

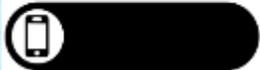
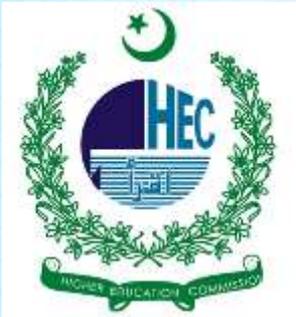
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**QUALITATIVE DISCOURSE ANALYSIS OF FAKE
PROPAGANDA AGAINST HPV VACCINE HANDLING BY
FEDERAL MINISTERS OF PAKISTAN: A COMPARATIVE
STUDY OF DAWN AND THE NATION (SEPTEMBER-
NOVEMBER 2025)**



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Abstract

The paper presents a qualitative analysis on the fake news about the HPV vaccine and its coverage in the federal ministers by the dawn and The Nation, the top Pakistani dailies during the early stages of the launch in September to November of 2025 in Pakistan. Through the application of the critical discourse analysis method, the paper examines the way in which the media text shapes the notion of misinformation as a barrier to public health, shapes the way in which the government responds, and shapes the notion of citizens in the vaccine discourse. The analysis of 45 news pieces reveals the presence of the ideological perspective. The dawn adopts a critical research stance, while the Nation adopts a pro-government stance.

The results suggest that the effectiveness of the promotion of the HPV vaccine may be constrained by the existing strategy of public health communication that primarily considers the subjects as mere recipients rather than active agents in the health rights arena.

Keywords: *Discourse analysis, HPV vaccine, public health communication, media framing, misinformation, Pakistan, vaccine hesitancy, health governance*

Introduction

Background and Context

In September 2025, Pakistan initiated its first mass vaccination drive against cervical cancer with the HPV vaccine among girls aged 9-14 to aim to reach more than 11 million in the primary target phase, although this received serious opposition from ‘fake news’ narratives, such as infertility, ‘western’ agendas, health dangers, reminiscent of previous ‘suspicion’ brought in during a CIA-arranged ‘fake vaccination’ drive in 2011. In this regard, ministers, including Minister for Health Syed Mustafa Kamal, aggressively protested against this in street rallies with speeches. The media discourse is an empirical area that ‘influences’ attitudes to vaccine ‘safety’, ‘behavior’, ‘legitimacy’, ‘cause’, ‘risk’, ‘cure’, ‘health’, ‘risk’, ‘life’, ‘vulnerability’, among other aspects ‘in social cognition’,

Research Problem:

Despite being invested heavily by their government and other international agencies like Gavi, WHO, and UNICEF, vaccine rates were lower than expected in some regions, and in Karachi, it was no higher than 34% uptake in late September 2025. This has raised doubts about the effectiveness of the methods being employed against misinformation. Despite previous work carried out in this area, little has been emphasized to this point regarding how discourse produces HPV propaganda and minister responses.

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LITERATURE REVIEW

Critical discourse analysis has developed as a useful methodology for examining how discourse shapes social reality, relationships of power, or ideological positioning (Fairclough, 1995; van Dijk, 2008). Analysis concerning studies about vaccine misinformation has found "risk amplification strategies" and "conspiracy framing strategies" prominent during vaccine roll-out programs, which increase the probability of vaccine distrust or vaccine refusal (Wallis & Nerlich, 2005). In so-called "developing nations," vaccine administration follows "cultural hierarchies," where religious or rural groups might be portrayed as obstacles that need correction (Dry & Leach, 2010).

Very few studies have explored the area of false information about healthcare on Pakistani media. Fatima et al.'s (2016) study on the reporting of polio campaigns identified a bias towards conspiracy-related reporting but no information related to social causes; nonetheless, the researchers did not analyze the discourses on a deeper level and that shortcoming will be addressed by the current research using CDA framework and approach.

Research Questions

1. How do Dawn and The Nation portray fake propaganda against the HPV vaccine as a public health crisis in Pakistan?
2. What ideologies influence media portrayals of ministerial accountability and citizen agency?
3. Which voices are privileged or marginalized in HPV discourse?
4. How do identified discursive tendencies affect effective public health communication?

METHODOLOGY

Research Design

Qualitative critical discourse analysis, based on the three-dimensional framework of Fairclough's work, is the key approach adopted for this study: textual analysis, discursive practice, and social practice.

Data Collection

Selection of Corpus:

- * Dawn: 15 pieces September 15 - November 30, 2025
- * The Nation: 30 articles (September 1 - November 30, 2025)
- * Total Corpus: 45 articles comprising approximately 45,000 words

Dawn is perceived as the oldest and most internationally respected English-language newspaper in Pakistan because of its autonomous stance on editorial matters. On the other hand, The Nation expresses opposition to such a proposition because it tends towards pro-government sentiments.

