

## Action Research: The National Festival of CORONAREVAYAT (Corona Narrative) in Iran; An Experience Report and Analysis

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### Qualitative Study

#### Abstract

The national festival of CORONAREVAYAT (Corona Narrative) took place in the Iran Medical Council during the first peak of Covid-19 and lasted about a year, from April 26, 2020 to March 17, 2021. The festival was designed to provide a platform for networking between artists and health professionals, and to promote documentation in the field of public health. Weakness in epidemic documentation has deep roots in Iran. Thus, CORONAREVAYAT was conducted in the context of the *public participation paradigm* to increase the social sensitivity regarding documentation in the health sphere, through running a *media campaign*. Registration of 1022 works in the festival, publication of 10 volumes of books containing the selected works, attracting the professional support of 28 national organizations and the financial support of a private sector, participating in 3 international film festivals and 1 international painting festival, introducing some less-known concepts (e.g., health humanities and narrative medicine) to the public, and networking between artists and therapists can be considered as the most valuable achievements of CORONAREVAYAT, which outweigh its weaknesses (especially organizational bureaucratization). The predominance of image over text can be observed in scrutinizing the works registered in the festival, and can be attributed both to the ease of preparing image-based works with modern digital tools (especially cellphones) and to the greater desire of social media users to share photos and videos compared to text and articles. The least participation was observed in the research section of the festival, in this regard it can be stated that it seems that some concepts (e.g., research) have become so academically entrenched that academics are reluctant to engage in a public media campaign. The ambiguity in the definition of applied research and the negligence of universities in the field of science communication add to the complexity of this issue.

**Keywords:** Covid-19; Pandemic; Health; Media; Campaign; Communication; documentation

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## Introduction

The national festival of CORONAREVAYAT was launched in April 26, 2020, concurrent with the first peak of Covid-19 in Iran, and lasted about a year, until March 17, 2021. The goal was to record the lasting moments of facing the pandemic all over the country, from the health professionals' commitment to the public's patience in sanctions, economic hardship, and the Covid-19 crisis. The initial idea came from the experience of the head of the Iran Medical Council, Dr. Mohammadreza Zafarghandi, who himself had witnessed that many unprecedented medical martial scenes had been overlooked during the eight-year Iran-Iraq war (1980-1988), without any trace of them today. From the very beginning of the pandemic, it was decided that a project be designed and developed to prevent similar negligence, so that the lasting moments of facing Covid-19 would be recorded and archived in various formats (Tasnim News, 2020).

Although Iran has gone through many ups and downs (from coups and assassinations to revolutions and wars) and a variety of events that are suitable subjects for documentarians, the weakness in documentation (especially in the field of health and epidemics) has deep roots in this country. Its most obvious sign is the lack of accurate documentation despite the numerous epidemics (e.g., cholera, plague, tuberculosis, smallpox, leprosy, typhoid, malaria, and influenza) in Iran throughout history. The few surviving documents from the Qajar era are non-specific. For example, Mohammad Hassan Sania al-Dawla (nicknamed Etemad al-Saltanah), who was one of the courtiers of Nasser al-Din Shah, recorded the most important events of the country in the last 15 years of his life, from 1298 to 1313 AH (1880-1895 AD). He has also referred to the epidemics of that time (Sania al-Dawla, 2011). More scholarly books which have dealt with this subject more specifically, such as "Study of Epidemics in Iran", have been written decades later and naturally have a retrospective view of the story (Talaee, Rajabnejad, & Tajmiri, 2017).

This shortcoming, of course, is not limited to Iran. Weakness in medical documentation seems to be a pandemic phenomenon, especially in the context of pandemics. Evidence of this claim is the dramatic ignorance of the Spanish flu pandemic (1918) around the world. According to Mark Honigsbaum (2019), no trace of the Spanish flu can be found in the Encyclopedia Britannica (1925), which was published only 7 years after the deadly pandemic. Even on the 100<sup>th</sup> anniversary of that pandemic in 2018, nothing more than a few brief commemorations were reported in several local cemeteries (Honigsbaum, 2019). It is as if a desire and tension in our subconscious lead us to forget painful traumas (e.g., pandemics) that lead to the death and mourning of many human beings. Paul Ricoeur draws our attention to this point in his book "Forgiveness, Forgetfulness, and Memory" (Hung, 2020).

