

Contemporary Rhetorical Theories

Współczesne teorie retoryczne

8 (4) 2021 EDITORS: AGNIESZKA KAMPKA, MARTA KOBYLKA

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Critical rhetoric and Critical Discourse Analysis in a critical pandemic world Retoryka krytyczna i krytyczna analiza dyskursu w sytuacji pandemii

Abstract

This paper introduces the potentials of crossing critical rhetoric and Critical Discourse Analysis in analyzing public discourse concerning one of the “corona topics”, namely institutional communication about the Oxford-AstraZeneca vaccine. The application of two complementary theoretical frameworks reveals discourse negotiation and naturalization of power and ideology in a persuasive discursive practice of issuing successive contradictory messages regarding the vaccine’s safety.

Niniejszy artykuł przedstawia możliwości połączenia retoryki krytycznej i krytycznej analizy dyskursu w badaniu dyskursu publicznego dotyczącego jednego z tematów związanych z koronawirusem, a mianowicie komunikacji instytucjonalnej na temat szczepionki Oxford-AstraZeneca. Zastosowanie dwóch komplementarnych ram teoretycznych ujawnia negocjowanie dyskursu oraz naturalizację władzy i ideologii w perswazyjnej praktyce dyskursywnej polegającej na wydawaniu kolejnych sprzecznych komunikatów dotyczących bezpieczeństwa szczepionki.

Key words

critical rhetoric, Critical Discourse Analysis, COVID-19, Oxford-AstraZeneca vaccine
retoryka krytyczna, krytyczna analiza dyskursu, COVID-19, szczepionka Oxford-AstraZeneca

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Received: 3 May 2021 | Accepted: 20 November 2021

DOI: <https://doi.org/10.29107/rr2021.4.7>

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Critical rhetoric and Critical Discourse Analysis in a critical pandemic world

1. Global Critical Context

The COVID-19 pandemic is now a reality. Although each nation's experience with COVID-19 has been different, the global community seems more connected than ever before. (Mis)communication about the origins and impact of the pandemic engages and concerns us individually and collectively. As a result, the COVID-19 pandemic is also a discourse and rhetoric, understood as language designed to narrate events and persuade action. Public communication concerning the pandemic has stripped away the constitutive nature and power of discourse in a Foucauldian sense. It has been shared, through media and digital channels, across the world. The authorities in democratic-oriented societies have faced challenges of discourse negotiation and naturalization of power in a life-threatening context regarding various new topics, such as wearing masks, social distancing, vaccination, COVID-certificates.

The global apocalyptic atmosphere at the beginning of the pandemic in 2020 was marked by eager anticipation of an anti-COVID vaccine as a salvation from universal uncertainty. In 2021, concerns about the vaccines' efficiency and safety were raised following contradictory official statements about their effects. Oxford-AstraZeneca, the only non-profitable vaccine produced in this context, was particularly subjected to a negative campaign. The institutional communication about its safety during the first months of its mass production and distribution will be observed as a topic of analysis in this paper within theoretical frameworks of critical rhetoric and Critical Discourse Analysis (CDA), both of which refer to the wider social and discursive context.

In politics, new rhetorical themes were put forward by political leaders, such as: „enforcing systemic interventions, upholding global unity, encouraging communal cooperation, stoking national fervor, and assuring responsive governance” (Montiel, Uyheng, and Dela Paz 2021, 10-14). The power of institutional discourse has been revealed and emphasized as guidance and as a guarantee of control over

the pandemic. As Ruth Wodak (2021, 2) points out, during times of crisis and great uncertainty „everyone expects instructions for action, planning, explanations, and ultimately security”. Statements from authorities on the „corona situation” including vaccination have been disseminated as the most important news of the day, as a lever of preserving peace and restoring a lost sense of security.

At the same time, authorities have been called into doubt due to the lack of consistency and transparency in public communication. One recent analysis suggests that formal and informal contradictions in discourse during the COVID-19 crisis produce „incoherence, messiness and radical uncertainty”, which is „marked by an intense moment of observation and scouring for information, oftentimes competing and only partial” (Wong and Claypool 2020, 211). This further deepens the gap between the positions of social power, leaving the powerless without clear information, as the following analysis concerning the safety of the AstraZeneca¹ vaccine illustrates.

