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GET THE JAB: GOVERNMENT MULTISEMIOTIC LEGITIMATION OF COVID-19 VACCINES IN MALAYSIA

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ABSTRACT

The present article studies how the government of Malaysia legitimises COVID-19 vaccines. Vaccination is a whole government endeavour but the Special Committee on COVID-19 Vaccine Supply (Jawatankuasa Khas Jaminan Akses Vaksin COVID-19 [JKJAV]) is the central government organisation that manages national-level vaccination. The management involves a discursive aspect and the discourse on social media sites should be explored because it frames beliefs and practices about vaccines. A qualitative analysis of legitimating strategies and their language and image features were conducted on Malay language posts on Facebook, Instagram and Twitter from February 2021 to July 2021. The posts discursively legitimise COVID-19 vaccines in terms of their characteristics and benefits. The multisemiotic legitimation is achieved by mixing rationalisation, moralisation and authorisation. JKJAV proposes that vaccines are the best means of protection, encouraged by various sources. Cumulatively, the vaccine favourable discourse makes vaccination an exercise of personal choice by an individual. The agency is justified by rational, moral and authoritative reasons, to recreate social dynamics before the pandemic.

Keywords: COVID-19, vaccines, social media posts, legitimation, multisemiotic

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INTRODUCTION

Using concepts in Discourse Studies, the present article studies how the government of Malaysia legitimises COVID-19 vaccines. COVID-19 was first detected in Wuhan, China in November 2019 but it soon spread to other countries. The global impact was known after three months and the World Health Organization (WHO) declared COVID-19 a pandemic on 11 March 2020. In Southeast Asia, Malaysia is the third worst-hit country, recording more than four million cases (as of July 2022). After strenuous scientific endeavour, COVID-19 vaccines became available at the end of 2020. The vaccines have been produced by multiple corporations, for instance, Johnson & Johnson, Moderna, Oxford-AstraZeneca, Pfizer-BioNTech and Sinovac. Vaccines stimulate the immune system to create immunity to diseases (Centers for Disease Control and Prevention 2018). They have been a triumph for public health, reducing the prevalence of diphtheria, influenza, polio and other dangerous diseases.

Malaysia received its first batch of COVID-19 vaccines in February 2021. The country has procured the Oxford-AstraZeneca, Pfizer-BioNTech and Sinovac vaccines for the entire population, citizens and non-citizens alike. In 2020/2021, the government of Malaysia envisaged three stages of vaccination (JKJAV 2021), where Phase 1 targeted those in defence, health care and security, Phase 2 targeted those who are differently abled, elderly and high-risk, and Phase 3 targeted the remainder of the population aged 18 and above. In 2021/2022, the government launched another round of vaccination because immunity declined over time and new COVID-19 variants surfaced. Vaccination is a whole of government endeavour but the Special Committee on COVID-19 Vaccine Supply (Jawatankuasa Khas Jaminan Akses Vaksin COVID-19 [JKJAV]) is the central government organisation that manages national-level vaccination. JKJAV is under the purview of the Ministry of Health and the Ministry of Science, Technology and Innovation. Its mandate spans formulating and implementing vaccination, which requires health communication.

Health communication involves semiosis because a semiotic resource (e.g., colour, image, language, layout) can articulate certain information (Harvey and Koteyko 2013), for instance about COVID-19 vaccines. The government employs health communication, notably through digital media because it facilitates the searching and sharing of information (Dredze et al. 2016). Among digital media, social media sites (e.g., Facebook, Instagram, Pinterest, Snapchat, TikTok, Twitter) are cheap, easy and fast public-oriented channels to spread information across space and time. The discourse on these sites can influence vaccination decision-making

(Betsch et al. 2012). The decision is dependent on several factors but social media sites are popular and provide publicity, which can frame beliefs and practices about vaccines (Broniatowski, Hilyard and Dredze 2016; Neneng Nurlaela et al. 2018).

Vaccine discourse on social media sites is persuasive (Daugherty, Gangadharbatla and Bright 2010, 129) and performs legitimacy work. Legitimation gives reasons why social practices (e.g., vaccination) should happen, or happen in a certain way (van Leeuwen 2008). Hence, social media sites become channels to legitimise or delegitimise COVID-19 vaccines. Research often studies how vaccines are delegitimised but few consider how vaccines are legitimised (Kata 2010). The government, through JKJAV consistently promotes COVID-19 vaccines on Facebook, Instagram and Twitter. The promotion justifies the characteristics and benefits of vaccines, legitimising their use against COVID-19. As of July 2022, Malaysia boasts a high vaccination rate but declined immunity and new COVID-19 variants may require vaccination to be continued. Other pandemics are probable, where vaccination forms a crucial public health measure. The present article can enrich the literature, querying how JKJAV legitimises COVID-19 vaccines using multisemiotic features. Grounded in Discourse Studies, it employs van Leeuwen's (2008) justificatory schema, which helps to understand the government's health communication in social media posts.

DICHOTOMY IN VACCINE DISCOURSE

Discourse about COVID-19 concerned the origin and symptoms of the virus, and subsequently its treatment. Most discourse-oriented research analysed national reaction to COVID-19 (e.g., Berrocal et al. 2021; Rajandran 2020). Governments first explained the origin and symptoms of the virus and tried to advise, calm or inform people. Governments later mentioned the treatment of the virus and encouraged people to be vaccinated. Research about the discourse of COVID-19 vaccines is scarce but research about the discourse of other vaccines is rather prolific.