Similarly, in Iran, despite the details we know about the history of the establishment and development of Dār ul-Funun, the Academy of Sciences and the School of Medicine (Raeisnia, 2020), when we want to know about bitter events such as epidemics which according to Ricoeur symbolize the wounds of the past (Hung, 2020), we are left empty-handed. It is as if there is less sensitivity in recording these unpleasant events, and this negligence can be seen at different levels of society, from health professionals to artists and even the people whose exposure to these epidemics is somehow, willingly or unwillingly, becoming part of their lives.

Given this historical mindset, when it came to documenting the Covid-19 epidemic in Iran, we first decided to increase society's sensitivity to the issue. In other

words, in the sense used in "science communication", we decided to run our project in the context of the *public participation paradigm*, not the *information dissemination paradigm*. In the former, the transfer of content takes place actively, horizontally, and participatory, that is, the audience is not merely the receiver of information, but the target audience, like other stakeholders, is involved in the communication process. In contrast, in the latter, the transfer of content takes place unilaterally and vertically, that is, scientists and experts (e.g., physicians and health professionals) use media as a tool to convey their scientific and health-oriented teachings to the general public. This approach is very similar to the traditional method of teaching in schools and universities. In this approach, the role intended for the audience is merely the receiver of information (Claessens, 2007). Based on this, in the first step, we decided to define and design our project in the context of the *public participation paradigm* (Table 1).

On the other hand, to convey our message to both the public and target audience, we found it more appropriate to use a *media campaign* model. However, we were not only focused on informing the target audience, but also on trying to attract broad-spectrum participation in recording and sharing experiences of dealing with the pandemic, and trying to familiarize our public and target audiences with some less-known concepts in the health sphere (e.g., narrative medicine and health humanities). Hence, something more than a media campaign was needed. As Richard Thomas points out in the book "Health Communication" (2006), when we are confronted with a multi-faceted health-oriented problem that involves a diverse range of audiences that need to receive different messages and at the same time we want to attract their participation, we cannot simply take a one-dimensional approach, and an integrated communication using multiple communication channels is necessary (Thomas, 2006). It was the same necessity that led us to engage extensively in partnership with 28 national organizations, including public, private, and non-governmental organizations before the formal launch of the festival (cf. "Method").

A look at the history of "health communication" also shows that the further back we go, the more convergence we observe between health communication and active institutions in the fields of cinema, literature, and media. The evolution of this nascent interdisciplinary field shows that, from 1961 when the term "health communication" was first used to 2014 when the Public Health Film Society (PHFS) was established and numerous health film festivals began to work around the world, this interdisciplinary field has always had a participatory approach to dealing with other active institutions in the public sphere (Thompson, 2014).

## Methods

To achieve the aforementioned goals, form a network between the artists and health professionals, and encourage the public and target audiences to record the lasting moments they have faced in the pandemic, CORONAREVAYAT went through the following steps:

**Table 1.** Comparison of the two paradigms commonly used in science communication

Paradigm	Approach	Style	Method	Audience
Information dissemination paradigm	One-sided, vertical	Traditional	Non-participatory & non-interactive	Passive: only receives data
Public participation paradigm	Bilateral, horizontal	Modern	Participatory & interactive	Active: Participates in data sharing

### In-depth study and interviews to achieve a comprehensive plan

The experience we had already gained from setting up health film festivals and managing public health journals led us to 12 semi-structured in-depth interviews with media experts, public health officials, and well-known interdisciplinary figures to develop a comprehensive plan. The design of CORONAREVAYAT was the result of those interviews defined in the context of the ‘public participation paradigm’ using the maximum participation of the audiences (public and target) and institutions (public and private) through running a media campaign and taking advantage of the innovative model of integrated communication to record the lasting moments of facing the pandemic in 10 different sections (Table 2).

### Attracting organizational and professional support

To attract organizational support, the vision and goals of CORONAREVAYAT were presented to the head of the Iran Medical Council in a PowerPoint presentation, and after gaining his approval, it was supported by the executive elements of the council. Thus, the implementation stages of the festival, especially at the beginning of the process, took place more quickly and easily.

