# Health Communication
# BA (JMC) 108
# UNIT 2

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**Introduction to Health Journalism**

1. Health journalism: concept, need and importance
2. Roles and responsibilities of a health journalist
3. Sources of health reporting: NFHS reports, UNICEF reports, WHO, Census
4. Role of media in public healthcare campaigns: Polio, HIV/AIDS, reproductive child health

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**Health journalism: concept, need and importance**

- Journalism is a system of collecting, analyzing, reporting, and broadcasting information which is made up of facts about situations.
- Health journalism also called medical journalism focuses on dissemination of health and medical information and related subjects in media.
- The objective is also to target the regular reader/audience rather than only on health or medical professionals by releasing health related information through media sources.

- Health journalism is also typically defined as a subsection of science journalism. Science news is often divided into two main categories-
-news that popularizes scientific findings and
-news that discusses scientific issues within a broader societal context.

- "Health communication is a key strategy to inform the public about health concerns and to maintain important health issues on the public agenda". (New South Wales Department of Health, Australia, 2006)
- Health communication is an approach which attempts to change a set of behaviors in a large-scale target audience regarding a specific problem in a pre-defined period of time". (Clift and Freimuth, 1995, p. 68)
- The Centers for Disease Control and Prevention (CDC) define health communication as "the study and use of communication strategies to inform and influence

individual and community decisions that enhance health" (2001; U.S. Department of Health and Human Services, 2005)

- Health communication is a process for the development and diffusion of messages to specific audiences in order to influence their knowledge, attitudes and beliefs in favor of healthy behavioral choices" (Exchange, 2006; Smith and Hornik, 1999)

## Need

- Health communication necessarily promotes health information usually through public health campaigns covid-19, polio, AIDS, TB, blood donation and many other.
- It includes the relationship between doctor and patient as well. Key purpose of communicating health information is to influence personal health choices.
- Effective health communication should be tailored as per the need of audience within a given context. Extensive research is required.
- Interpersonal and mass-level communication is necessary to assess and designing of health communication strategies.

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- Communication plays an important role in creating awareness regarding health communication.
- There are two important approaches that traditionally the government follows to promote healthy behavior-

1. Education informs people about both the healthy and unhealthy behaviors like information healthy eating habits, nutritional deficiency, etc.

2. Regulation is when government tries to regulate the behavior of people through passing and enforcing of laws. The regulatory approach is followed when people need to be refrained from harming or infecting others.

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## Importance

- Medical and health issues are commonly reported and are of importance to most people as they **interest** them. It has an **impact on medical behavior** and creates awareness.
- General or common people lack **awareness** on medical/health issues. To initiate health conducive behavior and make **related protocols**, both curative and preventive strategies are important, to fight the triple burden of disease.
- It also promotes **health care usage** and also gives a **boost to government policies.**

- With coming of **internet**, a lot of information is getting published/circulated through different platforms. So **dissemination of scientific/evidence based information is important** in public domain. Therefore the **need for trained professional manpower** is becoming important.
- People often read information on internet and question their physician. They also compare their symptoms, real or imagined, in an attempt to diagnose themselves therefore it is important to verify information and only publish information which is correct/factual.
- Positive stories can also influence the quality of an individual's health. These motivate for following of health related norms and behavior's.

## Roles and responsibilities of a health journalist

- The primary role of the health journalist is to question and uncover truths.
1. Discover and publish health related information that replaces myths, rumor and speculation.
2. Resist or evade government control
3. Inform and so empower public
4. Undermine those whose authority relies on a lack of public information
5. Scrutinize the action and inaction of governments, concerned bodies and public services.

6. Scrutinize businesses, their treatment of workers and patients and the quality of services.

7. Comfort the afflicted and afflict the comfortable, providing a voice for those who can't normally be heard in public.

8. Hold up a mirror to society reflecting its virtues and voices and also debunking its cherished myths.

9. Ensure that justice is done, is seen to be done and investigations are carried out where it is not being done

10. Promote the free exchange of ideas especially by providing a platform for those with philosophies alternative to prevailing one.