Print media regularly hosts vaccine discourse as vaccine-related scandals emerge, as reported by newspapers in Australia (Ward and Budarick 2020), China (Wang 2020), Indonesia (Neneng Nurlaela et al. 2018), and the United States (Fowler et al. 2012). Newspapers articulate authoritative, moral and rational justifications in favour of vaccination (Wang 2020; Ward and Budarick 2020) although the types of justification may change (Fowler et al. 2012). Newspapers may display vaccine favourable and unfavourable discourses but the former outweighs

the latter. Newspapers naturalise government-led actions and decisions for public health (Wang 2020; Ward and Budarick 2020) and any intervention may reduce scepticism about vaccines (Neneng Nurlaela et al. 2018). The media, understandably "mediates" the government's justifications, which are recontextualised in newspapers. Alternatively, the government may engage people directly, as done in Denmark (Mohr and Frederikson 2020). Danish health information documents describe the safety of human papillomavirus (HPV) vaccines, which can prevent the dangers of certain cancers.

Digital media hosts dichotomous vaccine discourse. Clear ideological positions are taken, arguing for and against vaccination (Betsch et al. 2012; Broniatowski, Hilyard and Dredze 2016; Schmidt et al. 2018). The dichotomy is unequal because vaccine unfavourable discourse is more pervasive than vaccine favourable discourse (Kata 2010). Vaccine sceptic websites promote alternative health models, and individual autonomy and responsibility (Kata 2010). Although trust in science is eroded (Kata 2010), science experts denouncing vaccines are mentioned (Moran et al. 2016). These websites damage public health because visits of 5 to 10 minutes can increase the perception of vaccination risks and decrease the intent to be vaccinated (Betsch et al. 2010).

Social media sites provide an easy and fast avenue for almost instantaneous interaction about vaccines. On Facebook, posts on vaccines tend to be shared if the information is presented as a gist (consequences) more than verbatim (precise details) because gist is easier to understand and more engaging than verbatim (Broniatowski, Hilyard and Dredze 2016). Instagram hosts more unfavourable than favourable posts for HPV vaccines (Kearney et al. 2019). On Twitter, vaccine favourable posts endorse scientific organisations and the advantages of vaccines but vaccine unfavourable posts emphasise the distrust of scientific organisations and the disadvantages of vaccines (Blankenship et al. 2018). While vaccine favourable posts promote data and conventional authorities (Brewer et al. 2017), vaccine unfavourable posts evoke emotions, morals and alternative authorities (Colson 2011; Kata 2010).

Hence, social media sites create, maintain or modify exposure to dichotomous vaccine discourse. The discursive construction of vaccination legitimises or delegitimises vaccines and it marshals multisemiotic features to convey justificatory schema. The discourse polarises the online audience and consequently shapes their beliefs and practices (Schmidt et al. 2018). These transcend discourse and leave a real-life impact on government vaccination endeavour (Betsch et al. 2012;

Dubé, Gagnon and MacDonald 2015). For instance, lower rates of vaccination in the United Kingdom are linked to vaccine misinformation on social media sites (Iacobucci 2019) and lower rates of HPV vaccination in parts of the United States are blamed on vaccine misinformation on Twitter (Dunn et al. 2017).

The dichotomy in vaccine discourse can be traced to distinct health models. Du Pré and Overton (2021) furnished three health models, namely biomedical, biopsychosocial and sociocultural. The biomedical model considers health a physical phenomenon to be explained, identified and treated through physical means. The biopsychosocial model perceives people's physical conditions in relation to personal and social expectations. The sociocultural model considers health a complex of factors involving personal choice, social dynamics and culture. The models inform two "voices" that were termed by Mishler (1984) the voice of medicine and the voice of the lifeworld. The former is oriented to evidence, measurement and precision while the latter is concerned with health as an everyday experience (Mishler 1984). From previous research, vaccine favourable discourse tends to relay a biomedical model using the voice of medicine but vaccine unfavourable discourse tends to relay a biopsychosocial or sociocultural model using the voice of the lifeworld.

The study of vaccine discourse is rather prolific but vaccine unfavourable discourse receives more research interest than vaccine favourable discourse. The WHO (2017, 32) noted that paucity and vaccine favourable discourse should be analysed to understand the strategies and features articulating the characteristics and benefits of vaccines. Most research is conducted on data from North America or Europe, and data from other parts of the world remain understudied (WHO 2017, 33) although vaccination is an international phenomenon (Mohr and Frederikson 2020, 1054). The data are also monosemiotic although social media posts almost always employ language with image, colour, or sound. Therefore, the present article can enrich the literature because it selects vaccine favourable discourse in social media posts by JKJAV, a government organisation in Malaysia. It studies the multisemiotic legitimation of COVID-19 vaccines in Malay language posts by JKJAV on Facebook, Instagram and Twitter, using concepts in Discourse Studies.

METHODOLOGY

The present article selects social media sites because the WHO (2017, 28) proposed studying their discourse. These sites are avenues to verify information, spread truthful information, and dispel misleading information during public

health crises, such as the COVID-19 pandemic. These sites had popular use before the pandemic and experienced exponential growth during the pandemic as people were on lockdown and required information.

This article selected posts on COVID-19 vaccines by JKJAV on Facebook, Instagram and Twitter from February to July 2021. This period marks the first six months of vaccination in Malaysia. Facebook, Instagram and Twitter were selected as people in Malaysia spend an average of 2.8 hours daily on social media sites, and 71% use one or more of these sites (Digital Influence Lab 2020). Posts on these sites enjoy reach, speed and interactivity (du Pré and Overton 2021, 278), becoming easy and fast avenues for almost instantaneous interaction.