Due to the history of cooperation with the secretaries of 3 Iran International Film Festivals, cinematic support for this project was obtained quickly. They accepted and announced that a special part will be dedicated to CORONAREVAYAT films in the 3 festivals that would be held by their secretary:

- Iran International Documentary Film Festival: Cinema Verité (ISNA, 2020)
- Tehran International Short Film Festival (Mehr News Agency, 2020a)
- International Film Festival for Children and Youth (Astan News, 2022)

This led to widespread participation of filmmakers with CORONAREVAYAT, and the registration of many films in different forms after the announcement. Furthermore, after the agreement with Farabi Cinema Foundation (FCF), its CEO declared that some films will be made with the support of FCF through a selection of videos and narratives submitted to CORONAREVAYAT. In addition, the head of the International Festival of Paintings for Pediatric Patients (IFFPP) acknowledged and announced that this year's festival will be held with the participation of CORONAREVAYAT (Mehr News Agency, 2020b).

### Formation of a policy council and launching the secretariat

After obtaining medical and cinematic support, the first meeting of the policy council was held in the Iran Medical Council attended by the head and deputies of the council, Iran International Film Festival secretaries, and several interdisciplinary experts of media, cinema, health, humanities, etc.

**Table 2.** CORONAREVAYAT: Corona Narrative plan; Recording the lasting moments of confronting Covid-19 in 10 sections

Sections	Forms
Corona according to the image	Photo, poster, cartoon, calligraphy, painting
Corona according to cinema	Documentary, short film, web series, animation, video clip
Corona according to the literature	Poem, short story, novel, narration
Corona according to self-sacrifice (Health Martyrs)	Any form is accepted in this section
Corona according to public education	Video, photo, poster, pamphlet
Corona according to social responsibility	Health donors, active volunteers
Corona according to media	Reports, notes, interviews
Corona according to radio and television	Any form is accepted in this section
Corona according to health humanities	Any form is accepted in medical ethics, medical philosophy, medical education, and medical sociology
Corona according to research	Research article (in Persian and English)

During the meeting, discussions were held regarding the implementation of the festival and criteria selection for the judging process and operational details of the festival (Medical Council of the Islamic Republic of Iran, 2020a). Finally, it was decided that the secretariat be established at the Medical Council and the call be announced as soon as possible to inform the public and target audience that CORONAREVAYAT is going to record the lasting moments of facing Covid-19 in 10 sections.

#### **Information dissemination among the public and target audience**

Following the announcement of the CORONAREVAYAT call in the press, news agencies, and TV, the possibility of environmental advertising was provided to the festival with the assistance of city managers. Then, in a meeting with some managers of the Ministry of Health, it was agreed that the ministry's public relations would invite medical universities across the country through official letters to cooperate fully with the festival. In this way, the public relations of medical universities across the country and the hospitals under their auspices worked as the public relations arms of CORONAREVAYAT, publishing the news and announcements of the festival and increasing the participation of health professionals in the project.

Moreover, public relations of the film festivals cooperating with CORONAREVAYAT accompanied the project in publishing the news and announcements. Furthermore, several infographics were printed on the cover of Covid-19 personal protection boxes (including masks, shields, etc.) sent to hospitals across the country by the medical council to invite health professionals to share memories and stories of their exposure to Covid-19.

#### **Attracting support and companionship of 28 national organizations and financial support of a private company**

In addition to attracting professional support and companionship of 28 national organizations (including governmental, non-profit, private, and public institutions), the festival tried to cover its costs by attracting the financial support of a private company (Medical Council of the Islamic Republic of Iran, 2020b). Due to the distinct situation of Iran under sanctions and to support domestic production, this company was selected from among Iranian manufacturers.

Hacopian Company which has a long history in the field of clothing production and supply agreed to provide financial support for the festival. At first glance, this company seems unrelated to the field of healthcare, but its interest and motivation to participate in the field of health are not new and it has previously collaborated with health-oriented projects and, during the Covid-19 pandemic, in addition to financial support for this festival, Hacopian also produced masks and shields with the health sector.

Table 3 shows CORONAREVAYAT companions and supporters; Name and type of the organizations and the cooperation model.

## **Results**

At the end of the registration period (75 days), 7,743 works were registered in the CORONAREVAYAT registration system (IRIB News Agency, 2020). Moreover, 2,141 raw films were delivered to the secretariat. In addition, after the registration deadline, 2,279 works reached the festival, which increased the total number of CORONAREVAYAT works to 10,022. At the discretion of the Policy Council, it was decided that those works would also be included in the selection and judging process to include a more comprehensive and diverse treasure trove of works in the final products of CORONAREVAYAT. The frequency of works in the 10 sections of the festival is presented in table 4.