## Responsibilities

1. Responsibilities towards news organization
2. Responsibilities towards the sources
3. Legal responsibilities
4. Responsibilities towards readers and society
5. Responsibilities towards the profession
6. Responsibilities towards ethics

**Qualities of a health journalist**
- Nose for news
- An interest in life
- Love of language
- An alert and ordered mind
- A suspicious mind
- Determination
- Developing contacts
- Reliability and timeliness
- Objectivity and fairness

- Clarity of expression
- Team spirit
- Awareness about the subject
- Know facts
- Glossary of terms and phrases
- Befriend people, attend useful events
- Publish interviews to spread awareness

## Sources of health reporting: NFHS reports, UNICEF reports, WHO, Census

- Health is one of journalism's most complex and important reporting beats.
- Sources of information can be people, letters, books, files, films, tapes - in fact, anything which journalists use to put news stories together.
- There are three ways of collecting information. These are observation, interviewing, and referring to relevant documents.
- Sources like NFHS, UNICEF reports, WHO, Census are most important health information providers.

## Types of news sources

- **Primary sources:** Often the source is someone at the center of the event or issue. We call such people primary sources.
- **Secondary sources:** Secondary sources are those people who do not make the news, but who pass it on.
- **-Leaked documents:** These may occasionally be given to you, which have not been officially released to the press, by someone in a company or government department who does not want to be seen giving them to the media.
- **Internet:** Internet is another major source nowadays and has become the prime search option for every

individual. Internet also provides first hand information but the information taken from the internet must always be verified as the credibility of the information is always a question mark if not taken from the official link.

## Sources of information (categories)

**1. Local Sources:** Through newspapers' own reporters who gather the information from meetings, seminars, conferences, incidents, events, press conferences, public gatherings, confidential sources/personal contacts, direct from famous/eminent personalities, public, eye-witnesses, regular beats etc.

**2. National and International Sources:** Through the various international and national wire services, syndicates, feature agencies, news agencies like PTI, UNI, PTI BHASHA, UNI VARTA, REUTERS, ASSOCIATE PRESS etc.

**3. State and Regional Sources:** Through local

correspondents and stringers they may be local health workers or others.

**4. Various Individuals and Organizations:** They directly send their information to newspapers office through email or other methods.

**5. Government and Other Organizations:** Hospitals, Government officials/ authorities, Press Information Bureau, and Media/PR departments of various central and state govt. ministries and departments.

**6. Mutual Sharing of information** – with other newspaper offices, feature agencies.

7. Libraries, Internet, print material etc. which are already available.

8. Unidentified sources

**Sources for health reports**

**1. Primary Data:**

**a. Health Centers and organizations:** Hospitals, dispensaries, clinics, primary health centers, local administration bodies i.e. Panchayats, Gram Pradhan, Nagar Palika, Municipality Corporations etc.

**b. Health Professionals:** Doctors, Medical Officers of Govt. Health Centers, Health workers, NGOs etc.

**c. Observations:** Affected sites of rural and urban areas

**d. Events:** Health conferences & seminars, health melas & exhibitions, health camps etc.

**e. Contacts:** Public opinions, success stories, affected persons etc.

**2. Secondary Data**

a) **Reports of various national and international health organization:** Ministry of Health & Family Welfare, Ministry of AYUSH, Census, UNICEF, WHO, NFHS

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(National Family Health Survey), and many other organizations.

**b) Health publications:** Health Journals and Magazines, new innovations and research articles, online information etc., press releases on health

c) **National and International news agencies,** feature agencies and press releases.

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## Key Organizations

1. **NFHS**

- The National Family Health Survey is a large-scale, multi-round survey conducted in a **representative sample** of households throughout India.
- All NFHSs have been conducted under the **stewardship of the Ministry of Health and Family Welfare, Government of India, with the International Institute for Population Sciences, Mumbai, serving as the nodal agency.**
- The survey provides state and national information for India on fertility, infant and child mortality, the practice of family planning, maternal and child health, reproductive health, nutrition, anaemia, utilization and quality of health and family planning services.
- Each successive round of the NFHS has had two specific goals:

a) to provide essential data on health and family welfare needed by the Ministry of Health and Family Welfare and other agencies for policy and programme purposes, and

b) to provide information on important emerging health and family welfare issues.

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**2. UNICEF Reports:**

- UNICEF is fully committed to working with the Government of India and media is a significant stakeholder as well as key influencer in UNICEF's efforts to address the challenges in the life of children and women and to ensure that each child born in this vast and complex country gets the best start in life, thrives and develops to his or her full potential.
- The news report generated with the data of UNICEF is highly credible.
- UNICEF India recognizes that the health, hygiene, nutrition, education, protection and social development of children are all connected.