The proposed critical analytical frameworks are applied herein in order to reveal certain sustainable elements of the discourse of power and its constitution by naturalization in preserving authority and control in an apocalyptic yet democratic context. Although the world has changed in its digital acceleration, the underlying critical turn of the 20th century remains relevant in the deconstruction of power relations in the public communication field characterized by change and confusion as essential ingredients of the „new normal”.

2. Theoretical frameworks: Critical Rhetoric and CDA

The analytical framework in this paper draws upon a critical sociolinguistic investigation of Critical Discourse Analysis (CDA), namely Norman Fairclough’s (1989, 1992, 1995) and Teun Van Dijk’s (1988, 2009, 2015) public and media discourse analysis, along with Van Dijk’s socio-cognitive model and Wodak’s (2007, 2013, 2021) discourse-historical approach, as well as on Raymie E. McKerrow’s (1999) and Michael Calvin McGee’s (1982, 1999) critical rhetoric. CDA and critical rhetoric arose on the wave of postmodern critical thought² and both of them are related to conceptual platforms of the theories of power and ideology in discourse. Michele Foucault’s concept of decentralization and dialectical re-creation of power (Fuko 2006), Theodor W. Adorno’s (1991) theory

1. The official name of this vaccine has frequently been shortened in the media and in public discourse as AstraZeneca, or abbreviated AZ, and it will also be referred to in that way herein, although it is a challenge to investigate the motivation for associating the vaccine with the pharmaceutical company rather than with its university reference.

2. Explicit critical orientations in rhetoric and sociolinguistics were initially formulated in two works, originally published in the same year – 1989. Raymie E. McKerrow introduced his essay *Critical Rhetoric: Theory and Practice in Communication Monographs* (reprinted in *Contemporary Rhetorical Theory: A Reader*, 1999), while within critical sociolinguistic theory Norman Fairclough (1989) set the frame for Critical Discourse Analysis (CDA) in his book *Language and Power*.

of domination based on maintenance of a *status quo*, Luis Althusser's (1971) concept of ideology, as well as the „discursive agreements” of Jürgen Habermas (2014), interest both critical rhetoric and CDA.

In addition, the intersection of the two critical theories in this paper relies on the elaboration of the CDA as an interdisciplinary discipline, eclectic and transdisciplinary, with „roots” in *rhetoric*, linguistics, anthropology, philosophy, and so-forth, and on a variety of approaches, „each drawing on different epistemological assumptions, with different theoretical models, research methods and agenda” (Wodak 2013, xix). As Van Dijk (2015, 466) suggested, CDA is „a critical perspective that may be found in all areas of discourse studies”, such as conversation analysis, pragmatics, rhetoric, stylistics, narrative analysis, multimodal discourse analysis, social semiotics. The „synthetic statement” of critical rhetoric emphasized that there are no universal standards in critical practice: „Instead, critical rhetoric celebrates its reliance on contingency, on *doxa* as the basis for knowledge, on nominalism as the ground of language meaning as doxastic, and critique viewed as a *performance*” (McKerrow 1999, 459).

McKerrow (1999, 441-442) defines that critical rhetoric „examines the dimension of domination and freedom as these are exercised in a relativized world”, with the aim „to understand the integration of power/knowledge in society”. The critical attitude in discourse studies, centering on social engagement to notice and combat social inequalities, was proposed by Fairclough (1989, 1) with a purpose to reveal „the meaning of language in the production, maintenance and change of the social relation of power” and to „help increase consciousness of how language contributes to the domination of some people by others”. The discourse-historical approach views discourse as a socially constituted (and constitutive) semiotic praxis (Wodak 2021, 5)³. Theo van Leeuwen and Wodak (1999) introduced the framework for the „language of legitimation” with four major categories: „authorisation, moral evaluation, rationalisation and mythopoesis” (cited in Wodak 2021, 8).