**Table 3.** CORONAREVAYAT companions and supporters; Name and type of the organizations and the cooperation model

Name of organization	Type of organization and organizational affiliation	The model of cooperation
Public Relations of the Health Ministry	Governmental: Ministry of Health and Medical Education	Involving medical universities across the country through official correspondence
National Corona Management Headquarters in the country	Governmental: Ministry of Health and Medical Education	Involving the health sector (in addition to the treatment sector) throughout the country and presenting a collection of educational works produced at the National Corona Headquarters
National Corona Management Headquarters in Tehran Salamat IRIB Channel (TV Health Network)	Governmental: Ministry of Health and Medical Education Governmental: Health Policy Council of the Islamic Republic of Iran Broadcasting (IRIB)	Presenting a collection of related works in accordance with the 10 sections of the festival Broadcasting TV commercials about the festival to attract public participation, in addition to categorizing and presenting related TV, works produced in provincial capitals
Mostanad IRIB Channel (TV Documentary Network)	Governmental: IRIB	Broadcasting TV commercials about the festival to attract public and documentarians' participation, in addition to categorizing and presenting related TV documentaries produced in provincial capitals
Radio Salamat (Audio Health Network)	Governmental: Health Policy Council of the Islamic Republic of Iran Broadcasting (IRIB)	Broadcasting radio advertisements about the festival to attract public and radio programmers' participation, in addition to categorizing and presenting the best radio programs produced in provincial capitals
Documentary & Experimental Film Center	Governmental: Cinema Organization of the Ministry of Culture and Islamic Guidance	Inviting documentarians to accompany the festival, launching a special corona section at the Iran International Documentary Film Festival (Cinema Verité) in 2020
Farabi Cinema Foundation	Governmental: Cinema Organization of the Ministry of Culture and Islamic Guidance	Inviting filmmakers to take part in the festival, setting up a special corona section at the Iran International Film Festival for Children and Youth in 2020
Iranian Youth Cinema Society	Governmental: Cinema Organization of the Ministry of Culture and Islamic Guidance	Inviting filmmakers to take part in the festival, setting up a special corona section at the Tehran International Short Film Festival in 2020
Iranian Artists Forum	Governmental: Tehran Municipality	Holding a virtual exhibition as a "Memorial to Health Martyrs" in partnership with the festival, from Doctor's National Day (September 10, 2020) to September 17, 2020
Iranian National Commission for UNESCO Iranian Red Crescent Society	Governmental: Ministry of Culture and Islamic Guidance Non-governmental Humanitarian Organization	Presenting a collection of related and compiled works by UNESCO, in accordance with the 10 sections of the festival Presenting a collection of related and compiled works of the Red Crescent Society, in accordance with the 10 sections of the festival; Especially in the sections "Corona according to public education" and "Corona according to social responsibility"
Health Headquarters in Tehran Municipality	Governmental: The Deputy of Social and Cultural Affairs of Tehran Municipality	The festival's environmental advertisement in the form of billboards and banners in the city, inviting different sections of the municipality to submit related and compiled works
National Library of Iran	Governmental: Presidential Organization	Formal and national registration of the festival process and products at the National Library of Iran
Tehran University of Medical Sciences	Governmental: Ministry of Health and Medical Education	Presenting a collection of related works in accordance with the 10 sections of CORONAREVAYAT, inviting hospitals under the auspices of Tehran University of Medical Sciences to accompany the festival

**Table 3.** CORONAREVAYAT companions and supporters; Name and type of the organizations and the cooperation model (continue)

