Collective service

CASE STUDY

HARNESSING THE POWER OF LOCAL JOURNALISM TO SAVE LIVES DURING PUBLIC HEALTH EMERGENCIES

Health experts and journalists combine forces to combat misinformation in Eastern and Southern Africa

Public health emergencies are on the rise. Climate change, protracted displacement, and other crises each play parts in the increasing intensity and frequency of health emergencies in the Eastern and Southern Africa Region (ESAR). As more and more people grapple with this new reality, public officials and emergency responders have a responsibility to ensure communities have access to information that can keep them safe.

Efforts to provide health messages to a large global audience at warp speed have been impressive in recent years, yet the specific needs of communities in low- and middle-income countries often get missed. As the information gap widens, people's health is put at further risk.

To rectify this discrepancy, the Collective Service intensified its risk communication and community engagement (RCCE) efforts by teaming up with some of the most trusted information sources: local journalists. Offering reporters access to top-notch health expertise and mentorship, a newly formed Media Taskforce improved the flow of accurate, tailored, and up-to-date health information to communities in need during the COVID-19 pandemic, and continues to do so today.

The Media Taskforce is providing journalists with the tools they need to report on health crises as they emerge— from Ebola and monkeypox to cholera and mosquito-borne illnesses. And in an age when misinformation abounds, the platform on offer plays a key role in combatting rumours that are a matter of life and death for community members. Co-led by Internews and the Collective Service under the UNICEF/IFRC-led RCCE Technical Working Group in Eastern and Southern Africa, the Media Taskforce is continuing full-speed ahead as rising temperatures and climate events, such as El Niño, exacerbate threats to people's health across the region.

In Eastern and Southern Africa, the Media Taskforce is now a fixture—institutionalized in the public health emergency response structure and accessed regularly by journalists keen to convey the most accurate information possible in order to save lives.

COMMUNITY INSIGHTS DEMAND COMMUNITY SOLUTIONS:
ESAR Media Taskforce comes to life

Health and humanitarian responders have long known that engaging community members in emergency response results in better outcomes. Gaining access to community feedback—the questions, suggestions, beliefs, and observations of those affected—helps health workers customize interventions and messaging to address individuals' specific needs. Utilizing community input to shape the emergency response not only fosters trust and combats misinformation but also empowers those affected by giving them a voice in the process.

While work in the RCCE space had been advancing at a steady pace before 2020, the COVID-19 pandemic shone a bright light on the need to accelerate community listening. Misconceptions and rumours were winning the war. To address a life-threatening infodemic, a Media Taskforce was created in ESAR to bridge the gap between public health experts and regional and local media.

The Media Taskforce narrowed in on some key reasons for the infodemic:

➢ **Public health messaging created at the global level wasn't resonating with local audiences in ESAR.** Content written was generic, not specific. Accurate, but not relatable. And scientifically solid, but inaccessible to the intended audience.

➢ **Health and humanitarian responders weren't able to "close the loop" on community feedback.** Even though data was pouring in about people's perceptions and beliefs, there wasn't a solid structure in place to ensure that media outlets had access to this feedback or could contribute to it.

➢ **Regional and local media could not gain access to reliable health expertise.** With business and politics highly prized in many newsrooms, regional journalists covering the pandemic were stretched thin and couldn't keep up with the technical aspects of the virus and ever-changing health advice. High turnover in newsrooms also contributed to the obstacles of accurately reporting the crisis.

Continuous Feedback Loop

1. Identification of informations voids, information needs and rumors trends
2. Media dialogues focusing on priorities for the region
3. Capacity of media is strengthened to cover priority topics
4. Journalists report back to their communities