The posts about COVID-19 vaccines were identified and downloaded. Among the posts, most were repeated across Facebook, Instagram and Twitter although the day and time of posting differed slightly. The redundancy meant doing one analysis, which covered posts on three sites simultaneously. These posts were multisemiotic and incorporated a few lines of language in Malay and static (icons, drawings, pictures) or moving (videos) images. Posts in Malay were selected because it is the majority and official language of Malaysia. The posts were translated into English and the translations were reviewed by proficient users of the language.

JKJAV legitimises the vaccines using its social media posts. Legitimation is ideological as it enables social actors to naturalise their actions and decisions (Wang 2020). Social actors may be embodied by an individual/group, who displays a specific perspective (Chaidas 2018). Perspective captures focalisation or the point of view. It can be non-focalised (narrator-focused), internally focalised (character-focused) or externally focalised (the narrator knows less than the character) (Chaidas 2018). The social actors employ strategies justifying why people should be vaccinated or be vaccinated in a certain way. The strategies are justificatory schema or different types of legitimations and their construction through arguments. Van Leeuwen (2008) provided a robust and commonly utilised typology of legitimation strategies, which forms the basis of other typologies (e.g., Chaidas 2018; Mackay 2015; Reyes 2011). The strategies categorise how social practices are justified. Van Leeuwen (2008) postulated four strategies that both legitimise and delegitimise, and they may be used alone or together.

The strategies are authorisation, moralisation, mythopoesis and rationalisation. Authorisation traces arguments to established or respected authority figures. While personal authority is linked to status in an institution; expert authority is tied to expertise; role model authority is vested in social status; and impersonal authority is

found in guidelines, policies and traditions. Moralisation forms legitimation using shared value systems. While evaluative adjectives invoke desirable or undesirable values, abstraction manifests abstract values in arguments, and analogies compare arguments to transfer values. Mythopoesis achieves legitimation using narratives, where moral tales reward protagonists for conforming behaviour and cautionary tales punish protagonists for non-conforming behaviour. Rationalisation is based on shared conceptions about reasonable or sensible social practices. It validates arguments through instrumental rationalisation, which describes objectives or impacts, or theoretical rationalisation, which normalises how things are.

The strategies are manifested using language and image features (Chaidas 2018; Mackay 2015). These features enable a strategy to convey an argument. Among language features, transitivity, mood and modality were analysed (Halliday and Matthiessen 2014) and among image features, character, setting, angle and shot were analysed (Ledin and Machin 2018). These features are useful in portraying vaccines (transitivity, character, setting) and social relations (mood, modality, angle, shot). Transitivity encodes experiences about being (description), doing (action), saying (communication), and sensing (cognition, desideration, emotion, perception). Mood enacts propositions as commands, offers, questions or statements. Modality construes uncertainty and permits propositions to indicate inclination, obligation, probability, or usuality. Character means the people are depicted in terms of facial expression, body language and clothing. Setting has objects indicating a location. Angle can imply superior/inferior or involved/detached status. Shot employs physical distance through various camera shots to presume social distance.

A qualitative analysis was conducted because the identification of legitimation strategies and their multisemiotic features requires a close reading of the posts, as done by Chaidas (2018), Mackay (2015), Wang (2020) and Ward and Budarick (2020). Two trained researchers first separately labelled whose perspective the posts utilised, distinguishing JKJAV and other parties. The strategies and features were then identified. The two researchers employed as units of analysis the clause for language and the frame for image. The units were gathered by strategy, and the language and image features for a strategy were detailed. The two researchers produced two analyses, and they were reviewed together to ensure consistency before a shared analysis was finalised. The common strategies and their features are exemplified in Extracts 1 to 18.

ANALYSIS

The posts by JKJAV on Facebook, Instagram and Twitter discursively legitimise COVID-19 vaccines in terms of their characteristics and benefits. The legitimation conveys favourable beliefs and practices, which encourage people to be vaccinated. The slogan "*Lindung Diri Lindung Semua*" (Protect Yourself Protect Everyone) is displayed prominently on Facebook, Instagram and Twitter. It is composed of two "doing" clauses. While the verb *lindung* (protect) states an action to take, the pronoun *diri* (yourself) is seen before *semua* (everyone). The slogan implies causality because a vaccinated individual protects oneself and hence protects everyone. The two clauses are commands and the individual becomes the focus as they should act to be vaccinated. The slogan represents instrumental rationalisation because it posits protection to be a benefit of vaccination.

The non-modalised clauses close the space for alternatives and vaccination is given as the sole means of protection. JKJAV is a government organisation and it encourages people to be vaccinated. The encouragement establishes a paternalistic relation, where the government proposes an activity to people. The government-people binary is noticed in public broadcasts on COVID-19 by politicians, typical of other government-led communication (Berrocal et al. 2021; Rajandran 2020) and it is reproduced in social media posts.

After vaccination began in February 2021, JKJAV posted two poster templates, seen in Extracts 1 and 2. The statements depict the individual saying "I choose to be vaccinated" in Extract 1 and "I've been vaccinated" in Extract 2. The individual remains the focus through the pronoun "I" and their picture are placed in the circle in the middle. The "sensing" clause in Extract 1 has the verb "choose", where the individual has exercised a suitable choice. The "doing" clause in Extract 2 utilises the verb phrase "have been vaccinated", obscuring the individual/group giving the vaccines and emphasising the vaccinated individual.