Name of organization	Type of organization and organizational affiliation	The model of cooperation
Shahid Beheshti University of Medical Sciences	Governmental: Ministry of Health and Medical Education	Presenting a collection of related works in accordance with the 10 sections of CORONAREVAYAT, inviting hospitals under the auspices of Shahid Beheshti University of Medical Sciences to accompany the festival
Iran University of Medical Sciences	Governmental: Ministry of Health and Medical Education	Presenting a collection of related works in accordance with the 10 sections of CORONAREVAYAT, inviting hospitals under the auspices of Iran University of Medical Sciences to accompany the festival
Academic Center for Education, Culture, and Research Scinito	Governmental: Tehran University of Medical Sciences Private	Publishing a collection of CORONAREVAYAT books (10 volumes of printed books) Publishing a collection of CORONAREVAYAT books (10 volumes of electronic books: ePUB3)
Nursing Organization of the Islamic Republic of Iran	Trade union organization	Inviting the nursing community to take part in the festival, presenting a collection of related works in accordance with the 10 sections of the festival, and providing an approved list of nurses who lost their lives because of Covid-19 to include them in the book "Corona according to health martyrs"
Hacoupian	Private	Sponsorship of the festival and funding special awards for the selected works and winners
Medical Ethics Association	A non-governmental organization (NGO)	Accompanying and participating in the festival, especially in the section "Corona according to Health Humanities"
Institute for Humanities and Cultural Studies	University of Tehran : Academic Center for Education, Culture, and Research	Accompanying and participating in the festival, especially in the section "Corona according to Health Humanities"
Scientific Olympiad of Iranian medical students	Governmental: Talent Organization of the Ministry of Health and Medical Education	Introducing the subject of "Corona Narrative" as the focus of the "Health Humanities" section in the Scientific Olympiad of Iranian medical students to include the selected works in the book "Corona according to health humanities"
Iran MS Society	The non-governmental organization (NGO)	Inviting members of the Iran MS Society to record and submit personal challenges and experiences of dealing with Covid-19 in accordance with the 10 sections of the festival
Iran Autism Association	The non-governmental organization (NGO)	Inviting members of the Iran Autism Association to record and submit personal challenges and experiences of dealing with Covid-19 in accordance with the 10 sections of the festival
Iranian National Museum of Medical Sciences History	Governmental: Tehran University of Medical Sciences	Accompanying the festival in holding special meetings and events, in addition to presenting related works, especially in the field of medical history
Food and Drug Administration	Governmental: Ministry of Health and Medical Education	Inviting subdivisions of the organization to take part in the festival and to submit related works in different sections of the festival

### Participation with 3 international film festivals and 1 international painting festival

In addition to providing films for the special Corona section of the 3 Iran International Film Festivals (cf. "Attracting organizational and professional support"), CORONAREVAYAT also supervised the selection and judging process of films in the special Corona section of these festivals.

**Table 4.** Frequency of works in the 10 sections of CORONAREVAYAT

Section	Number of works in each section	Percentage of works in each section
Corona according to image	3361	33.53
Corona according to cinema	315	3.14
Corona according to literature	1458	14.54
Corona according to self-sacrifice (Health Martyrs)	189	1.88
Corona according to public education	2564	25.58
Corona according to social responsibility	198	1.97
Corona according to media	394	3.99
Corona according to radio and television	1396	13.92
Corona according to health humanities	116	1.15
Corona according to research	31	0.3

CORONAREVAYAT submitted 58 documentaries (IRNA, 2020b), 123 short films (Medical Council of the Islamic Republic of Iran, 2020c), and 134 films and animations (Cinema Press, 2020) to each of the 3 aforementioned festivals, respectively, and participated in their closing ceremonies for award prizes to the best films (Table 5).

CORONAREVAYAT also participated similarly in the International Festival of Paintings for Pediatric Patients (IFPPP), and some of its managers attended the closing ceremony of IFPPP to honor the winners (Medical Council of the Islamic Republic of Iran, 2021d).

**Preparing and publishing 10 volumes of CORONAREVAYAT books**

From the 10 sections of CORONAREVAYAT, the selected works of 9 sections (all but "Corona according to research") were collected and compiled in the form of 9 volumes. In addition to the printed version, the electronic version of these 9 books was also prepared and published. In the middle of the project, at the discretion of the policy council, the preparation of the book "Corona according to research" was removed from the agenda, and was replaced by the book "Corona according to the managers of Iran Medical Council".

**Table 5.** CORONAREVAYAT Cinematic Contributions; Number and subject of the selected films in the Corona section of festivals partnered with CORONAREVAYAT

The name of the film festival partnered with CORONAREVAYAT	Number of works submitted by CORONAREVAYAT to the Film Festival	Name of the best film(s) awarded in the special Corona section of the Film Festival	The subject of the best film(s) awarded in the special Corona section of the Film Festival
Iran International Documentary Film Festival: Cinema Verité	58	1- First Prize: Pesqeleh 2- Second Prize: The 19 <sup>th</sup> Segment 3- Third Prize: Narrow Breath 4- Special Award: Dawn is there	1- Self-sacrifice of medical staff in Yazd 2- Accompanying the voluntary burial of the patients who have died of Covid-19 3- How did Corona start in Qom 4- Special Award: A nurse's mobile film about nursing and filmmaking simultaneously
Iran International Film Festival for Children and Youth	134	The Last Visit	A look at the life story of the first doctor who died of Covid-19 in Kashan
Tehran International Short Film Festival	123	Unseen	The Impact of the Covid-19 Epidemic on Interpersonal Relationships



The electronic version of the CORONAREVAYAT book collection has been prepared in ePUB3 format, which in addition to texts and photos, also contains videos, podcasts, links, and interactive content to form multimedia books (Academic Center for Education, Culture and Research, 2021), and can be updated even after the closing ceremony of this event (Table 6).

