

IMPROVING HEALTH COMMUNICATIONS: MEDIA RELATIONS WORKSHOPS, PAKISTAN NOVEMBER 2008

Facilitator's post-workshop report

Background

USAID/Pakistan's two-year TACMIL project, (Technical Assistance for Capacity building in Midwifery, Information and Logistics) aims to provide technical assistance to the public and private health sector to improve the service delivery of maternal, reproductive and child health. This project will contribute to a USAID strategic object of improved health in vulnerable populations in Pakistan. It will directly contribute to the improved quality and use of maternal, newborn, child and reproductive health services.

The project has four technical components. The purpose of the second component, targeted health information is to provide technical support to government officials and journalists in using data for decision making, policy making and general community awareness. Key documents include the Pakistan Demographic and Health Survey (PDHS).

The overall project context informed the workshop curriculum and preparation of all training materials and guest speakers.

Workshop dates and venues

Islamabad – 24-26 November, 2008 at the National Art Council
Karachi – 28-30 November, 2008 at the Avari Hotel

Course attendees

The course participant lists for both workshops are attached.
There were six participants for the Islamabad workshop and nine for Karachi.

Participants' English language skills

Although most participants spoke and understood English the facilitator maintained a simple and clear level of English delivery. In both the Islamabad and Karachi workshops there were at least two participants whose English language was minimal or somewhat limited. In these cases an Urdu-speaking Internews colleague translated key points. In addition the facilitator allowed group discussion time in Urdu, and an overview of discussion was translated back to the facilitator.

Journalist guest speakers

In Islamabad: Mr Amer Farooq, Editor of SHIFA NEWS monthly magazine (English language) aimed at health consumers

In Karachi, Ms Sheher Bano, Editor, Supplements and Education-zine, The News (English language) who also focuses on health reporting

Video record of workshops for USAID

Both workshops were videoed as required by USAID.

Workshop aim

The course aim was to encourage district level health directors and other health professionals to strengthen relationships with local and, where possible, provincial and national media. The wider context to this is the fourth technical component of the TACMIL project mentioned in the Background above, ie, using health data and information in promoting community awareness on MNCH.

Workshop Content and session methodology

The workshops were devised as highly-interactive. The facilitator acknowledged that participants were experts in their field with the ability to learn new skills to widen and build on that expertise. The facilitator indicated that the workshops would include practical exercises and be highly interactive. Each morning ten minutes was set aside for reflections on the previous day. At the end of each day participants were asked to indicate key learnings or thoughts on the day's work.

The curriculum for both workshops included the following:

- How do I see my organisation? Reviewing the mission and operation of the district health office, community perceptions of these and public benefit if the mission is successful. (Questionnaire and discussion).
- How important is the media in delivering a better healthcare system? (Brainstorm).
- Relationship between health officials and media. (Brainstorm).
- Journalist/s presentation on problems with health officials, followed by facilitated discussion, which lead to clearer understanding of each others' professional situations. Feedback session amongst participants.
- District, provincial and national media outlets and their audiences, precursor to matching the message to the target audience/s via the appropriate medium/media.
- How to communicate with media, proactive and responsive. What journalists are looking for to prepare news, stories, talkback programs. Compiling contact lists.
- Introduction to doing a good media interview – radio and TV.

- Elements of media event: media release writing, providing fact sheets, journalist invitation list, speaker invitation list.

Key methods to achieve workshop aim

All participants worked in small groups to plan the various components of a 'real' media event on a maternal or child health issue. Please see the media event plans for Islamabad and Karachi attached to this report.

During the workshop participants were trained in the skills required to plan and manage a media event to promote a particular health issue to target audiences via appropriate media. This included preparing a media release outlining the health issue, key messages to promote behavioural change in target group/s, an invitation list of key journalists and a list of key speakers at the media event who were also potential interviewees for media.

Course outcome

Groups presented their plans for the media event to the entire group on day three. The key outcome was a greater understanding that the planning, including internal communication, required for a successful media event reflects the preparation required in dealing with the media on a daily basis – and that the skills to do this can be developed.

Workshop Observations

Media event planning

The topic chosen by both Islamabad and Karachi participants was the (still) alarmingly high numbers of women dying during pregnancy. Key messages were the need for women to understand danger signs and present immediately at a health clinic; the need for women to present at clinic a minimum of four times (better, eight times) during pregnancy; the need for good, inexpensive nutrition during pregnancy, including taking iron supplements.