The posters depict individual reaction to vaccination, using internal focalisation (Chaidas 2018). It conveys a personalised approach, as if the individual depicted is speaking to the individual social media user. Extracts 1 and 2 may persuade people to engage in protective behaviour (du Pré and Overton 2021) by exemplifying other members of society. The posters represent moralisation because it evokes the value systems of taking care of ourselves. The value is strengthened by the green tick sign at the sides of the posters, which endorses the reaction.

Extract 1:

Extract 2:

Extracts 3 to 5 use instrumental rationalisation, which describe the objectives of vaccination. The two major objectives are protecting people, namely "your loved ones" in Extract 3, "the elderly" in Extract 4 and "you...protection" in Extract 5 besides "end the COVID-19 pandemic" in Extract 3. Vaccination is grounded in saving people's lives and specific groups are mentioned perhaps because their vulnerability will resonate with people. Rationalisation solidifies the slogan "Protect Yourself Protect Everyone" because protection is achieved by vaccination.

Moreover, rationalisation is strengthened by moralisation. Extracts 3 and 5 qualify the value of protection using the adjectives "best", "maximum" and "important", and Extract 4 abstracts the value of protection in reducing death among the elderly. The value further visualised, where two younger characters flank and touch two older characters in Extract 4 and the vaccine guards the characters in Extract 5. Extract 4 enables literal protection because the younger characters can encourage the older characters to be vaccinated but Extract 5 depicts figurative protection through the bubble and shield. While rationalisation makes vaccination sensible, moralisation makes it positive. The benefits of vaccination make it the preferred manner to handle COVID-19.

Extract 3:

> *Langkah terbaik untuk melindungi orang yang tersayang dan mengakhiri pandemik COVID-19 di negara ini adalah dengan pengambilan vaksin.*
>
> The best way to protect your loved ones and end the COVID-19 pandemic in this country is by taking the vaccine.
>
> (Facebook, 26/03/2021, 6pm)

Extract 4:

The risk of death from COVID-19 infection among the elderly is high.

Register for vaccination today.

(Facebook, 11/05/2021, 9am)

Extract 5:

Why get two vaccine doses as suggested?
If you have received the second dose of vaccination, you will get maximum protection 2–3 weeks after the injection. This is the reason why it is important to take two doses of the COVID-19 vaccine.

(Facebook, 03/07/2021, 9am)

Extract 6 shows vaccines satisfying government-mandated guidelines. The guidelines are not provided (as text or link) but their judgement favours vaccines, as marked by multisemiotic features. These are the objects (clipboards with tick sign and graph, the stamp "pass") and the adjectives in the "being" clause ("safe", "effective", "stable"). These features indicate moralisation, evaluating the characteristics of vaccines.

The clause employ "All", broadening the characteristics to vaccines of every brand. The vaccines are not named and the noun phrase "COVID-19 vaccines" is seen in social media posts. The noun phrase is generic and it legitimises vaccines collectively, irrespective of brand. JKJAV procured vaccines from China (Sinovac) and Europe (Oxford-AstraZenaca, Pfizer-BioNTech), and people cannot choose their brand of vaccines. Because moralisation establishes every brand as good and safe, it may mitigate concerns about which brand received. Consequently, the two commands "Register" and "download" are "doing" clauses, prompting people to react to this post.

Moralisation is articulated by impersonal authority. It has zero focalisation (Chaidas 2018) because the narrator, JKJAV is empowered to provide the characteristics of COVID-19 vaccines. JKJAV confirms that vaccines are reliable, having passed their criteria. It has the authority to manage vaccination in Malaysia and people can trust its judgement. Trust minimises hesitancy and may encourage people to be vaccinated.

Extract 6:

Semua jenis vaksin COVID-19 yang diperoleh Malaysia adalah:
1. #Selamat Tidak memudaratkan
2. #Berkesan Berupaya melindungi
3. #Stabil Tidak berubah-ubah
Daftar untuk vaksinasi, muat turun MySejahtera:
http://ow.ly/H7Kd50DO4ck

All types of COVID-19 vaccines procured by Malaysia are:
1. #Safe Not harmful
2. #Effective Able to protect
3. #Stable Not changeable
Register for vaccination, download MySejahtera:
http://ow.ly/H7Kd50DO4ck

(Twitter, 10/05/2021, 12pm)

Yet, JKJAV did not produce the vaccines and it is not a medical or science authority. Its legitimation is in contrast to sceptics' delegitimation (Betsch et al. 2012; Broniatowski, Hilyard and Dredze 2016) and the two parties can provide arguments for and against vaccination. Therefore, Extracts 7 to 9 enhance the arguments in favour of vaccination by leveraging on expert authority, typical in vaccine discourse (Colson 2011; Kata 2010).

The authority represents internal focalisation (Chaidas 2018) because the posts depict characters in health and science, namely a doctor (Extract 7) and a scientist (Extracts 8 and 9). The characters are recognised using conventional objects in relation to their occupation. While the doctor is identified by the stethoscope and first aid box, the scientist is identified by the white coat, hazmat suit and laboratory hardware. The two expert authorities are presumed to understand vaccines because the doctor administers vaccines and the scientist develops vaccines. Although the pictures are not of real people, the doctor and scientist perspective may render the information credible.

