, according to each jurisdiction, may enter the priority stages of vaccination.

VACCINE PLATFORM

The vaccine platform is the technology used to present an infectious agent to the immune system of a person vaccinated. Thus, a "vaccine platform" is a category of vaccine associated with the technology for its production and the way of acting on the immune system. The vaccine platforms developed so far are: live attenuated microorganisms, inactivated microorganisms, viral vectors (replicative and non-replicative), vaccines based on nucleic acids (DNA or RNA), and protein-based vaccines (proteins, protein subunits, virus-like particles, polysaccharides).



SIISA (Sistema Integrado de Información Sanitaria Argentino)

An information technology project created in 2007. It responds to the needs of the National Ministry of Health and the provincial ministries with respect to the management of data about their facilities, professionals, programs or services for the community.

The registration of the doses of COVID-19 vaccine administered is done in real time and/or on a daily basis in the SISA platform. It is not advisable to use this acronym in public information

TYPES OF COVID-19 VACCINES

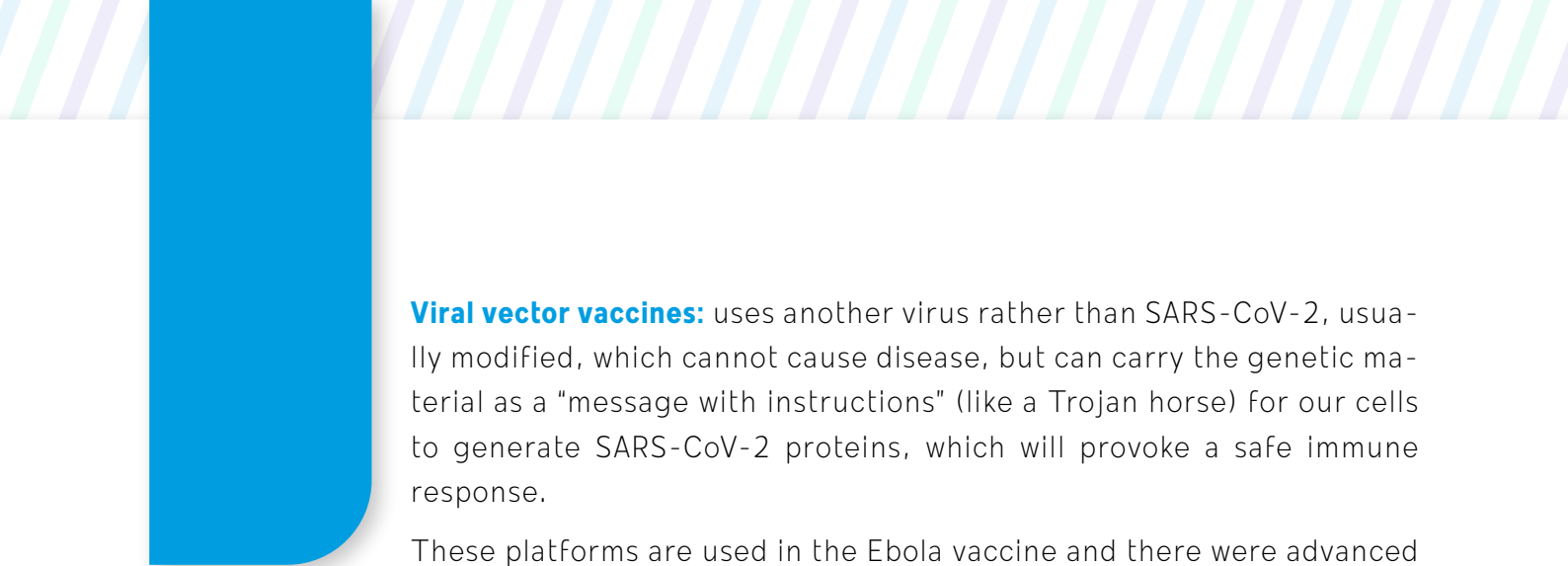
The four main platforms and technologies with which these vaccines work are:

Inactivated virus vaccines: uses a previously inactivated (killed) virus that does not cause disease but generates an immune response. Example: Sinovac and Sinopharm- Beijing Institute of Biological Products and Wuhan Institute of Biological Products.

Protein- or subunit-based vaccines: uses protein fragments or protein structures that mimic those of the virus causing COVID-19, to generate an immune response. Example: NOVAVAX and SOBERANA1.

There is extensive experience with inactivated virus platforms and those based on protein subunits. They have been used for years in vaccines included in Argentina's national calendar, as well as in other countries (e.g. polio, hepatitis A, HPV, hepatitis B, influenza, among others).





Viral vector vaccines: uses another virus rather than SARS-CoV-2, usually modified, which cannot cause disease, but can carry the genetic material as a "message with instructions" (like a Trojan horse) for our cells to generate SARS-CoV-2 proteins, which will provoke a safe immune response.

These platforms are used in the Ebola vaccine and there were advanced developments of MERS vaccines.

In the case of COVID-19, the Oxford-AstraZeneca vaccine, which uses a chimpanzee adenovirus; the Gamaleya-Sputnik V vaccine, which uses two human adenoviruses - serotypes 26 and 5; Johnson & Johnson's Janssen vaccine, which uses human adenovirus 26; and CanSino Biological/Beijing Institute of Biotechnology with Ad5.

Genetic material (RNA and DNA)-based vaccines: use synthetic RNA or DNA that carry the genetic information or "instructions" for our cells to generate SARS-CoV-2 proteins that alone trigger an immune response against the coronavirus. The nucleic acid platforms (messenger RNA and DNA) are innovative, newly developed and no other licensed vaccines using them are available to date. The Pfizer-BioNTech and Moderna-National Institute of Allergy and Infectious Diseases vaccines in the United States use this platform (messenger RNA). This genetic material only carries the "message" for proteins to be produced for a short time and quickly disintegrates and disappears.



INFORMATION AND SOURCES TO BE USED IN NEWS COVERAGE RELATED TO THE COVID-19 VACCINATION PLAN

Ministerio de Salud de la Nación (MSN)

<https://www.argentina.gob.ar/salud>

<https://www.argentina.gob.ar/salud/coronavirus-COVID-19>

Telephone: (54-11) 4379-9000

Monitor Público de Vacunación

<https://www.argentina.gob.ar/coronavirus/vacuna/aplicadas>

CONICET

<https://www.conicet.gov.ar>

Press

<https://www.conicet.gov.ar/prensa/>

Grupo Ciencia Antifake News del CONICET

<https://www.conicet.gov.ar/el-equipo-de-cientificos-y-cientificas-del-conicet-que-ya-desmintio-mas-de-cien-fake-news-sobre-coronavirus/>

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Pan American Health Organization (PAHO)

<https://www.paho.org/en>

Ask for journalistic information: <https://www.paho.org/es/argentina/boletines>

World Health Organization (WHO)

<https://www.who.int/es/>

COVID: <https://www.who.int/es/emergencies/diseases/novel-coronavirus-2019>

UNICEF

<https://www.unicef.org/es/coronavirus/lo-que-debes-saber-sobre-vacuna-covid19>

Sociedad Argentina de Inmunología (SAI)

<https://inmunologia.org.ar/>

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Sociedad Argentina de Vacunología y Epidemiología (SAVE)

<https://save.org.ar/>

Sociedad Argentina de Virología (Asociación Argentina de Microbiología)

www.aam.org.ar

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Sociedad de Infectología (SADI)

<https://www.sadi.org.ar/>

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