Both CDA and critical rhetoric share the understanding of *ideology* as naturalization of power relations. In Göran Therborn's (1980) terms, „discourse naturalizes the social relation: it becomes the norm, and discourse related to its maintenance is normal” (quoted in McKerrow 1999, 448). For CDA, positions of power are produced and interpreted as implied, not imposed. „The naturalization of the meanings of words is an effective way of construing the contents of discourse, and, in a long term, knowledge and benefit”, along with „social order” and „social relationship”, stressed Fairclough (1989, 105).

3. Focus on adhesion of semiotics and society directs CDA to functional social semiotics and multimodal semiotics, while these methodologies rely on the social engagement of CDA (Van Leeuwen 2005, Thurlow 2015).

The critical approach to institutional communication regarding AstraZeneca vaccine's safety is carried out in light of an extreme representation of the power and influence of authorities inherent in global crises. In Wodak's (2021, 18) CDA research of governmental crisis communication during the global COVID-19 pandemic, she discussed four frames – resurrection, dialogue, trust, and war. Another research study suggested that the globally spread „‘Covidi-an’ military metaphors marshal us to valorize ‘front-line workers’ – those deemed ‘essential’ to the medical, economic, social, and of course, political establishment” (Craig 2020, 1027). According to research guided by Van Dijk's socio-cognitive model of CDA, representational strategies considering the current pandemic were developed by: „demonising the disease, criminalising the disease, calling the state to action, emotional and informational appeal to the masses, condemnation of the state, and historical reference” (Osisanwo 2021, 19). To the reader's cognition, „the implication is that of consciousness on the evil effect of COVID-19 and the need to cooperate with the state and health workers to checkmate its evolution” (Osisanwo 2021, 19). Persuasive discourse strategies are oversaturated by power in a „corona fearful world”, calling up for critical engagement.

Vaccine was assumed to be accepted by most people as a proven medical device for suppressing the virus. Institutional communication during the current pandemic has relied on that link established during the 20th century. However, further dissemination of knowledge within the new digital media and non-critical reception of information in the 21st century have challenged that discourse, and therefore the acceptance of vaccination has changed, despite the fear stemming from the new virus. The discourse negotiation thus commences in people's doubts and resilience, and in the adjustment of authorities' public communication towards them.

3. Critical in „salvation”: Oxford-AstraZeneca as a case study

Interdisciplinary and transdisciplinary sections of the main principles and methodological directions of critical rhetoric and CDA feed into the following analysis. The analysis tackles one of the controversial „corona topics” – vaccine safety, more specifically, official discourse conducted by medical experts and regulatory bodies in the field, related to the Oxford-AstraZeneca vaccine. A critical orientation is applied to the analysis of discursive negotiation and naturalization of power positions of leading institutions in the field during the negative campaign relating to AZ vaccine's safety. In line with the proposed theories, the ultimate objective of this analysis is a deconstruction of the roots of discursive power and ideology towards revealing the „truth” and social inequalities in constructed

power relations is the ultimate objective of this analysis. The search for „truth” is understood in critical rhetoric’s term as the creative process whose outcomes serve as an „assessment of the ‘effect of truth’ upon social practices” (McKerrow 1999, 452).

The analytical corpus contains official announcements and statements published online, on institutional web sites of the European Medicines Agency (EMA) and World Health Organization (WHO), and in influential mainstream media and news agencies from the EU and US covering the global audience (Reuters, AFP, Deutsche Welle, Euronews, BBC, New York Magazine, The Guardian, NBC News, etc.). The core of the corpus contains announcements referring to the subject from January 2021 to April 2021, in chronological order, covering a period from the approval of the AstraZeneca vaccine until the imposition of limitations and restrictions on its use and the issuance of an order to the manufacturer to include the severe side-effects in the vaccine’s description.

