

社評 雙語道

突破接種瓶頸 保障長者健康

Efforts Needed to Boost Vaccinations for Health of the Elderly

原文

政府宣布延長大部分合共21間社區疫苗接種中心的營運至年底，並提出多項措施加快長者組別的接種進度。本港長者的疫苗接種率嚴重滯後，拖慢了構建群體免疫屏障的進度，也讓長者面對更高的健康風險。參考外國經驗，變種病毒隨時可能令疫情再次爆發，長者更是高危人群，而疫苗可以有效降低死亡率。因此政府確有必要做好針對長者及其家人的宣傳說服，減少他們對接種的誤解和顧慮，擴大外展接種工作，提供適當誘因，盡快彌補長者接種率低的狀況。

截至9月8日，本港12歲或以上合資格接種疫苗人口中，完成最少一針的接種率有63.6%，當中40歲至49歲的疫苗接種率最高達79.32%，20歲至29歲、30歲至39歲及50歲至59歲的接種率均已超過七成。但長者組別出現接種瓶頸，70歲以上接種率僅27%，80歲以上更只有12%。

本港長者接種率低，主要受錯誤資訊誤導。本港去年的接種意向調查顯示，近五成

長者願意接種疫苗，但自接種計劃開展以來，坊間存在很多誇大疫苗副作用的傳言，令不少有「三高」的長者不敢打針。加上長者容易聽信所謂「疫苗無用論」，形成「羊群效應」，令接種率一直裹足不前。其實，這些抗拒接種的理由都沒有科學根據，相反，長者是感染新冠病毒後出現併發症和死亡的最高危群組，更應加快接種。香港整體新冠肺炎的死亡率約1.8%，但70歲到79歲為7%，超過80歲的死亡率升至25%，可見長者更需要疫苗保護。面對傳播力非常強的變種病毒威脅，最穩妥有效的抗疫方法，就是長者盡快接種疫苗。

美國疫情因變種病毒肆虐再度惡化，參考其最新數據，疫苗仍然有效，且對長者十分重要。美國疾病控制與預防中心(CDC)指，全美有超過1.73億人已完成接種疫苗，已收到1.29萬例完整接種疫苗後仍染疫住院或死亡的報告，意味着出現嚴重「突破感染」的幾率不到1.3萬分之一，比不打疫苗而染疫的風險低很多。而美國未接種疫苗的成

年人染疫後住院的幾率是完成接種成年人的17倍。CDC研究也發現，美國高齡人口未完成接種疫苗，是導致重症住院及死亡率大幅攀升的主因。受變種病毒打擊嚴重的阿肯色、佛州、愛達荷、路易斯安納等州，都是老人群居的地區。而美國長者的接種率較英國低，也解釋了美國的病死率和住院率比英國嚴重的原因。

本港採用的復必泰和科興疫苗已在全球大規模使用，安全有效，具質素保證。除非有疫苗過敏等禁忌症，大部分人均適合接種疫苗，「三高」人群和長期病患者只要在藥物控制下病情穩定，也是可以接種的。特區政府要多舉辦健康講座，提供諮詢，為長者釋除疑慮。

另外，除了推出接種即日籌外，應多安排在公共屋邨、商場等地點進行外展接種，方便長者；商界應繼續推出針對長者的激勵措施，吸引長者接種。各位「老友記」為己為人，應聽取專業意見，盡快接種。

(摘錄自香港《文匯報》社評 2021-9-10)



●本港長者的疫苗接種率嚴重滯後。

資料圖片

譯文

The SAR Government announced that the operation of the city's 21 Community Vaccination Centres would be extended until the end of this year, and proposed a number of measures to speed up elderly inoculation. The elderly population in Hong Kong is lagging far behind other age groups in vaccination rates. This has led to a delay in herd immunity against COVID-19 and exposed older adults to a higher health risk. Learning from the experience of other countries, the variants of the coronavirus could cause a new wave of outbreak at any time. Elderly people are at high risk of contacting the virus and vaccines can effectively reduce mortality from COVID-19. Therefore, it is necessary for the Government to target its publicity effort to the elderly and their families in order to address their misconceptions and concerns about vaccination. The Government should also expand its outreach vaccination services and provide the necessary incentives as soon as possible to boost the vaccination rates among the elderly.