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- Targeting efforts for them at **all stages of their growth** – infant and mother, child and adolescent – and on a range of traditional programme fronts will see that inroads are made to ensure children not only survive, but thrive too.
- Journalist makes sure that the news stories are based on the official annual health statistics report of UNICEF.
- Quoting the right sources enhance and strengthen media's critical health report.

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**3. WHO Reports:**

- Reports of WHO helps in **extracting the data of multiple sectors of the government and partners** – including bi- and multilaterals, funds and foundations, civil society organizations and private sector – to **attain their health objectives** and **support their national health policies and strategies**.
- WHO has a **global health observatory forum** which is a gateway to health related statistics for more than 1,000 indicators for its 194 member states.
- The data is organized to monitor **progress towards the Sustainable Development Goals.**
- The forum **helps government, policy makers, journalists, film makers, researchers etc**. to monitor and communicate various health related data produced by WHO.

**4. Census:**

- Population Census is the total process of collecting, compiling, analyzing and disseminating demographic, economic and social data pertaining, at a specific time, of all persons in a country or a well-defined part of a country. It also provides the trends in population characteristics.
- An enumeration of people, houses, firms, or other important items in a country or region at a particular time.

- The **Indian Census is one of the largest administrative exercises** undertaken in the world.
- The decennial Census is conducted by the **Office of the Registrar General and Census Commissioner**, Ministry of Home Affairs.
- Until 1951, the Census Organisation was set up on an **ad-hoc basis** for each Census.
- Census is conducted under the provisions of the **Census Act, 1948**
- The information collected during the population Census is so confidential that it is **not even accessible to the courts of law.**

- The confidentiality is guaranteed by the **Census Act, 1948.** The law specifies penalties for both public and census officials for non-compliance or violation of any provision of the Act.
- **Source of Information:** The Indian Census is the **largest single source of a variety of statistical information** on different **characteristics of the people of India.**
- Researchers and Demographers use census data to **analyze growth and trends of population and make projections.**

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- The data collected through the census is **used for administration, planning and policy making** as well as **management and evaluation of various programmes** by the Government.

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*-It is rightly said that the sources aid information surveillance.* The main way of judging sources of information is on their reliability. *Evidence-based approach while writing health stories, ensures that proper and informed debates on public health issues takes place.*

## Role of media in public healthcare campaigns: Polio, HIV/AIDS, reproductive child health

- The primary role of media in public health care campaign is to **make aware and educate the public** on a particular health issue through extensive campaign using newspaper, magazine, poster, brochures, hoardings, bus/pole panels, radio, television, personal face to face contact, camps and most popular traditional mediums like puppet shows, nukkad natak etc.
- It motivates the public to change their behavior and adopt new practices towards preventive and curative measures against the disease.

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- Polio eradication Campaign was one of the most successful Health Communication Campaign in India.
- The WHO in 2012 had announced India as Polio free Nation. Success of this campaign lies deep rooted in villages where mass media as well as personnel efforts of vaccinators had contributed towards its success.
- Extensive campaign was run by the government of India to make aware about the HIV/AIDS motivating the public its preventive measures rather than curative measures.
- Likewise government also run in-depth campaign related to mother and child health to control the

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maternity mortality rate and child mortality rate and to adopt family planning methods to control the increasing population rate of India.

### 1. Polio Eradication Campaign

- Pulse Polio is an immunization campaign established by the government of India to eliminate poliomyelitis (polio) in India by vaccinating all children under the age of five years against the polio virus.
- The project fights poliomyelitis through a large-scale pulse vaccination programme and monitoring for polio cases. The Pulse Polio dates in 2016 were 17 January and 21 February vaccination on Sundays.
- History in India, against polio started in 1978 with Expanded Program on Immunization (EPI) by **WHO**. By

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1984, it covered around 40% of infants, giving three doses of OPV (Oral Polio Vaccination) to each.

- In 1985, the **Universal Immunization Program (UIP)** was launched to cover all the districts of the country. UIP became a part of child survival and safe motherhood program (CSSM) in 1992 and Reproductive and Child Health Program (RCH) in 1997.
- In 1995, following the Global Polio Eradication Initiative of the World Health Organization (1988), India launched **Pulse Polio Immunization Program** with Universal Immunization Program which aimed at 100% coverage. On 27 March 2014, the World Health Organization

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(WHO) declared India a polio free country, since no cases of wild polio had been reported in for three years.