COVID-19 INFODEMIC

> **❝I have found the dialogues to be timely and informative to journalists with topics like the COVID-19 pandemic and Ebola.❞**
>
> *Mike Mwaniki, Kenyan journalist living in the USA.*
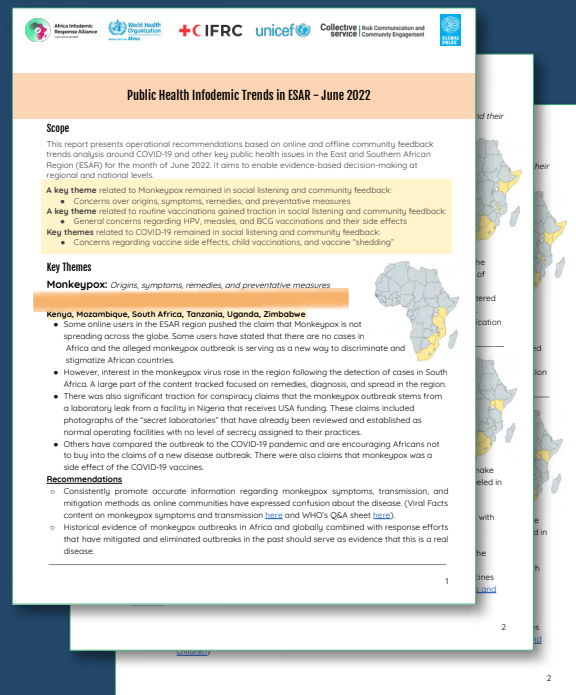
Since communities rely on and trust regional and local journalists for lifesaving information, the Media Taskforce decided to host media dialogues to help these influencers gain a solid grasp of technical health aspects and skills to convey information in a relatable and accurate manner.

"Journalists in this part of the world had not been trained [to cover] the novel coronavirus, unlike other infectious diseases like Ebola and HIV, so we needed a forum to provide timely and accurate scientifically sound messages to the masses," says Christophe Hitayezu, Rwandan journalist and Internews Health Media Mentor.

Hitayezu utilized a WhatsApp group he built of more than 100 journalists from over 20 African countries. A journalist himself, he had a hunch these peers would be interested in getting ahold of solid, up-to-date science to relay to their audiences.

Thanks to a strong start on Hitayezu's part, the team hit the ground running—hosting interactive online gatherings between health experts, journalists, and media mentors. The dialogues provided the access and tools needed to convey accurate public health information to local audiences, demystify technical aspects of the virus, and correct misinformation before it could spread widely. Importantly, the dialogues were inspired by community feedback and contributed to it.

> **❝What journalists learn from the media dialogues sticks with them. Journalists continue to use their health and science reporting skills in their day-to-day work in their media houses. These dialogues benefit their audiences because they are getting accurate information!❞**
>
> *Christophe Hitayezu, Internews Health Media Mentor.*

While the dialogues started during COVID-19, they didn't end there. Instead, they continue to grow in Eastern and Southern Africa as the need for information regarding public health emergencies continued.

THE ANATOMY OF A MEDIA DIALOGUE

Media dialogues are accessible virtual gatherings between public health experts, journalists, and media mentors. The dialogues are meant to be interactive and allow space for journalists to ask in-depth questions and to share feedback on public health messaging. "Media dialogues create spaces where journalists can very freely share concerns coming from communities and also ask questions from health experts who are primed and ready to engage," explains Rachel James, UNICEF's Interagency RCCE Coordinator.

> " We need to really collaborate as journalists and humanitarian workers because we do have a common goal. "
>
> *Esther Nakazzi, Science and Technology Reporter, Founder of the Health Journalist Network in Uganda.*

The theme

The Media Taskforce uses community feedback data to determine the theme of each gathering. Taskforce leaders identify community feedback trends, poll journalists, and cover topics that will protect the greatest number of people. When COVID-19 vaccines were released, but not trusted, the Media Taskforce offered media dialogues specifically tailored to vaccine messaging. When the data pointed towards rumours that patients were being killed—rather than treated—in hospitals, the Media Taskforce gave attendees access to doctors who could detail the kind of treatment they were providing.

Media dialogues can't work unless they are informed by community feedback, which ensures that local issues are driving the themes. This theory continues to influence the topics covered in media dialogues in ESAR.

The agenda

The virtual gatherings allow space for journalists to gain in-depth insight from public health experts, ask meaningful questions, and build their skills.

First, public health experts speak frankly on the theme, adapting it to a regional context. All information is on-the-record, so journalists can get direct quotes and relatable data. The Media Taskforce invites experts such as virologists, epidemiologists, practicing clinicians, social scientists, fact checkers, ministry of health officials, and others to offer insights that journalists can use in their reporting. Often, these dialogues are the only opportunity for regional and local journalists to interact with these experts.

Next, journalists have the opportunity to share concerns from their audiences and ask questions of the speakers. This isn't your typical Q&A. Instead, it's an open dialogue where the health experts and journalists learn from one another and exchange genuine ideas, misunderstandings, and teachings.