As of 8th September, 63.6 per cent

of those aged 12 or above who are eligible for vaccination had completed at least one dose of COVID-19 vaccine. The vaccination rate for those aged 40 to 49 had reached 79.32 per cent, and that for the age groups of 20 to 29, 30 to 39 and 50 to 59 had exceeded 70 per cent. However, the inoculation drive for elderly people appeared to have hit a bottleneck, with the vaccination rate for those aged above 70 and 80 being just 27 per cent and 12 per cent respectively.

Misinformation is the major reason for the low vaccination coverage among the elderly in Hong Kong. A survey conducted in Hong Kong last year on people's intentions to vaccinate against COVID-19 showed that nearly 50 per cent of the elderly were willing to receive vaccination. Nevertheless, ever since the vaccination programme was implemented, there have been exaggerated rumours about the side effects of COVID-19 vaccines that make those suffering from "three highs" — high blood pressure, high blood sugar and high cholesterol — fear vaccination. Besides, elderly people tend to believe in the theory that vac-

cines are ineffective and thus develop a herd mentality, causing the vaccination rate to remain stagnant. In fact, such reasons for resisting vaccination have no scientific basis. Instead, one should note that elderly people are at the highest risk of complications and death from the coronavirus, so it is necessary to speed up vaccination for the older age groups. The overall death rate for COVID-19 in Hong Kong is about 1.8 per cent, but the death rate is as high as 25 per cent for COVID-19 patients aged 80 and above, and 7 per cent for those aged 70 to 79. The figures show that elderly people are in greater need of vaccine protection. In the face of the threat of the highly contagious variants of COVID-19, the safest and most effective way to fight the virus is to ensure timely vaccination of the elderly.

The epidemic situation in the United States has recently worsened due to the spread of virus variants. According to the latest statistics from the country, vaccination is still effective and essential to protecting the health of elderly people. The United States Centers for

Disease Control and Prevention (CDC) noted that among the more than 173 million people who had been fully vaccinated in the United States, 12,900 were reported to have contracted the virus and were hospitalised or died as a result. It suggested that the chance of a severe breakthrough case is less than one in 13,000, meaning that people who are fully vaccinated have a much lower chance of getting infected than those who aren't vaccinated. Moreover, statistics show that in the United States, unvaccinated adults are 17 times more likely to be hospitalised than vaccinated adults if they contract the virus. Studies from CDC also show that low vaccination rates in the elderly population were a major factor leading to the significant increase in cases of severe hospitalisation and death. States with a high elderly population, such as Arkansas, Florida, Idaho and Louisiana, are particularly hard hit by the virus variants. The elderly vaccination rate in the United States is lower than that in the United Kingdom, and this explains why there is a higher hospitalisation and death rate in the former.

Hong Kong currently offers two types of COVID-19 vaccine—BioNTech and Sinovac—both of which are safe and effective and have been widely used around the world with their quality assured. Most people are suitable for vaccination, except those with contraindications such as allergic reactions to the vaccines. People who have "three highs" or chronic diseases could also get vaccinated as long as their conditions are kept under control by medication. The SAR Government should organise health talks and provides consultation services more frequently to ease the worries of the elderly. In addition to distributing same-day tickets at the Community Vaccination Centres, the Government should also provide outreach services in places like public housing estates and shopping malls to facilitate elderly vaccinations. On the other hand, businesses should continue to roll out incentives to encourage elderly people to get vaccinated. It is hoped that all elderly people in Hong Kong can listen to professional advice and get vaccinated as soon as possible in order to protect themselves and others.

