Supporting Media on TB: Print and Broadcast Fellowships
Awards for Tuberculosis Coverage in High Burden Countries in
Africa, Asia and the Caribbean
Scaling Up in 2006-2009

Panos Global AIDS Programme, January 2006
Introduction

In 2005 the Panos Global AIDS Programme together with the STOP TB Partnership implemented a 1-year project that awarded fellowships to 23 print and photo journalists to enhance media coverage of issues around TB in 9 high burden countries in the WHO Regions of SEARO, EMRO, WPRO, AFRO and AMRO. These fellowships helped the selected journalists to better explore and understand the linkages between TB and socioeconomic variables. In Africa the project helped to highlight the devastating intersection of TB and HIV, and the urgency for collaborative action at all levels to address the dual epidemics.

In the period 2006-2007 Panos proposes to build on the successful media partnerships developed during the first year of the project to improve coverage of TB issues in an expanded number of high priority countries. Building on Panos’s 20-plus years of experience working with journalists around the world, the project will seek to generate in-depth and critical reporting that promotes participation in and ownership of TB control efforts by those most affected, and accountability on the part of national and international officials.

Panos Global AIDS Programme

The Panos Global AIDS Programme is a network of Panos offices in Africa, the Caribbean, South Asia and Europe, working together to increase participation, ownership and accountability in the response to the HIV/AIDS pandemic.

Coordinated from Lusaka, Zambia, our programme informs and challenges the way in which the HIV/AIDS pandemic is addressed at the national, regional and global level.

The Panos Global AIDS Programme works to enable developing countries to shape a global response to the HIV/AIDS pandemic by stimulating informed public and policy debate and amplifying marginalised voices, particularly those affected by HIV/AIDS. We aim to:

- build the capacity of media to encourage public dialogue and debate, using the media to enhance accountability within HIV/AIDS public policy
- support participatory, inclusive and transparent decision making on HIV/AIDS at a national and international level
- enable those most affected by HIV/AIDS to communicate their views and concerns to national and international media and policy agents
- inform national and international policy and donor processes on HIV communication through southern originated, southern driven information and analysis
**Problem Statement**

TB continues to be a major global public health challenge, especially for countries in Asia and Africa. An estimated one-third of the world’s population is infected with the mycobacterium that causes TB. Each year, nearly 9 million people develop active tuberculosis disease, a large majority of whom are in Africa and Asia. Although a cure has been available for nearly 50 years, TB continues to kill an estimated 2 million people annually. In August 2005 the WHO Regional Committee for Africa, comprising 46 Ministers of Health, declared tuberculosis to be an emergency in Africa, where the annual number of new TB cases has quadrupled in most countries since 1990. Low political commitment, insufficient human and financial resources, and the emergence of HIV and multidrug-resistant (MDR) TB have all contributed to limiting progress against the epidemic.

**Communication is key**

That TB continues to kill millions when a cure is available clearly indicates the need for enhanced communication strategies. People who suffer from symptoms of TB often do not know until too late the cause of their sickness, especially if they are coinfected with HIV. With the stigma attached to HIV/AIDS in many parts of the world, a coinfected person may not take the opportunity to be tested and treated for TB. Civil society organizations and media in affected countries still tend to give little attention to the TB epidemic. While many African and Asian countries have a communication strategy on HIV, similar communication strategies on TB are lacking. The disease continues to exist in the shadows of society.

The first step in strengthening commitment to fighting TB at national and sub-national levels is to build a critical mass of people, especially journalists, who understand TB not only as a serious public health threat but as a development issue with social root causes. Work on HIV/AIDS and other development issues has shown the importance of moving beyond merely building awareness to also promoting active engagement and local ownership of the TB response.

**Media coverage on TB**

Media still largely ignore TB in many high burden countries despite its importance as a health and development problem. To date, and particularly in the high burden countries, the engagement of the media in the response to TB has been poor. It has failed to spark community interest, failed to mobilise community action, and failed to be constructively critical of national and international health policies. Moreover, media commonly take a totally curative or “medicinal” view of the TB epidemic instead of analysing the socioeconomic causes that lead to high morbidity and mortality in developing countries, including chronic hunger and poverty.