Due to the digital nature of the corpus, the principles of „multimodal cohesion” (Van Leeuwen 2005, 178), specifically in digital media (Thurlow 2015, 620), are taken into account in terms of the effects of the analyzed discourse constituted through hyperlinks as „discourse strands . . . distinguished by topical continuity and boundedness” (Wodak 2021, 6)⁴. Additional critical orientation targets „rhetorical proofs” in invention and arrangement in the focus on public, persuasive, and contextual characteristics of discourse and contingent situations (Lucaites, Condit, and Caudill 1999, 2). Following a discourse-historical approach to CDA (Wodak), the analysis includes political, historical, and social contextualization in a brief overview.

3.1. Prologue

Since 11 January 2020, when media reported the first death from (later named) COVID-19 caused by a novel coronavirus (SARS-CoV-2) and the Chinese virologist Zhang Yongzhen published the genome sequence of the virus online, scientists have started to design and test anti-COVID vaccines. On 30 April 2020, Oxford University and British-Swedish pharmaceutical company AstraZeneca signed an agreement, undertaking that the company would provide a vaccine for no profit to developing countries (Franklin-Wallis 2021). Aside from the novelty of its socially responsible orientation and bearing the „burden” of altruism, it was one of the first vaccines announced on the global level. The UK Medicines and Healthcare products Regulatory Agency (MHRA) approved the vaccine on 30 December 2020, and on 29 January 2021, Oxford-AstraZeneca received „conditional authorization” in the EU, based on a recommendation from the European Medicines Agency

4. A thorough multimodal analysis could be applied in examining the discursive sequences lined up in digital cohesion, along with graphic solutions and coherence with illustrations. However, this requires a shift in research focus and extensive elaboration which would significantly exceed the proposed length of the present paper.

(Franklin-Wallis 2021). After the occurrence of manufacturing problems and delays in supplying the EU, as well as reports that started linking this vaccine to rare blood clots and low platelet counts, many countries subsequently decided not to administer the vaccine to lower age groups and weak uptake occurred in poorer countries (Franklin-Wallis 2021).

However, it is noteworthy that rare but severe side-effects were reported in the use of other vaccines approved by the World Health Organization (2021a). Janssen (Johnson & Johnson), which also uses an adenovirus vector, has been linked to similar (alleged) side effects as AZ (Miller and Reuters 2021), while Pfizer-BioNTech, based on a different technology, has been linked to myocarditis (Heller 2021). Nevertheless, AstraZeneca was the first to suffer from the massive media and public negative campaign, which began before its approval and administering, when fake news spread that the volunteer who took the first dose on 23 April 2020, a microbiologist Elisa Granato, died from side effects (Reuters 2020)⁵.

The critical view in this analysis targets the discourse of power held by health and medical national and multinational organizations that offer „salvation” in the form of a vaccine.

3.2. Naturalization of institutional power

On 29 January 2021, the European Medicines Agency (2021d) recommended that the Oxford-AstraZeneca vaccine was „safe and effective at preventing COVID-19 in people above 18 years of age”, based on four clinical trials in the United Kingdom, Brazil, and South Africa. In rhetoric terms, the *ethos* was established in the EMA as the highest administrative and expert authority on the subject in the EU, which was supported by the approval of the vaccine by the World Health Organization (WHO). The vaccine, which the greater part of the world had been waiting for over a year, was pronounced *safe* and *effective*, constituting *logos* in numbering the clinical trials, statistics of efficiency, assessments of age-groups, and *pathos* in choice of attributes „safe” and „effective”. In CDA’s socio-cognitive terms, the above outlined narrative includes not only discursive formatting of cognition but also *opinion* (Van Dijk 2009, 474), and in the wider „corona context”, such discourse provokes relief and wholehearted acceptance.

At the beginning of March, Denmark, followed by Iceland and Norway, temporarily stopped administering the AZ vaccine, due to reports of blood clots in people who received the vaccine. EMA announced the following:

5. The origins of the negative campaign against AZ were explained informally, especially in social media, by economic arguments, since it was the only non-profit anti-COVID vaccine, as well as in relation to a political background in light of Brexit (Hughes 2021).