### Organizing 2 independent events and participating in 7 national events

In addition to the closing ceremony of CORONAREVAYAT held on March 2021, in which the winners of the various sections were introduced and honored (Tasnim News, 2021), the festival also held an independent ceremony to unveil its first book (Corona according to the image) (Mehr News Agency, 2020c).

The virtual exhibition of the "Memorial of Health Martyrs" was another event that the festival held with the participation of the Iranian Artists Forum. The exhibition started on National Doctor's Day (September 10, 2020) and lasted for 7 days, displaying portraits of the physicians and nurses who lost their lives to Covid-19, which was donated to the festival by a painter (IRNA, 2020a).

Unveiling the book "Corona according to health humanities" in the "8<sup>th</sup> Annual Congress of Iranian Medical Ethics" (Medical Ethics and History of Medicine Research Center, 2020) and unveiling the book "Corona according to media" in the press office of the Ministry of Culture (Medical Council of the Islamic Republic of Iran, 2020) were 2 other participatory events hosted by CORONAREVAYAT. Moreover, the closing ceremony of the 3 film festivals and 1 painting festival mentioned above is included in the subcategory of CORONAREVAYAT participatory events.

### Attracting the support and companionship of artists and organizations

The announcement of the readiness of several filmmakers to take part in CORONAREVAYAT and the use of the works collected in this project to produce films and television programs were other outcomes of the CORONAREVAYAT event.

**Table 6.** CORONAREVAYAT Books; Name, type, and chapters of each book

Book Name	Book type	Book chapters
Corona according to the image	Both print and electronic version	Photos, designs, organizations, children's paintings, and calligraphy
Corona according to cinema	Both print and electronic version	Documentary, short film, and children and youth films (documentaries, short films, animations, web series)
Corona according to the literature	Both print and electronic version	Narratives, short stories, novels, and poems
Corona according to self-sacrifice (Health Martyrs)	Both print and electronic version	List of health martyrs, health martyrs according to film, health martyrs according to media, health martyrs according to literature, and portrait of health martyrs
Corona according to public education	Both print and electronic version	Videos, posters, infographics, and pamphlets
Corona according to social responsibility	Both print and electronic version	Reports of Iranian universities of medical sciences, contributions at a glance, and attachment
Corona according to media	Both print and electronic version	Reports, interviews, and notes
Corona according to television	Both print and electronic version	TV reports, news reports, combination programs, clips, short films, TV documentaries, University section, and the special section
Corona according to radio	Electronic version only	Combined programs, trailers, shows, narratives, dialogues, podcasts, and the special section
Corona according to health humanities	Both print and electronic version	Essays, interviews, translations, libraries, webinars, and conferences
Corona according to the managers of the Iran Medical Council	Electronic version only	10 video interviews with 10 managers of the Iran Medical Council

In this regard, a prominent Iranian filmmaker made a short film on the subject of "health martyrs" and donated it to the festival on National Doctor's Day. The CORONAREVAYAT teaser was made by another filmmaker and was donated to the festival (Medical Council of the Islamic Republic of Iran, 2020).

Attracting the cooperation and support of governmental institutions (cf. Table 3) was among the other achievements of the festival. Obtaining the financial support of a private company (Hacoupian) for the project was another contribution of CORONAREVAYAT, which accelerated and facilitated the festival process (Medical Council of the Islamic Republic of Iran, 2020).

## Discussion

CORONAREVAYAT was formed in the context of the *public participation paradigm*, an interactive approach to science communication that considers a role beyond the receiver of information for the audience, in a way that engages the audience like other stakeholders in a communication process (Claessens, 2007). Using an innovative form of the *media campaign* in the context of integrated communication, CORONAREVAYAT not only obtained significant contributions from health professionals and artists, but was also able to gain the attendance and support of the public. The quantity and quality of the works registered in the festival show that its effort in a *fusion of horizons* (Vessey, 2009) is relatively fruitful and its primary products (such as the narratives collected in the ten-volume book collection) can be considered as the raw materials for the formation of secondary products (such as feature films and TV series). In this regard, after the publication of CORONAREVAYAT books, several requests have been made to the festival secretariat by filmmakers and producers.