People seem to pose a question, and the doctor/scientist gives an answer. This adjacency pair distinguishes the non-expert and expert respectively because the doctor/scientist knowledge can narrow a gap in people's knowledge. The questions "What are vaccines?" (Extract 7), "How do vaccines work?" (Extract 8) and "Are the vaccines produced safe?" (Extract 9) are placed at the top of the posts using larger font size and green highlight. This grants them salience, making them easier to notice. The answers are presented briefly, in line with convention on Facebook, Instagram and Twitter. The characteristics of vaccines described and although presented by experts, the descriptions avoid technicality because laypeople are the target audience.

Extract 7:

Vaksin adalah kaedah mudah dan berkesan untuk melindungi anda daripada penyakit berbahaya seperti COVID-19. Ini membantu badan anda untuk mengembangkan daya tahan terhadap jangkitan tertentu dan menjadikan sistem imun anda lebih kuat.

Vaccines are a simple and proven method to protect you from dangerous diseases like COVID-19. This helps your body to develop resistance to certain infections and makes your immune system stronger.

(Facebook, 02/03/2021, 5pm)

Extract 8:

Pengenalan ringkas mengenai vaksin:
Vaksin biasanya dihasilkan daripada virus yang dimatikan/dilemahkan.
Antigen dalam vaksin akan merangsang sistem imuniti tubuh.
Sistem imun kemudian akan mengenalpasti penyakit tertentu.

A brief introduction to vaccines:
Vaccines are usually produced from inactivated/ attenuated viruses.
Antigens in vaccines will stimulate the body's immune system.
The immune system will then identify a certain disease.

(Facebook, 02/03/2021, 8pm)

Extract 7 utilises instrumental rationalisation, describing the objectives of vaccines. The obvious objective is protection from diseases, which produces two related objectives, namely resistance to infections and a stronger immune system. The causality is indicated by the verb "help", as only vaccines enable the two objectives. Extracts 8 and 9 employ theoretical rationalisation, describing the production of vaccines. The production is based on stringent processes. These processes are generalised, as modals of probability ("will", "should") and usuality ("normally") indicated standardised activities to sustain quality. Articulated through a doctor and scientist, the legitimation of the characteristics of vaccines is enhanced.

Extract 9:

Ramai yang tertanya-tanya tentang tahap keselamatan sesuatu vaksin. Setiap proses penghasilan vaksin perlu melepasi kriteria yang telah ditetapkan oleh badan pengawalseliaan tempatan dan antarabangsa. Vaksin COVID-19 tidak terkecuali.

Many wonder about the safety level of a vaccine. Each vaccine production process must pass the criteria set by local and international regulatory bodies. The COVID-19 vaccine is no exception.

(Facebook, 03/03/2021, 5pm)

Extracts 10 and 11 use personal authority because the 7th and 8th Prime Minister, Mahathir Mohamad and Muhyiddin Yassin are shown. The use of quotes and pictures is internal focalisation (Chaidas 2018) and their perspective on vaccination is provided. The two men are individuals with high social status as they helmed the government. They become metonymic spokespeople and can speak for JKJAV. Mahathir says "I would like to invite..." in Extract 10 and Muhyiddin says "Let's... protect" in Extract 11. The indirect and direct commands advocate action, as exemplified by Mahathir and Muhyiddin. Everyone is targeted, as indicated by the adjectives "old...young" in Extract 10 and the pronoun "us" in Extract 11. Mahathir and Muhyiddin are popular among segments of people, and their popularity may encourage others to follow their example. Extract 10 is set in a vaccination centre and solidifies Mahathir's legitimation because his words match his actions but the absence of setting in Extract 11 generalises Muhyiddin's legitimation, irrespective of place and time.

Extract 10:

I would like to invite everyone, old and young to also be vaccinated.

(Instagram, 11/02/2021)

Extract 11:

Let us together protect the country we love by taking vaccine shots.

(Instagram, 24/02/2021)

JKJAV also produces videos to legitimise COVID-19 vaccines. The videos deploy a standard format, as individual characters advise people to be vaccinated. Table 1 (see Appendix) lists the characters featured and their demographic information. The population of Malaysia is majority male and Malay (Department of Statistics Malaysia 2019) but the characters in Table 1 are overwhelmingly male and Malay. The demography of the characters is skewed and has not equitably represented the diverse population. It may delegitimise vaccines among certain demographics, notably minorities (e.g., indigenous, migrants). They lack exposure to characters like themselves, which makes vaccines seem irrelevant to them. The internal focalisation (Chaidas 2018) in the videos may personalise the justification for vaccination but not for everyone. JKJAV (2021) wants every demographic to be vaccinated but its choice of characters has not represented the population.

The characters in Table 1 embody personal authority, being important or prominent in the armed forces (No. 1–3), business (No. 4–5), government (No. 14–18), non-governmental organisation (No. 19–20), police (No. 21–23) and religion (No. 23–25). Other characters embody role model authority, being popular in entertainment (No. 6–13) and sports (No. 26–28). Characters in the armed forces, police and sports use distinct uniforms. Characters in business are services sector employers, which employ most Malaysians (Department of Statistics Malaysia 2021). The three ministers (No. 14–16) served the Perikatan Nasional federal government from March 2020 to August 2021 and the Director General of Health (No. 17)

is seen on television frequently since the start of the pandemic. While characters in entertainment appear in advertisements, dramas, or movies, characters in religion represent the majority religion in Malaysia, Islam.