The number of thromboembolic events in vaccinated people is no higher than the number seen in the general population. As of 10 March 2021, 30 cases of thromboembolic events had been reported among close to 5 million people vaccinated with COVID-19 Vaccine AstraZeneca in the European Economic Area (European Medicines Agency 2021c).

As a response to a shaken discourse of the vaccine's absolute safety, a *logos* was reconstructed based on a remote statistical analogy. Vaccination did not include the whole general population, whereby reported cases of severe health problems, strokes, and deaths, although rare, were unexpected and unexplainable in terms of the previous health condition of those vaccinated. At the interpretation level (Fairclough 1989, 26), this can be accounted for as the use of numbers in the function of *naturalizing* the power position of the regulator who is trying to preserve a superior position within the expert discourse. An „aura of fact” contributes to „linguistic truth” (Van Leeuwen 2005, 173), whereby statements are naturalized as facts and directed to cognition and opinion. As Wodak (2021, 8) points out, persuasive rhetorical strategies such as analogies, comparisons, „arguments using statistics, ratings, and numbers” dominate in the current pandemic.

In order to demonstrate control over the situation, authorities construct an *ideology* in terms of critical theories elaborated in this paper – an ideology promoting infallibility of experts and regulators, relying on people's *trust* in the power of institutions. The principle of critical rhetoric according to which „rhetoric constitutes doxastic rather than epistemic knowledge” is based on Robert Hariman's (1986) reconceptualization of *doxa*, which „includes not only the traditional characteristic of ‘opinion’, but also ‘reputation’ or ‘regard’, and functions as much by concealment as by revelation” (McKerrow 1999, 454).

An official statement was supported by other experts, employing „*legitimation qua expert authority*” (Wodak 2021, 9). For example, a virologist Polly Roy, in the matter of AZ's suspension in some European countries, stated that she *believed* the clots were „probably not due to the vaccine itself” (Deutsche Welle 2021). Within an „in-depth” CDA analysis that „deconstructs the coherence and cohesion of texts in detail” (Wodak 2021, 5), the choice of the subjective adverb *probably* questions the *logos* and reveals the *doxastic* ground of ideology of the vaccine's safety in the experts' „belief” in *assumption*.

3.3. Unspoken doubts

By the middle of March 2021, Sweden, Germany, Italy, France, Ireland, Bulgaria, Austria, Estonia, Latvia, Lithuania, Luxembourg, Romania, Slovenia, Thailand, Cyprus, Indonesia, etc., also suspended or paused the use of AZ (Al Jazeera and news agencies 2021). It was reported that the WHO would convene „to review the available safety data on the vaccine, although it has *repeatedly*

expressed confidence in its safety”, paraphrasing Director-General of WHO Tedros Adhanom Ghebreyesus who said that „there was no evidence of a link so far” (Al Jazeera and news agencies 2021). However, the statement *left out* information on the topic of the review (the true cause for the investigation). That is what both CDA and critical rhetoric would define as significant *absence*, since it conveys that „there was no evidence of a link” and that „confidence in safety” was „repeatedly expressed”.

In other words, herein, the traces of discursive practices in a text with a salient absence of a topic are presented in order to reconstruct *what is left out* (Fairclough 1995, 61). The same phenomenon can be accounted for within the framework of critical rhetoric, which considers *absence* „as important as presence in understanding and evaluating symbolic action” (McKerrow 1999, 457). Both accounts actually refer to Stuart Hall’s (1985) sense of an „ideological system of presences and absence” in intertextual interpretations of narratives. Consequently, this analysis opens up space for alternative interpretations by postulating *doubt* which is dispensed from cited official discourse but is obvious in social practices since the governments’ suspension of the vaccine actually happened, thus pointing to a conflict of *res et verba*.

At this point, a critical reader could ask the following rhetorical questions: What would happen if doubts were not left out from institutional discourse from the first unexpected deaths after vaccination? Would trust be amplified or lost? Would people feel more anxious or more conscious? Would the public (media) increase pressure on experts and manufacturers? Would it lead to a global (or European) joint investment of more money and attention in the more thorough investigation of *suspicious* cases and to the adoption of new recommendations sooner? Could this be a „new order” or just a utopia? . . . Critical rhetoric, in McKerrow’s (1999, 450) words, posits the possibilities for changing power relations and self-development of a new „normal” order by „re-characterization of the image”.