A review of the statistics available in table 4 indicates that the image-oriented sections of the festival were better received than the text-oriented sections, in a way that "Corona according to image", with 33.53%, has the highest number of works. The section "Corona according to public education", which is the second best received section in terms of frequency, with 25.58% of works, is mainly image-oriented. As shown in table 6, three of the four chapters of the book "Corona according to public education" consist of image-oriented sections (videos, posters, and infographics) and only one part of it (pamphlets) is text-oriented. This image-to-text dominance is an important finding obtained from table 4, which can be attributed, on the one hand, to the ease of preparing image-based works with modern digital tools (especially cellphones) and, on the other hand, to the greater desire of social media users to receive and share photos and videos compared to text and articles.

As can be seen in table 5, another evidence of the ease and importance of creating image-based works with modern digital devices is that among the selected documentaries in the festival "Cinema Verité", the special jury award was given to a mobile film prepared by a nurse while serving as a health professional in the Corona section of a hospital. The jury said in a statement that documentation during the pandemic requires the minimal use of persons and tools of filmmaking to avoid endangering their own and the others' health, and since the aforementioned mobile film has observed this point well, it deserves the special jury award.

Furthermore, a look at the bottom of table 4 shows that the least participation was seen in the most academic and article-oriented sections of the festival, that is, health humanities (1.15%) and research (0.30%). However, the comparison of these two sections is also worth considering because the rate of participation in the health

humanities section was 3.8 times the rate of participation in the research section. However, the former, contrary to the latter, is not a concept that the public and many of the target audiences of the festival are familiar with, and one of the sub-goals of CORONAREVAYAT has been to introduce this concept to its audience.

The relationship between health and humanities is as old as medicine. There are many philosophers, logicians, and ethicists who are interested in health, illness, and sickness, and there are many physicians with a love for literature and philosophy. Nevertheless, health humanities as an interdisciplinary field refers to a methodological, critical, epistemological, and integrated effort that combines health and humanities through an integrative approach, and not only putting them together through an additive approach. The pandemic was such that many could not wait for their opinions and ideas to become academic articles. Therefore, we do not encounter such articles in the book "Corona according to health humanities", but what has been collected includes the dialogue of humanities with subjects related to the pandemic and health.

The fact that the section "Corona according to research" had the least participation can be viewed from another perspective. It seems some concepts (such as research) have become so academically entrenched that academics are not eager for them to be associated with a media campaign in the public sphere. The ambiguity in the definition of applied research also adds to the complexity of this issue. This finding may to some extent reveal the inability of universities in the field of science communication. While pure research works are rarely included in this project, interdisciplinarians and professionals, who are usually in a more precarious position at universities, have been more involved with the festival.

Narrative medicine, like health humanities, was one of the concepts that CORONAREVAYAT sought to help identify in the context of the pandemic. In narrative medicine, we are confronted with medicine as narrative, and the art of the physician is to be able to enter the patient's story (i.e., narrative) and empathize with him or her. This ability is more prominent in physicians who are more familiar with art and literature. Accreditation of this sort of empathy via narrative medicine helped CORONAREVAYAT promote the culture of narrative medicine in the public sphere. The reflection of these teachings is evident in the written and illustrated narratives that have reached the secretariat. In this way, the festival tried to keep its distance from two of the project's biggest threats - infodemic and health anxiety. Of course, CORONAREVAYAT's first preparation to avoid these threats was to prefer the "public participation" paradigm to the "information dissemination" paradigm in the project blueprint, otherwise, there was the risk that with the dominance of the "information dissemination" paradigm through a direct vertical training (from top to bottom), CORONAREVAYAT, like many others, would exacerbate the infodemic and health anxiety during the pandemic.

A comparison of tables 2 and 6 shows several differences between the sections of each narrative (Table 2) and the chapters of each book (Table 6). This difference is a weakness of the festival from one point of view and its strength from another point of view. It is a weakness as it indicates inaccuracy in announcing the call and shows that there has not been enough scrutiny and accuracy in compiling the parts of each section. However, it is a strength because it shows the flexibility and dynamism of the project. In other words, due to the novelty and unpredictability of the project, managers, and judges of different sections of the festival, in full coordination with the secretary, monitored the registered works regularly and corrected the operational defects of the project in proportion to receipts and feedbacks. This point can be

explained more concretely by mentioning a few examples.