- Role of Amitabh Bachchan as brand ambassador.
- Announcement of Polio Ravivaar (one Sunday of every month) was made.
- 'Transit vaccination' strategy was launched, with teams stationed at bus stands, railway stations, highways, markets and at congregation sites and provided polio vaccine to eligible children.
- Families were persuaded through logic, arguments and emotional appeal.

- An emotional appeal is designed to arouse emotions of audience and use the emotions as bases for persuasion.
- UNICEF brought Bollywood celebrity Amitabh Bachchan to impose anger appeal to those parents who have not yet taken their child to polio booth.
- Other celebrities contributed too.
- For generating team spirit Thomson Social launched a puppet show, which was shown at village haats, market places, panchayat grounds, seminars and other public meetings.

*Thomson special puppet show poster for generating team spirit*

Source: UNICEF, Working Paper 'A Critical Leap to Polio Eradication in India' June 2003
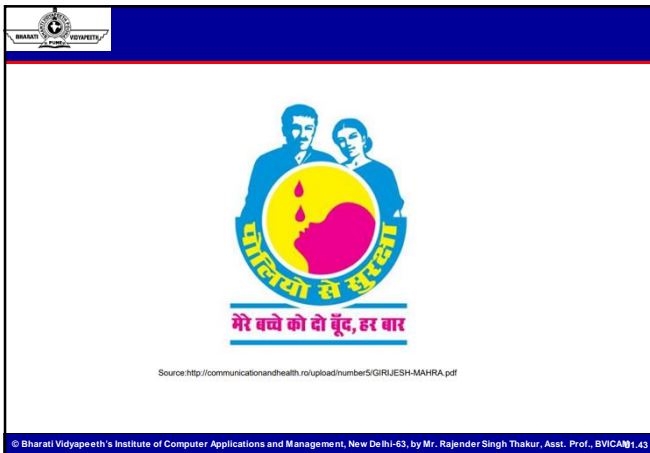
*Promotion of Polio eradication campaign through buses*

Source: Polio Booklet 2012, World Health Organization

*Amitabh Bachchan Posters with Polio Campaign tag line 'Do boond Jindagi Ki'*

Source: Polio Booklet 2012, World Health Organization

Source:http://communicationandhealth.ro/upload/number5/GIRIJESH-MAHRA.pdf

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## 2. HIV/AIDS

- Acquired Immune Deficiency Syndrome or Acquired Immunodeficiency Syndrome (AIDS) is a disease caused by a virus called human immune deficiency or human immunodeficiency virus (HIV).
- The disease alters human immune system, making people much more vulnerable to infections and disease.
- **Signs-**Weight loss more than or equal to 10% of the body weight; chronic diarrhea that lasts for more than a week, prolonged fever for more than one month (intermittent or constant); persistent cough; chronic

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progressive or disseminated herpes simplex infection; generalized lymphadenopathy (enlarged lymph nodes) for more than one month generalized pruritic dermatitis.

- India reported its first case of HIV among the commercial sex workers in 1986. From 3-5 million infected cases in India the government's efforts have led to a declining trend in recent years.

**Strategies adopted for control of HIV/AIDS**

1. National AIDS Control Programme (NACP)

- Prevention of new infections in high risk groups and general population through - Saturation of coverage of high risk groups with targeted interventions (TIs); Scaled up interventions in the general population
- Providing greater care, support and treatment to larger number of People Living with HIV/AIDS (PLHA);
- Strengthening the infrastructure, systems and human resources in prevention, care, support and treatment programmes at the district, state and national level; and

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- Strengthening the nationwide Strategic Information Management System.
- Surveillance and clinical management
- Control of STIs
- Ensuring blood safety
- Prevent new infection
- Care support and treatment
- Public awareness and community support
- IEC and social mobilization

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**Initiatives taken by the Government of India**

- Soon after the first cases emerged in 1986, the Government of India established the National AIDS Committee within the Ministry of Health and Family Welfare.
- This formed the basis for the current apex Government of India body for HIV surveillance, the National AIDS Control Organization (NACO).
- In **1992**, the Government of India demonstrated its commitment to combat the disease with the launch of the first National AIDS Control Programme **(NACP-I).**

- The **Phase II** of the National AIDS Control Programme was launched in **1999**. It was a 100% centrally sponsored scheme implemented in 32 States/UTs and 3 Municipal Corporations namely Ahmedabad, Chennai and Mumbai through AIDS Control Societies.
- The government designed and implemented **NACP III** (2007-2012) with an objective to "halt and reverse the HIV epidemic in India". All these efforts helped in a steady decline in overall prevalence and decrease in new infections over last ten years.