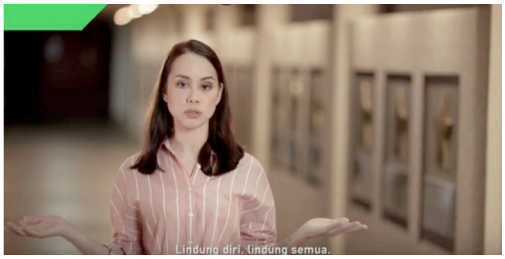
Although individual characters often disparage vaccination (Kearney et al. 2019), the 28 characters in the videos provide several reasons in favour of vaccination. Their reasons should resonate with many people as the latter already emulate or respect the former (Fowler et al. 2012; WHO 2017). The characters are members of different institutions but uniformly espouse vaccination. Their legitimation matches JKJAV legitimation, and JKJAV co-opts the characters to convey consistent vaccine favourable discourse in social media sites (WHO 2017, 29).

JKJAV is a brand-new organisation but the characters and institutions in Table 1 are entrenched or recognised in Malaysia. The faces of the characters are emphasised and the videos record them facing the camera at eye level angle with medium shot, as in Extracts 12 and 13. The eye level angle does not need anyone to look up or down and indicates social equals (Ledin and Machin 2018). The medium shot is cut at the waist and demarcates physical distance, which presumes social distance (Ledin and Machin 2018). The characters and hence their institutions are presented as "known" and are engaging in dialogue with people on vaccines.

Extract 12:

(No. 1: Shazwana Rosli)

Extract 13:



(No. 12: Tania Hudson)

The characters package their legitimation in personal narratives, as exemplified in Extracts 14 to 18. Person references are deployed in pronouns and noun phrases to refer to the character as "I" in Extracts 14 to 18, and people as "you" in Extracts 14, 16 and 18, "many people" in Extract 15 and "brothers and sisters" in Extract 17. Moreover, person references are noted in body language, where the characters put their right hand on their chest to refer to themselves (e.g., Extract 12) and later extend two hands outwards to refer to others (e.g., Extract 13).

The person references identify two parties; somebody convinced and presumably not yet convinced about vaccination. The characters are convinced because they

want to be vaccinated, as indicated by the strong inclination in the "doing" clauses in Extracts 14 to 18 ("I will register/take") but the people listening may not want to do it. The action impacts the health of the two parties because the pronoun "we", "us", or "our" in Extracts 14 to 18 implies membership in the same group. The progress of person references from "I" to "you" to "we" through the narratives expands the locus as everyone should be vaccinated to ensure societal immunity.

The characters encourage vaccination using commands, which are realised directly or indirectly. Extracts 15, 16 and 18 use direct commands, as in "let's not hesitate", "register", and "listen to". Extracts 14, 17 and 18 use indirect commands, as in "I recommend", "I call" and "I...invite". The verbs in these commands are not too forceful as they might alienate people. Moreover, the characters do not have state-sanctioned power to enforce the commands.

The narratives unfold over time. While the words "affected" in Extract 14, "Now" in Extract 16 and "temporarily" in Extract 18 signal present time, the words "will register" in Extracts 14 and 16, "future" in Extracts 15 and 16 and "will take" in Extracts 17 and 18 indicate future time. The two temporal states contrast the undesirable present, where problems are noted and the desirable future, which can start after vaccination. Although time will always pass, the resulting (un) desirability will depend on actions that people take, making vaccination the first step towards a better future.

Through the narratives, the characters provide reasons for vaccination (Kearney et al. 2019). The narratives simplify the complexity around vaccines because a definite action is proposed – people should get the jab (WHO 2017, 30). This is achieved by instrumental rationalisation in Extracts 14 to 18, where vaccination unlocks specific objectives. Vaccination serves three objectives as it protects us and the people around us (Extracts 14, 15, 17), stops the virus (Extract 16), and helps the country recover (Extracts 14, 15, 18).

While recovery is explicitly stated as economic and social in Extract 15, it is implicitly hinted as entertainment and sports in Extracts 14 and 18, the institutions of the characters. Vaccination transcends health and can impact other aspects of people's daily lives. Rationalisation is strengthened by moralisation because the objectives are beneficial, as indicated by words/phrases such as "protect" in Extracts 14 and 15, "responsible" in Extract 16, and "trying" and

"taking preventive measures" in Extract 17. Value systems in relation to care infuse the objectives, giving vaccination a moral imperative.

Although the characters are authorities, they may embed other authorities to strengthen the reasons to be vaccinated. The personal authority of experts ("our experts and religious scholars" in Extract 14, "health experts" in Extracts 18) and the impersonal authority of religion ("a requirement in Islam" in Extract 17) are noted. Authorities in health and religion should resonate with most people as COVID-19 is a health matter and Islam is the majority religion in Malaysia. Yet, the use of authorisation is infrequent perhaps because authorities are separately cited in other posts (e.g., Extracts 7 to 9) and they are among the characters in Table 1 (No. 17, 18, 23, 24, 25).

The arguments in Extracts 14 to 18 are concise, in line with the short duration of the videos. Being concise is advantageous because the characteristics and benefits of vaccines are clearly indicated. Concise arguments are frequently utilised in vaccine favourable discourse as they help decision-making (Betsch et al. 2012; Broniatowski, Hilyard and Dredze 2016). People learn about COVID-19 vaccines, which could influence their decision to be vaccinated.