For instance, it was observed that more than 90% of the posters registered in the "Corona according to image" section had educational content. Thus, the project secretary, in a meeting with the managers of the "Corona according to public education" and "Corona according to image" sections, concluded that the "poster" should be considered as one of the sections in "Corona according to public education" and the few posters that do not contain educational content should be included and judged in the "Design" chapter of the "Corona according to Image" collection. It was through the same coordination and daily monitoring of the received works that the "feature film" chapter was removed from "Corona according to Cinema" or the "Novel" chapter was added to the "Corona according to Literature" section. Similar minor modifications were made in the reorganization of the sections "Corona according to public education", "Corona according to radio and television", "Corona according to health humanities", and "Corona according to self-sacrifice" through the same coordination and daily monitoring of the received works. It provided a good standard for categorizing the 10-volume CORONAREVAYAT book collection and judging the works separately in each of these sections.

A review of table 3 shows the cooperation of organizations, some of which have rarely collaborated with peer and partner institutions. Providing the right environment for the formation of participatory partnerships in these 28 organizations was one of the most important strengths of CORONAREVAYAT, which made many of the festival's weaknesses go unseen. For example, the responsibility of reporting the project was primarily assigned to the public relations of the Medical Council, but along the way, challenges and disagreements arose between the festival secretary and the Council's public relations. In a way, the festival news coverage process was interrupted for a short time. However, since ministerial, academic, cinematic, and media arms were added to the festival news body (cf. "informing the public and target audience"), this internal conflict was not seen in the public sphere, and the festival's news and actions disseminated through the communication channels accompanying the festival.

## **Conclusion**

**Limitation:** Since our action research was conducted during the pandemic period, we faced several limitations, especially at the beginning of the research, when achieving a comprehensive plan required in-depth interviews with interdisciplinary health and media experts (cf. Method: In-depth study and interviews to achieve a comprehensive plan). The first limitation was that it became very difficult to conduct lengthy face-to-face interviews. To overcome this limitation, we used video calls in some interviews to turn this threat into an opportunity to find out the opinions of some well-known Iranian figures in the fields of health and media - who lived outside the geographical borders of Iran - to learn how the fields of media and health interact in other countries during the pandemic period.

Another limitation of this action research was the organizational culture of the medical council, which institutionally narrowed the field to extracurricular activities. As CORONAREVAYAT was a media campaign with a public participation nature, it required a certain agility that is essential to the dynamism of media activities, especially in the age of modern media. However, due to extra-organizational bureaucratization and intra-organizational parallelism, the medical council, willingly or unwillingly, repeatedly broke the festival dynamism and made the project

difficult. However, the slow and continuous networking that CORONAREVAYAT formed between art institutions (especially cinematic organizations) and the medical council resolved this problem. In a way, many of CORONAREVAYAT's works were done by artists who volunteered in the festival, for example, producing and distributing the festival's teasers, designing and producing posters and advertisements, making and publishing video clips donated to the festival on various occasions (such as National Doctor's Day), painting portraits of health martyrs and donating them to the festival, and setting up a virtual exhibition in "The memorial of health martyrs" in the Iranian Artists Forum are evidences of this networking that can be referred to as "invisible hands" to overcome internal barriers.

It was the same networking that helped the festival overcome the constraints resulting from the Covid-19 pandemic. Since the media campaign was linked to holding some events and face-to-face encounters, and the pandemic did not allow such meetings to be held, and the medical council, due to its position, was also opposed to such measures, the responsibility for such events was given to accompanying festivals to hold events to keep CORONAREVAYAT's name and message alive throughout the year.

Although the pandemic affected the whole world, including cinema, none of the world-renowned film festivals dedicated a separate section to Covid-related films. Under these circumstances, CORONAREVAYAT persuaded 3 Iran International Film Festivals (Cinema Verité, Tehran Short Film, and International film festival for children and youth) to dedicate a special section to "Corona" films and to participate in organizing, selecting, and judging the works of this section.

The achievements of CORONAREVAYAT revealed that the health sector, by benefiting from social and artistic participation in different communities, can solve many multi-faceted health-oriented problems that have roots outside of the health field. This integrated interdisciplinary approach can be suggested to health policymakers for facing multi-faceted health-oriented challenges, especially in low-income and middle-income countries.

### Conflict of Interests

Authors have no conflict of interests.

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