On the subject of AZ’s suspension, under the Deutsche Welle headline „Coronavirus: EU medical regulator says AstraZeneca COVID vaccine does not cause blood clots”, it was explained that the EU regulatory body is „fully *convinced* that the vaccine’s benefits outweigh possible risks” (kmm and rc/aw 2021). That statement was redistributed through various media and news agencies on 15 and 16 March, such as The Guardian (Henley 2021a), BBC News (2021a), Associated Press (Casert and Jordans 2021). In the above-cited article, the following is stressed: „The WHO, AstraZeneca, and the EMA have all *insisted* the AstraZeneca shot is safe, and that *there is no link* between the vaccine and reported blood clots. They say clots are not occurring in greater numbers or frequency than *normally* in the general population” (kmm and rc/aw 2021). The sublimation of *logos* in

rhetorical persuasion which had been formulated for days, refers to the safety of the vaccine, although in the discursive comparison of „benefits” and „possible risks”, an implicit possibility of risks being correlated to this particular vaccine has still been kept present on an intertextual level.

3.4. Discursive negotiation

On 17 March, the WHO published its doubtless stand about the safety of AZ: „Vaccination against COVID-19 will not reduce illness or deaths from other causes. Thromboembolic events are known to occur frequently. Venous thromboembolism is the third most common cardiovascular disease globally” (World Health Organization 2021b). Only one day later, after EMA’s „special meeting” regarding the safety of the AZ vaccine, there was a slight turn in official discourse. As NBC cited, Emer Cooke, the executive director of EMA, said that EMA *could not* „definitively rule out a link” between the vaccine and blood clots, and that more investigations would be conducted (Talmazan 2021). In contradiction, she also said that a „clear scientific conclusion” was drawn that AZ was „safe and effective”, and once again pointed out that „the benefits of the vaccine outweigh the risks” (Talmazan 2021).

It can be noted that, at that point, the narrative focus was still on adjectives *safe* and *effective*, while the modality of guarantee started to change. Although the discourse of safety is presented as “a clear scientific conclusion” referring to more reliable expert discourse, claims have been made that the link between the vaccine and unexpected severe conditions and deaths *cannot be ruled out*, which is much closer to the perception most probably already adopted by the public. The previously constructed „myth”, which „mediates between contradictory impulses to action” in McKerrow’s terms (1999, 456-457), has at that point shifted in favor of a discursive struggle and negotiation. As Wodak (2007, 210) stresses, „texts are often sites of struggle in that they show traces of differing discourses and ideologies contending and struggling for dominance”. The tension between discourse about the vaccine’s safety and the existing social practices had to be relaxed, in order to become ideologically *less visible*. As Fairclough (1989, 45) indicates: „Ideology is most effective when its workings are least visible”. The dominant power position of the institution (*ethos*) has turned to *naturalizing the possibility of risks* arising from the vaccines as if initial and previous announcements had never occurred.

In EMA’s official announcement on the same day under the headline „COVID-19 Vaccine AstraZeneca: benefits still outweigh the risks despite possible link to rare blood clots with low blood platelets”, it is stated: „the vaccine *may be associated* with very rare cases of blood clots associated with thrombocytopenia” (European Medicines Agency 2021b). This statement was used *after* the repeated messages

which point out that „the benefits of the vaccine . . . continue to outweigh the risk of side effects”, and that „the vaccine *is not associated with an increase in the overall risk of blood clots*”, in successive lines of conclusions.