Lastly, veteran journalists and media experts offer skills upgrades to the regional and local journalists. Media mentors cover subjects such as effectively reporting technical data, storytelling tips, best practices, and warnings on how media perpetuates stigma when reporting public health issues.

"This worked because it was such a collaborative effort," remarks Wayne Sharpe, a Director at InterNews who was critical in connecting the dots of the Media Taskforce.

ESAR-RCCE Media Dialogue

Monkeypox:
What Journalists Need to Know

Join Us!
17 August 2022
15:00 CAT
16:00 EAT

Dr. Otim Patrick Cossy Ramadan
Health Emergency Officer
World Health Organization

Brian Kanyemba, Managing Director
HIV Prevention & Technical Advisor
Advocacy for Prevention of HIV/AIDS

Let's talk about it!

The resources

400+ JOURNALISTS ACTIVE IN WHATSAPP GROUPS COVERING PUBLIC HEALTH EMERGENCIES

The media dialogues are just the beginning of the support offered to journalists by the Media Taskforce. Recognising that bandwidth issues prevent many reporters from attending, the Media Taskforce offers audio clips so that broadcast stations have soundbites to air and makes graphics available to digital and print outlets. In addition, media mentors offer real-time advice and fact-checking via the WhatsApp groups. The WhatsApp groups—some of which have grown to more than 400 participants—allow journalists to rapidly share community concerns and health information with one another. The dialogues are available on YouTube, which enables journalists to check the conversation again and allows organisers to track the number of views.
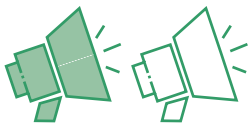
30+ MEDIA DIALOGUES HELD IN ESAR

Tebby Otieno, a journalist from Kenya, reflects on the resources provided: "I won the annual Journalism Excellence Award of the Media Council of Kenya, for a story related to COVID-19, my first ever award. Bringing this kind of conversation that everybody can access, me included, really impacted my way of telling stories."

ON-TOPIC

The ESAR Media Taskforce harnesses community feedback data and trends, in addition to journalist polls, to determine which public health topics to cover in media dialogues. Here, a sampling of media dialogues:

➢ Monkeypox: What journalists need to know

➢ Vaccines and Reproductive Health

➢ Tips for reporting on a safe return to schools

➢ COVID-19: Four scenarios for how the pandemic will proceed in the region

➢ The Ebola outbreak: Latest data for journalists

➢ Ebola infection prevention and control: Reporting tips

➢ El Niño in ESAR: What journalists need to know

CONCLUSION

Public health messaging often overlooks local nuances, leading to a disconnect between global or national-level communications and the specific information required for local initiatives. And misinformation—whether intentional or not—poses a risk to families' safety. Creation of a Media Taskforce is helping to close the loop on community feedback and amplify the most helpful public health messages.

1. Challenges

In the early stages of the Media Taskforce, there were technical challenges in reaching journalists, such as poor internet connectivity. Recognizing the potential of WhatsApp as the most widely used and fastest-growing communication platform in ESAR, the Media Taskforce began sharing audio clips and distributing them to hundreds of journalists who otherwise could not participate. There is still work to be done in reaching hyper-local media outlets, but peer-to-peer networking amongst journalists themselves is helping to bridge that gap.

2. Learning

While journalists in ESAR do not always have "health" or "science" beats, there is a hunger for technically accurate, reliable, and accessible information during public health emergencies. Building the capacity of regional and local reporters during one crisis ensures they are able to better serve their audience—and the wider public—every time a new emergency arises. The WhatsApp groups created during the COVID-19 pandemic are active and continue to grow, which is promising.

3. The Way Forward

Climate change is exacerbating public health emergencies, putting more people at risk every year. Establishing media dialogues and WhatsApp groups before crises arise ensures that journalists know what to look for when writing their stories. Humanitarian actors and ministries of health should invest in these platforms at the start of outbreaks and in an ongoing way. The ESAR Media Taskforce is now institutionalized in the health response architecture in ESAR, remaining ready for evolving pandemics and future public health emergencies.

LINKS:

Collective Service ESAR Region: https://www.rcce-collective.net/about-us/subgroups/esar-twg/

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Collective service

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