Both groups prepared a good media release with a strong news angles. The Islamabad media release group had a particularly strong, young psychiatrist, Dr Ejaz Gull, who understood the process very quickly, despite joining the workshop on day two.

Both groups of participants selected a strong lineup of appropriate speakers, each with a reinforcing message to speak to during the media event. Speakers included at least one senior local health official, a senior government official, female gynecologist, a local health worker, local supportive mullah and a relevant case study.

As their case study Islamabad participants chose the husband of a woman who died during pregnancy as neither she, her family nor community members knew the proper response to her danger signs. Karachi participants chose a woman who regularly utilizes the health clinic so her health during pregnancy is continuously monitored. Some doctors commented on the uniqueness of using such a case study from the 'lower classes', but said they understood its potential power in reaching appropriate audiences.

Journalist contacts lists reflected a low level of media contact by the Islamabad participants, except those of the already media-active Dr Ejaz Gull who was able to share his experiences with the group of participating in radio talkback programs on health, and being able to provide to local or provincial media the names and contact details of other local specialist health practitioners.

In this context the media planning event, rarely undertaken by these health officials, took on a particular relevance.

Amongst Karachi participants there was a range of media experience from minimal to comprehensive contacts and interaction.

Those participants from Sind and Balochistan also seemed to have much more regular contact with their local Ministry of Information and, somewhat greater access to local media. Whilst health officials valued the information officer's media monitoring ability they indicated that they often responded slowly and bureaucratically to organizing media events on their behalf.

Participants also reported that they sometimes organized media events directly when needing to communicate urgently with the community on issues such as immunization campaigns.

Interestingly, media releases are normally prepared by the information officer and distributed to media *after* the media events. Participants were encouraged to change this dynamic with both local media and their local information officer.

From the facilitator's viewpoint the workshops provided a valuable insight into the challenges of district health officials including that of security. A lingering memory is the words written by one participant IN Islamabad who wrote across the corner of a whiteboard "I am discouraged and depressed because 1.7 million of the population is out of (the) polio campaign because of the bad security situation there".

General observations

Most participants contributed actively to discussion and practical exercises and seemed to welcome the interactive style of the workshop which enables varying means of active learning.

Participant evaluations

Please see the attached summary of evaluations.

The participants' completed evaluations are attached.

In Islamabad 6/6 participants completed evaluations; In Karachi 6/9 participants completed evaluations.

Recommendations

- Within 6 weeks of the workshop conclusion It would be very useful for TACMIL communications staff to follow up which participants/areas have initiated a media event or an approach to media on a specific MNCH or other health topic. If so, media reports should be requested from the local Ministry of Information media monitoring service. Effective feedback needs to be given where possible, and in a way which encourages further efforts.
- In general workshop timing needs to take account of the national, provincial or district health calendar. During the Islamabad workshop a polio immunization campaign was underway in the north which distracted some participants to a degree. One returned for a day to oversee his district campaign. He returned to the course after a day's absence during which time he lost valuable media event planning time. All up he would have easily driven over 2,000 kilometers in a period of three days, which is impressive but fatiguing.
- Preparatory to such workshops, in addition to the very useful overview of media development in Pakistan it would be useful for the facilitator to be briefed on the specific media available locally/provincially/nationally and relevant audience profiles.
- If in future participant manuals are required (and they are highly useful and recommended) they should be requested within the project contract, and can be developed along with the facilitators' manual, but with an approach and focus relevant to participants.
(NB. A curriculum/course manual was prepared by the facilitator – with specific instructions and guidance for the facilitator's use only. The manual was handed to participants at the beginning of the workshop without the prior knowledge of the facilitator. It is not common practice nor appropriate to hand out a facilitator's manual to participants).
- TACMIL's assistance to EDOs and other officials is required to help them to effectively absorb the excellent demographic and other MNCH. The varying use of statistics reflected in the media releases produced in the workshops reflects this. Some attention may need to be given to translate medical terms into lay language (this was dealt with during the workshops) so health information is comprehensible to journalists - and the public.
(EDO's indicated they would need to translate information as appropriate so it could be effectively utilized by their own staff. In the case of the Lady Health

Visitors, for example, who contribute their field data, it will likely be very useful, indeed powerful, for them to recognize how the information they gather contributes to the provincial and national picture. Some translation assistance would assist the EDOs).

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