In structural terms, the announcement is configured as a media text in which the focus shifts from new information – *the vaccine may be associated to severe conditions* which is placed in the lower part of the text. The *old news* – repeated naturalization of a discursive construction, namely *benefits outweigh the risk*, was used at the beginning of the text and in the headline as the informational core. In light of Van Dijk’s (1988, 178) observation on macrostructures and superstructures of media texts in which the most relevant information comes first, beginning from the headlines, the *inversion*, in this case, is in the function of an ideological discursive social/cognition construction. To clarify such *interpretation* towards *explanation* in Fairclough’s (1989, 26) terms and in accordance with Wodak’s (2007, 219) discourse-historical approach which insists on constant „dialogue” with extra-linguistic contexts, it is significant to be reminded of the wider historical concept of the vaccine’s importance. The fact that „the benefits outweigh the risk” of vaccination has been a well-known and medically supported fact since the middle of the 20th century, which cannot be understood as the main topic of the announcement, from the critical perspective.

In the above-cited text, EMA appealed to individuals and „healthcare professionals” to be „alert” for possible complications, also announcing the production of leaflets „to raise public awareness”. The *ethos* and *logos* are at this point being directed to public relations management, since *raising awareness* could be understood as an instrument for rebalancing the responsibility and knowledge from authorities to the public, just as the regulator’s advice to countries to make their own decisions about administering the AZ vaccine. The resolute statements about the safety of the vaccine have been relativized without acknowledgment of contradictions, as if only a few days earlier it had not been reiterated that there was *no link between the vaccine and blood clots*. Isocrates would be overwhelmed.

3.5. Denouement

In *the final act*, on 6 April, the media distributed an interview with EMA’s Head of Biological Health Threats and Vaccines Strategy, Marco Cavaleri, who issued a statement for the Italian *Il Messaggero* newspaper: „There is a link between AstraZeneca’s COVID-19 vaccine and very rare blood clots in the brain but the possible causes are still unknown” (Batchelor, 2021). The same day EMA immediately contradicted its own official: the regulator „denied it has already established a causal connection” (Henley 2021b). This *twist* is functioning as *peripetia* in light of previously published announcements in which a *possibility* was

established and the controversial *link* was intertextually incorporated in discourse but also in light of an incoming official announcement the very next day on EMA's portal: „AstraZeneca's COVID-19 vaccine: EMA *finds possible link* to very rare cases of unusual blood clots with low blood platelets” (European Medicines Agency 2021a). This revelation as *catharsis* puts an end to further speculations. EMA has informed the general public „to remain aware of the possibility of very rare cases of blood clots combined with low levels of blood platelets occurring within 2 weeks of vaccination” and provided detailed statistics of occurred cases (European Medicine Agency 2021a).

On the occasion of the cited announcement, Emer Cooke, the director of EMA, reminded that COVID-19 is, as quoted by Deutsche Welle, a „very serious disease with high hospitalization and death rates”, and that the AZ vaccine has proven to be „highly effective”: „It is saving lives” (wmr and jf/msh 2021). *Logos* is herein suppressed by *pathos* by recalling that it is more likely that people will die from COVID-19 than from AZ. The *ethos* is trying to re-establish its authority by awakening the emotions of anxiety and uncertainty which were more present in the pre-vaccine period. As Wodak (2021, 3) observed, the rhetoric of politicians confronted with failures often tends to turn „blame into credit”, with argumentation „based on emphasizing one's own qualities (*argumentum ad verecundiam*), evoking the audience's emotions (*argumentum ad populum*) and the use of fallacies”. In the discourse of the AZ vaccine's key features, the epithet *effective* remains while the epithet *safe* gets excluded and moved to a broader „corona discourse” in which any vaccine contributes to safety due to the global threat of COVID-19.

In the above-cited article, selected experts stated their opinions on the communication issue regarding AZ: i.e., Sterghios Moschos, a molecular biologist, said that the assessment is „more about emotion management” and „reassurance”, and Peter Liese, a medical doctor, stressed that „communication about the vaccine was key”, adding that „the EMA was *slow* to say that there is a link” (wmr and jf/msh 2021). Nevertheless, as a response to AstraZeneca company's marketing strategy of changing the name of its vaccine due to a negative campaign (King 2021), EMA has demonstrated discursive responsibility by maintaining the initial name of the vaccine in parenthesis in its official announcements (European Medicines Agency 2021e).