Inclusion criteria include:

- The papers should fall within the period of September 1 2025, to November 30, 2025.
- Articles that explicitly talk about the HPV vaccine campaign, associated fake propaganda/misinformation, or responses by federal ministers (e.g., debunking efforts, public statements, or demonstrations).
- Articles from Dawn or The Nation.
- Publications in the English language: news reports, editorials, and opinion columns related to the discourse.

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- Articles with at least 200 words to ensure discursive content that is adequate for analysis.

Exclusion Criteria

Articles unrelated to the HPV vaccine or pseudo-propaganda (for example, general health news or unrelated vaccine topics like polio).

- Duplicate articles or reprints.

- Non-newswire stories such as advertisements, letters to the editor, and user comments

- Articles less than 200 words that cannot provide sufficient narrative for discourse analysis.

- Articles published in another language other than English or on other publications.

Analytical Framework

These included four iterative steps of analysis: (1) descriptive analysis-listing the themes and actors; (2) linguistic analysis-examining terminology and metaphors; (3) intertextual analysis-identifying quotation of sources and authority; and (4) ideological analysis-revealing the discursive relations of power.

Preliminary open coding identified 23 initial themes, axial coding of which organized data into seven key discursive categories: misinformation framing, ministerial accountability, public responsibility, scientific-technical discourse, geographical placement, temporal constructions, and enforcement discourse.

Limitations

The analysis is restricted to English-language media and focuses on national coverage. It might not apply to provincial variations or Urdu-speaking audiences

FINDINGS AND ANALYSIS

Crisis and Emergency Framing

Such propaganda against HPV vaccine is produced through the discourse of crisis in both publications. In any case, according to Dawn: "Misinformation has also spread that the vaccine disrupts the hormones of young girls and encourages sexual activity" (<https://www.dawn.com/news/1945174>).

The Nation

<https://www.nation.com.pk/>

Creating a Context

The Nation uses language like 'high

The frame of crisis conceals the preventability of HPV, legitimates speedy refutations, and facilitates state-led persuasion. Discourse eschews long-term trust-building techniques, which are subverted by depicting misinformation dissemination as an extraordinary phenomenon.

Dawn applies crisis framing to emphasize the traditional distrust in vaccination: "The reaction mirrors longstanding vaccine skepticism," (<https://www.dawn.com/news/1957937>). *The Nation* applies in order to justify appropriate ministerial measures in crises.

State Responsibility and Bureaucratic Action

Discourses on ministerial accountability diverge fundamentally. Dawn presents the government as reactive; "Karachi shocks HPV campaigners with lowest coverage rate" (<https://www.dawn.com/news/1944376>).

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According to Dawn, passive voice has been used to highlight delays. The Nation presents active involvement: "Over 4.5m parents say 'yes' to HPV vaccination" (<https://www.nation.com.pk/25-Sep-2025>).

Heavy quantification, such as "9.2 million girls vaccinated," produces comprehensive action (<https://www.nation.com.pk/25-Sep-2025>). Both apply bureaucratic terminologies like "national campaign protocols," "immunization teams," showing vaccine management in technical terms and thus building legitimacy but keeping the layperson audience distant from the subject matter.

Public Responsibility and Citizen Duty

Both portray citizens as vulnerable yet responsible. For example, Dawn reports: "Pakistani parents rebuff HPV vaccine over false 'infertility' claims" (<https://www.dawn.com/news/1945174>), while The Nation uses moral framing: "Cervical cancer cases on rise in Pakistan" to advocate uptake (<https://www.nation.com.pk/11-Sep-2025>). Editorials argue: "Do not fall prey to negative campaigns" (<https://www.nation.com.pk/25-Sep-2025>). Dawn frames constraints in terms of the broader environment: "Unfounded infertility claims mar drive" is related to historical experiences (<https://www.dawn.com/news/1945174>). In this way, attention moves from structural to individual responsibility. These are neoliberal patterns that depoliticize access to a vaccine.

Geographical and Socioeconomic Discourse

Urban-rural distributions are reported: "Karachi has recorded the lowest HPV vaccination rate" (<https://www.dawn.com/news/1944376>). This builds hierarchy, positioning urban areas as hotbeds of resistance. The Nation reports neutrally without critique. Both evade class analysis, quelling disparities in education, access, or misinformation vulnerability.

Temporal Discourse

Information uses historical contextualization: "A fake vaccination campaign organized by the US CIA in 2011 added to this mistrust" (<https://www.dawn.com/news/1957937>). Questions and answers hold lessons. The Nation concentrates on the present: "in the past week" and on the future: "expand coverage by 2027" (<https://www.nation.com.pk/25-Sep-2025>). The Nation tells a story of development.