- Aiming for "AIDS Free India" the strategy and plan for National AIDS Control Programme Phase-IV **(NACP-IV)** has been developed through an elaborate multi-stakeholder consultative planning process for the period 2012-2017.
- The main strategies include intensifying and consolidating prevention services, increasing access and promoting comprehensive care, support and treatment, expanding IEC services, building capacities at national, State, district and facility levels and strengthening Strategic Information Management Systems.

- Majorly awareness campaigns
- NACO has been conducting regular thematic Mass Media campaigns on TV and Radio to cover issues of condom promotion, ICTC/PPTCT, STI treatment and services, stigma and discrimination, vulnerability of youth to HIV, ART, HIV-TB and blood safety.
- The AIDS Bhedbhav Virodhi Andolan (AIDS Anti-Discrimination Movement) had prepared many citizens reports challenging discriminatory policies, and filed a petition in the Delhi High Court regarding the proposed segregation of gay men in prisons.

- A play titled 'High Fidelity Transmission' has focused on discrimination the importance of the condom as compared with abstinence and illegal testing of vaccines.

**Role of the media in HIV/AIDS Prevention and Management**

- The primary aim of mass education on HIV/AIDS is to reach those whose HIV status is negative to encourage them to retain this status; to support those whose status is positive to urge them to be careful so as not to spread

the virus and to maintain hope through positive living; and generally to educate society as a whole to develop sustainable structures that will contribute to the preventive and effective management of HIV/AIDS.

- In communication, the focus has been on identifying methods of communicating messages on HIV/AIDS that will motivate individuals to change their attitudes and behavior.
- The strength of the media has been viewed as that of agenda setting.

- The desperation on the part of HIV/AIDS patient in seeking treatment for their infection has given rise to a sharp increase in "medical experts" who claim to have a cure for the disease. (The media brings out into the public arena for public debate such issues.)
- Example on AIDS campaign-Case Study: Balbir Pasha campaign

A few behaviour change media material used by the media campaign are:

TV Ad 1
TV Ad 2

https://www.youtube.com/watch?v=N41pGKIQZIU
Balbir Pasha Ad Campaign - Bar Condom Film

https://www.youtube.com/watch?v=d8mthqXNh7E
HIV/AIDS: NACO Prevention Music Video

TV Ad 3
TV Ad 4

https://www.youtube.com/watch?v=ranfi5mGkihU
TeachAIDS (Hindi) HIV Prevention Tutorial

https://www.youtube.com/watch?v=dVMw0VR91R4
NACO Promoting HIV testing among pregnant women

Source: Google Image

A Hoarding

Source: Google Image

A Poster

Source: Google Image

**Reproductive and Child Health (RCH) Programme**

- The RCH programme incorporated the earlier National Family Welfare Programme and Child Survival and Safe Motherhood Programme (CSSM) and added two more components – one relating to sexually transmitted diseases and the other to reproductive tract infections.
- The programme was formally launched on 15 October, 1997.
- The first phase of the programme was started with following aims:
a. To bring down the birth rate below 21 per 1,000

population

b. To reduce the infant mortality rate below 60 per 1,000 live births

c. To bring down the maternal mortality ratio <400/1,00,000 live births

d. 80% institutional delivery, 100% antenatal care and 100% immunization of children were other targeted aims of the RCH programme.

TV Ad 1



MHS- Freedays: Sanitary Napkins: Phase 1
Source: http://nrhm.gov.in/mediamenu/video-gallery.html

TV Ad 2



MHS- Freedays: Sanitary Napkins: Phase 2
Source: http://nrhm.gov.in/mediamenu/video-gallery.html

Poster 1      Poster 2

Source: http://nrhm.gov.in/mediamenu/iec-material/iec-print-media.html