3.6. Epilogue

The epilogue in April 2021 was as follows: regulators in the United Kingdom announced that they would stop administering the vaccine to people under the age of 30, German vaccine regulators decided that the AstraZeneca vaccine would temporarily no longer be given to people under the age of 60, France recommended

that the AstraZeneca vaccine would be reserved for people aged 55 and older, Denmark and Norway extended their suspension of the vaccine's use, and so forth. The risks of blood clots, stroke, and death due to a vaccine have been proven as very rare for persons under age 60, mostly women (European Medicine Agency 2021a). Any individuals from that demographic group who had received the first dose were denied the second dose of the same vaccine in some countries. In others, people could choose whether to take a chance with this *lethal lottery* or consider another type of vaccine for the second dose although it was not recommended by WHO at that time (Van Overstraeten and Kar-gupta 2021).

When BBC News (2021b) announced that the death of a BBC Radio Newcastle presenter in May 2021 was officially confirmed to be caused by „complications” from the AZ vaccine, the same news quoted the Medicines and Healthcare products Regulatory Agency's chief safety officer, Dr. Alison Cave, who stated: „The benefits of the Covid-19 vaccine AstraZeneca continue to outweigh the risks for most people”. Although this particular news was not about *most people* and referred to someone's personal tragedy, the occasion was used to protect and perpetuate an ideology established previously in a new common-place, namely the *mantra* „benefits outweigh the risks”. Thus, the invisibility of ideology and naturalization through „common-sense” and assumptions, in CDA terms, „implicit in conventions according to which people interact linguistically, and of which people are generally not consciously aware” (Fairclough 1989, 2), are once again consolidated.

Whether the regulators were unaware of the effects of contradictory information in their communication and whether this kind of rhetoric was constructed due to a need to accelerate vaccination in order to stop the pandemic, or/and to prove competency and preserve political dominance of national and international institutions, is a matter that widens the gap in terms of power positions between authorities and the public. The power of institutions has been preserved, while the people are left with a choice of losing trust in the authorities or *believing in* them and complying with forthcoming recommendations. In both cases, these are even more powerless positions in an atmosphere of an already radically shaken sense of security and open conflict concerning vaccination (Sicha 2021); in the meanwhile, the idea of a non-profit vaccine has been significantly compromised.

Conclusion

The initially recognized potentials of CDA and critical rhetoric intersection, particularly in terms of common critical attitude and reliance on theories of domination and ideology constructed by the naturalization of power relations in

discourse and society, are applied herein to the analysis of public discourse related to the safety of the Oxford-AstraZeneca vaccine. The analysis demonstrates that transparent opposite social positions in terms of power distribution during the COVID-19 pandemic, new in contemporary, democratic societies, call up for a critical approach and engagement regarding public narratives. The interdisciplinary and transdisciplinary perspectives of CDA and critical rhetoric have proven effective in the analysis of institutional communication regarding one of the most controversial pandemic topics.

The rhetorical narratives as „discourse strands” (Wodak 2021, 6) on the subject were observed under a social, historical and political context in accordance with the CDA approach. The analysis of official announcements was conducted at the linguistic and discursive levels. CDA intertwined with a rhetorical analysis of persuasive discursive negotiation and naturalization of power on the intertextual levels, as well as in interpretations and explanations. Critical insight into the rhetoric of the issue revealed instability of *ethos* – of the authoritative foundation of medical regulators and experts, as well as ideological *doxastic* formatting of *logos* and use of *pathos* as an additional instrument for maintaining control over the crisis.

The two theoretical frameworks apply different terminology and methodologies in an elaboration of the ideology of power and infallibility of regulators and naturalization of contradictory official messages as a „new normal” in public communication. As critical and performative practices, they each serve as tools to confirm critic’s conclusions from different perspectives. The critics’ task is to present rhetoric as *what is* the construction of order in the words of McKerrow (1999, 450), or according to CDA, what are the *cognitive and social outcomes* of discursive practice. Accordingly, unmasking and deconstructing the discourse of power in this paper reveal a perpetuation of social inequality between people and authorities during the COVID-19 pandemic.

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