Extract 14:

> *Disebabkan pandemik, punca pencarian kami terjejas. Tapi syukur, kerana kita semua akan menerima vaksin tidak lama lagi. Saya sendiri akan mendaftar dengan awal untuk vaksinasi. Saya syorkan anda semua pun begitu. Vaksin melindungi kita...Vaksin ini pun disyorkan oleh pakar-pakar dan ahli agama kita. Vaksin untuk melindungi diri kita dan masyarakat.*
>
> Due to the pandemic, our income is affected. But thankfully, we will all receive the vaccine soon. I myself will register early for vaccination. I recommend you all to also do so. Vaccines protect us...This vaccine is also recommended by our experts and religious scholars. Vaccines protect ourselves and society.
>
> (No. 6: Aidil Aziz)

Extract 15:

> *Ramai yang bertanya perlukah kita mengambil imunisasi COVID-19. Ya, pasti perlu. Demi melindungi diri dan orang di sekeliling kita. Saya sendiri pasti akan mengambilnya...Sebab itu, dengan mengambil vaksin COVID-19 dan program imunisasi negara, kita berharap keadaan Malaysia akan beransur pulih di masa hadapan. Aktiviti ekonomi serta sosial akan semakin bebas dan kembali rancak seperti sebelum ini. Jadi, janganlah kita ragu.*
>
> Many people ask if we should take the COVID-19 immunisation. Yes, we definitely must. For the sake of protecting ourselves and the people around us. I myself will definitely take it...Therefore, by taking the COVID-19 vaccine and the national immunisation programme, we hope the situation in Malaysia will gradually improve in the future. Economic as well as social activities will be more open and vibrant again as before. So, let's not hesitate.
>
> (No. 14: Ismail Sabri)

Extract 16:

> *Kini sudah tiba masa anda semua berjuang untuk putuskan penularan virus COVID-19. Sebagai warganegara yang bertanggungjawab, saya akan mendaftar untuk vaksinasi. Daftarlah demi masa depan kita semua.*
>
> Now is the time for all of you to fight to stop the spread of the COVID-19 virus. As a responsible citizen, I will register for vaccination. Register for the sake of our future.
>
> (No. 22: Hafiz Iskandar)

Extract 17:

> *Berikhtiar merawat penyakit merbahaya seperti pandemik COVID-19 adalah tuntutan dalam Islam. Begitu juga, mengambil jalan pencegahan terlebih dahulu sebelum dijangkiti wabak ini. Antara lain dengan menggunakan suntikan vaksin COVID-19. InsyaAllah, saya juga akan mengambil vaksin. Saya menyeru kepada saudara dan saudari semua untuk berbuat demikian. Kerana dengan vaksinasi ini, kita dapat melindungi diri dan masyarakat.*
>
> Trying to treat dangerous diseases like the COVID-19 pandemic is a requirement in Islam. Similarly, taking preventive measures before being infected by this disease. One measure is by using the COVID-19

vaccine injection. God-willing, I will also take the vaccine. I call on all brothers and sisters to do so. Because with this vaccination, we can protect ourselves and society.

(No. 23: Asyraf)

Extract 18:

Pandemik sekarang ini menyebabkan saya tidak dapat beraksi sementara waktu. Sebagai atlet, tentunya saya ingin menyumbang pingat dan juga mengharumkan nama Malaysia di persada dunia. Namun semua ini tidak dapat dilakukan jika kita semua tidak mengambil vaksin. Saya akan mengambil vaksin. Saya juga mengajak anda lakukan yang sama. Dengar saranan pakar kesihatan kita. Ayuh lindungi diri kita dengan vaksinasi.

The current pandemic has caused me to not be able to compete temporarily. As an athlete, I certainly want to contribute medals and also make Malaysia famous globally. However, all this cannot be done if we all do not take the vaccine. I will take the vaccine. I also invite you to do the same. Listen to the advice of our health experts. Let's protect ourselves with vaccination.

(No. 26: Farah Ann)

DISCUSSION

Vaccines are among the greatest achievements in modern public health but the uptake remains unsatisfactory (Brewer et al. 2017). JKJAV intends to reverse the trend for COVID-19 vaccines. It manages vaccination and the management involves a discursive aspect. JKJAV explains about COVID-19 vaccines and justifies their characteristics and benefits. The discourse in Extracts 1 to 18 is clearly vaccine favourable because it legitimises COVID-19 vaccines in Malaysia. The legitimation is achieved by mixing rationalisation, moralisation and authorisation, which reinforce one another. While rationalisation and authorisation are typical in vaccine favourable discourse, moralisation is typical in vaccine unfavourable discourse (Brewer et al. 2017; Colson 2011; Kata 2010). On Facebook, Instagram and Twitter, JKJAV proposes that vaccines are the best means of protection, encouraged by various sources. Perhaps JKJAV is aware of suitable strategies and their usage in social media sites can engender desirable beliefs and practices.

Cumulatively, the vaccine favourable discourse conveys an ideology of disease prevention through vaccination. It is grounded in a sociocultural model because the posts underscore personal choice, social dynamics and culture (du Pré and Overton 2021). The discourse socialises people to be vaccinated as an exercise of personal choice. The agency is justified by rational, moral and authoritative reasons to recreate social dynamics before the pandemic. The vaccine favourable discourse articulates the voice of the lifeworld as health is seen as an everyday experience.

People experience COVID-19-related disruptions in their daily lives. These disruptions are rarely mentioned in the posts because they should be broadly known, two years after the pandemic started. Instead, the posts postulate COVID-19 vaccines as a solution, which can minimise the disruptions experienced. The vaccines are legitimised to ultimately facilitate a return to pre-pandemic times. They enable normalcy in Malaysia, a sense that things are comfortable, predictable and familiar (du Pré and Overton 2021, 164). Normalcy may evoke emotions (Betsch et al. 2010) as many people should be glad to return to their usual activities. Through vaccination, pre-pandemic levels of activities can be regained, making COVID-19 seem like an aberrant experience from the years 2020 to 2022.