Enforcement and Surveillance

The documentation regarding surveillance is: "strict cybercrime action against social media accounts spreading false propaganda" (<https://www.nation.com.pk/25-Sep-2025>). The punitive framing is denoted as: "zero-tolerance policy." The act is intrinsic to biopower, since it governs health via observation.

Silences and Marginalizations

Voices Not Heard:

The media and policy discourse fail to account for crucial parties who are at the forefront in matters concerning public health. Community-based organizations are normally underrepresented in the press when in fact they interact more intimately with the community, and affected families also do not have a voice in these matters. The parties who ought to attract concern in matters concerning vaccines, like those who receive them, are underrepresented, and economic constraints in access and policy formulation are also underrepresented in these matters. The health personnel who

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implement policies in the field are also underrepresented.

Issue underexplored

The discourse further illustrates several underlying structural gaps, some of which frame public perception of health problems. The way in which funding gaps exist between the public and private sectors contributes to gaps in the level of care, as a divide exists concerning healthcare. The role of climate change, gender, or cervical cancer, on occasion, receives some mention, but not in a way that delves deeper. Religious views are also mentioned but in a way that does not add much to the discussion. Together, these patterns reflect dominant biomedical framing, elite-centered narration, and strong reliance on official sources, all of which cumulatively narrow the scope of health communication and exclude broader social realities.

DISCUSSION

A comparative ideological analysis of media discourse has important implications for public health communication. The positive side of such coverage could be that it builds accountability pressure, especially in outlets like Dawn, while presenting explicit rebuttals to misinformation and maintaining public awareness over time. However, several limitations remain obvious: punitive and moralizing overtones risk provoking resistance rather than compliance; the high level of technical language is overwhelming; and multiple messages may create confusion and doubt. Second, top-down approaches to communication often neglect the voices of the community and fail to provide due treatment to more deep-seated, structural sources of mistrust. Overall, the dominant discourse tends to reproduce the ongoing inequalities by reframing hesitancy as a personal failing and stigmatizing certain regions, overlooking realities rooted in class position, and leaving marginalized populations out of meaningful representation.

Recommendations

For Media Organizations

For media houses, health reporting must strike a balance between myth-busting while providing adequate context so as not to perpetuate myths through correction. Health reporting also must feature more voices, including those of local residents, service Users, as well as independent experts, to integrate local and technical narratives. Health media coverage should not only be confined to the launch of health initiatives but should provide adequate follow-up coverage. In addition, public empowerment narratives, non-technical language, and more high-quality Urdu content will also help ensure public involvement and understanding.

For Federal Ministry of Health:

For the Federal Ministry of Health, future communication strategies could include an acknowledgment and address age, in an open manner, of historical drivers of public distrust and addressing these in health communication. Instead of relying on top-down dissemination of information, it could focus on and adopt community participation and engagement in dialogue and decision-making. Health agenda focuses on empowerment and not surveillance would allow it to cultivate a sense of ownership and responsibility among its public. Furthermore, enabling greater access to the Fourth Estate can promote equitable reporting. Lastly, it is imperative to emphasize the importance of dialogue and the development of trust-building infrastructure to enhance public confidence in health facilities.

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For Future Research:

For future studies, it would be important to investigate the manner in which different communities receive and respond to messages from the media, taking note of differences that are culturally, linguistically, and societally informed. For example, a comparison of how messages in English media and Urdu media differ in their framing, tone, and storytelling might shed light on differences in media communication, and social media as well as television discourse might illuminate how messages are constructed, resisted, and reiterated. Longitudinal designs, focusing on different stages of a particular campaign, would enable the inclusion of changes over time in communication, public understanding, and impact. Moreover, incorporating political economy might improve understandings of the way power relations, ownership, and institutional logics shape media communication and public discourse.

CONCLUSION

This critical discourse analysis highlights how the coverage of HPV propaganda in *Dawn* and *The Nation* is entwined with stories of government control, scientific consolation, and civic responsibility. There is a critical commentary on institutional shortcomings in *Dawn*, while in *The Nation*, these narratives are reinforced. There is major emphasis on expert voices and the need for individual actions in these narratives. The target of persuasion is the citizens in these narratives. The difficulty in shaking off hesitation, even with efforts, indicates a lack of effectiveness of the frameworks. The dominant discourse regards the management of HPV as a technical issue, making it difficult to look beyond it as issues of equity or a community based. For there to be effective communication: There has to be a shift from politics of trust to politics of collective trust; there must be a shift from epistemic to participatory knowledge.

As cervical cases rise in Pakistan because of misinformation regarding cervical cancer due to urbanization, the need for equitable communication or education is essential.

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