理解純理功能 思考翻譯方法

恒 大譯站

隔星期一見報

英國著名語言學家Michael Halliday (韓禮德) 開創了系統功能語言學，其理論中一個重要的主軸，是把語言功能歸納成三個純理功能 (metafunctions)：概念功能 (ideational)、人際功能 (interpersonal)、語篇功能 (textual)。我們用語言溝通時，同時傳達這三項意義，接收這三項資訊。這理論本身相當複雜精密，但我們簡化一點理解，也可成為一個不錯的概念框架，用來了解翻譯。

同一個意思 規律不一樣

概念意義簡單來說，是我們怎樣用語言語法詮釋人類經驗。我們經歷某些事情或感覺時，會怎樣用我們的語言刻畫。Halliday 在其1998年出版的文章《On the grammar of pain》就嘗試羅列英語表達痛感的方式，當中對比了英語、漢語、法語、俄語某些描述痛感的表達規律。其中舉了一個英漢對照的例子：英語的「My head aches」和漢語的「我頭痛」。詳細的分析讀者得讀其文章，但大概意思是中英語在這語義範疇有不一樣的規律，中文的「我頭痛」的語法與英語有異，不是「我的頭痛」的縮略版，而是「我」和「頭」是兩個不同的主體，也只有「我」佔了句子的主位 (Theme)。這其實可推演到更廣的中英語法規律，但在此不贅了。

人際功能簡單來說，是指語言中表達的情感、意

圖、取態、肯定程度等意義，反映交際雙方之間的權力架構、親密程度、交際距離等因素。最後，語篇功能主要是有關句子的主位和焦點的。我們怎樣編排句子裏各成分的次序也是意義的來源，系統功能語法中的主位 (Theme) 和主題 (Topic) 是兩個不一樣的概念。

簡單理解過這三個概念，我們可以嘗試把其應用於翻譯。我們翻譯文章或複檢譯文時，往往只考慮概念意義，但忽略了人際意義和語篇意義。

忽略前者，也就是說譯者沒把原文作者對某命題的態度、與另一交際方的關係、對事物的取態等意義恰當反映出來，只顧重現概念意義。忽略後者，往往是模糊了句子的焦點，甚至錯放重心，其實這也可衍生很大的誤解。

其實，由於不同語言的語法不一樣，要完全反映原文的焦點也不容易。甚至可進而問：應否反映原文的焦點？用什麼手段？是否有語法上的限制？在不同的情境應否有不同的處理方法？但起碼，譯者應該要意識到句子焦點的考量。

有了這些概念，我們可問一個更根本的問題，就是怎樣定義翻譯。我們一般預設翻譯必須在概念意義上某程度對等，才可進一步探討人際意義和語篇意義。但為何必定要這樣才稱得上翻譯呢？Halliday 的理論本身，這三項意義沒有層級關係，是同時藉語言 (或其他符號系統) 傳達的。那主要重現人際意義或語篇意義的文本，可否算是翻譯呢？那或許可以用來解釋那個翻譯老師常舉的例子：粵語的「食咗飯未？」該怎麼翻譯？

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趣談英語

逢星期一見報

BRITISH COUNCIL

LearnEnglish Teens

Reading skills practice: Shopping signs and notices

1. Circle your understanding: matching

Match the adverts with the shop or product and write a - d next to the number 1 - 4

- | | |
|------------------|--------------------------------|
| 1. advert A | a. an electrical shop |
| 2. advert B | b. a new department store |
| 3. advert C | c. a second-hand games console |
| 4. advert D | d. a sports shops |



2. Circle your understanding: true or false

Circle True or False for these sentences.

- The JR Sports sale starts in August.
True False
- The video console comes with five games.
True False
- The video console is good condition.
True False
- You get a free DVD player if you buy a camera from Telly's r'us.
True False
- You have to pay to use Jack and Jill's car park.
True False
- Jack and Jill's is open untill late.
True False



1. Check your understanding: matching
1. d 2. c 3. a 4. b
2. Check your understanding: true or false
1. False 2. True 3. True
4. False 5. False 6. True

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