Vaccine discourse is complex because it is globalised and non-hierarchical, more so on social media sites (Blankenship et al. 2018). JKJAV guides and shapes vaccine discourse or other parties may shape it, which may deter societal immunity (Mohr and Frederikson 2020). Its ideology faces other ideologies, which question the characteristics and benefits promoted. JKJAV perpetuates vaccine favourable discourse on social media sites and similarly, other parties can perpetuate vaccine unfavourable discourse on these same sites. Yet, JKJAV can forge a dominant ideology because it is patronised by the state, whose institutions are being exercised to control other ideologies. For instance, the Emergency (Essential Powers) (No. 2) Ordinance 2021 stipulates fines or imprisonment for spreading false information about COVID-19.

CONCLUSION

Over time, trust in COVID-19 vaccines may become established and JKJAV would not need to legitimise them. Anecdotal observation confirms the opinion because the posts have become more procedural, about who can/cannot be vaccinated and how/where to be vaccinated. But posts by JKJAV should continue until most people

in Malaysia are vaccinated. The posts may become repetitive and JKJAV should create interesting, memorable and probably viral posts, helped by competent health communicators. Together, these parties select the strategies and their constitutive language and image features to persuade people to engage in protective behaviour. The posts can even be targeted, where the specific concerns of different social actors are handled. Yet, social media sites are part of the outreach to people and the WHO (2017, 28) advises integrating various mediums for the convergence of verified and accurate information.

For future research, the posts after July 2021 should be analysed to consider any change in strategies and features. These posts provoke reactions among social media users, which can also be analysed. These reactions inform JKJAV about the level of trust in vaccines and it can gauge whether its multisemiotic legitimation has had an impact. Future research can adopt a long-term view and study other diseases. Moreover, it could compare social media posts and other mediums (e.g., blogs, films, newspapers, speeches) to understand similarities/dissimilarities. These posts can be from Malaysia and posts from other countries can also be gathered. A comparison among countries is instructive of country-level response. Their legitimation would utilise the same stock of strategies and features but the manifestation would reflect socio-cultural factors. Hence, several avenues of research can trace the trajectory of vaccine discourse.

The present article has analysed the multisemiotic legitimation of COVID-19 vaccines by JKJAV on Facebook, Instagram and Twitter but health concerns cannot simply be reduced to or be explained by discourse alone, as said by Harvey and Koteyko (2013). Research should engage health producers and consumers to ensure that discourse can bring real-life improvements. Discourse is powerful because it can impact vaccine decision-making but people's lives are only saved after the decision is acted on.

APPENDIX

Table 1: Characters in videos

No.	Name	Position	Institution	Ethnicity^	Gender*
1.	Shazwana Rosli	Private, Malaysian Army	Armed Forces	M	F
2.	Muhammad Syazwani	Air Corporal, Royal Malaysian Air Force	Armed Forces	M	M
3.	Muhammad Zaim Asyraf	Aircraftman Class II, Royal Malaysian Navy	Armed Forces	M	M
4.	Fariz Atraz	Owner, cleaning company	Business	M	M
5.	Renyi Chin	Founder, myBurgerLab	Business	C	M
6.	Aidil Aziz	Artist	Entertainment	M	M
7.	Amyza Aznan	Artist	Entertainment	M	F
8.	Azar Azmi	Artist	Entertainment	M	F
9.	Fasha Sandha	Artist	Entertainment	M	F
10.	Gambit Saifullah	Artist	Entertainment	M	M
11.	Sangeeta Krishnasamy	Artist	Entertainment	I	F
12.	Tania Hudson	Artist	Entertainment	M	F
13.	Acis	Composer/Musician	Entertainment	M	M
14.	Saifuddin Abdullah	Minister of Communications and Multimedia	Government	M	M
15.	Ismail Sabri	Minister of Defence	Government	M	M
16.	Tengku Zafrul Tengku Abdul Aziz	Minister of Finance	Government	M	M
17.	Noor Hisham Abdullah	Director General of Health, Ministry of Health	Government	C	M
18.	Muzzafar Kasim	Representative, Ministry of Health	Government	M	M
19.	Adnan Mat	President, Congress of Unions of Employees in the Public and Civil Services	Non-governmental organisation	M	M

(*continued on next page*)

Table 1: (continued)

No.	Name	Position	Institution	Ethnicity^	Gender*
20.	Ras Adiba Radzi	President, OKU Sentral	Non-governmental organisation	M	F
21.	Azril Shazwan	Inspector, Royal Malaysian Police	Police	M	M
22.	Hafiz Iskandar	Corporal, Royal Malaysian Police	Police	M	M
23.	Asyraf	Islamic preacher	Religion	M	M
24.	Fatimah Syarha	Islamic preacher	Religion	M	F
25.	Nik Salida Suhaila	Islamic preacher	Religion	M	F
26.	Farah Ann	National gymnast	Sports	M	F
27.	Welson Sim	National swimmer	Sports	C	M
28.	Shalin Zulkifli	Former national bowling champion	Sports	M	F
		Total		3 C; 1 I; 24 M	11 F; 17 M

Notes: ^ C = Chinese I = Indian M = Malay; * F = Female M = Male

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