But are the media primarily at fault for their lack of knowledge and understanding or is this a function of other causes? One of the key obstacles identified by the first-year TB Media Fellowships project (see below) was journalists’ lack of access at country level to reference materials and information sources on TB. What emerged also was that there was no continuous flow of information on TB to keep journalists engaged so they could raise the issues through their writing or broadcasts. The difficulty in accessing information compounds the problems for journalists who are constantly dealing with multiple issues and problems in their work.

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The Panos Global AIDS Programme
Panos/STOP TB Media Fellowships—Phase I, 2005-2006

The Panos STOP TB Media Fellowships project aimed to address some of the obstacles journalists face in covering issues around TB. The project awarded fellowships to three print journalists from India and two print journalists each from Bangladesh, Ethiopia, Haiti, Indonesia, Malawi, Pakistan, the Philippines and Zambia. Additionally, fellowships were awarded to four photojournalists from Africa and Asia.

As part of the fellowships procedure, the selected fellows were trained in a series of regional workshops on clinical, epidemiological and social issues around TB, followed by extended discussion on ideas and angles to make compelling news stories on TB for the mainstream media. Fellows received expert briefings and reference materials on TB; policies and programmes and on the challenges of TB diagnosis and treatment. Fellows also received regular support and guidance from an international advisory panel composed of technical and communication experts. Emphasis was put on helping journalists understand the linkages between TB and related issues like poverty, gender and urbanisation.

The print journalists wrote feature articles on TB and TB/HIV issues which were published in their national newspapers. The best features have been uploaded onto the Panos Global AIDS Programme website. The photojournalists produced photo essays of 20 portraits each which will be used for public exhibits and to illustrate TB print and audiovisual products. In addition, Panos co-organized a media symposium on TB at the ICASA annual conference in Abuja in December 2005, followed in January 2006 by a workshop in Nairobi for 20 journalists from Ethiopia, Kenya, Tanzania and Uganda to brief them on key issues just prior to the Nairobi launch of the Global Plan to Stop TB 2006-2015. Panos is now in the process of developing a special manual with guidelines for journalists on how to report effectively and accurately on TB, which will highlight some of the well-researched features from the Fellowships project.

Fellows have provided very positive feedback on the first-year project. All journalists welcomed the reference materials on technical issues, briefings by national and regional TB experts, and creative brainstorming sessions on story ideas.

Phase II 2006 to 2009

Panos now proposes to extend the project to broadcast media and more countries in an expanded Phase II.

Goal

To enhance coverage of TB as a public health issue by media in priority countries, with a view to promoting informed public debate, community mobilisation, and accountability and transparency in national efforts to fight TB.
Objectives

- To sensitize senior editors, producers and reporters (TV, radio and print) in 16 priority countries of Asia and Africa about TB and related issues like HIV/AIDS, drug resistance, stigma, poverty, urbanisation and other socioeconomic factors.
- To build journalists’ skills and capacities to produce critical, in-depth reportage on TB issues that gets frontline coverage in their national media.
- To educate TB programme managers at regional and country level in how to effectively engage media to enhance and shape coverage of TB in ways that support programme objectives, and equip them with the skills to do so.
- To form networks of journalists with a demonstrated interest in TB in order to focus their attention on strategic issues and influence their coverage.
- To provide these networks with regular access to experts and topical information to ensure sustained media coverage of strategic TB issues.

Outputs

- A series of well researched articles and audiovisual programs in national/regional/international media analyzing strategic TB issues in priority countries in Asia and Africa, including the urgent need for collaborative action at all levels to address the dual epidemic of TB and HIV in Africa.
- The creation of strong regional networks of journalists with a high level of commitment, competence and information access to cover TB issues, which can be harnessed to address leading TB issues in a timely fashion.
- The creation of mutual understanding and partnership between TB programme leaders and journalists at regional and country level.
### Countries of Focus

The project will be implemented in the following 16 priority countries in 2006:

<table>
<thead>
<tr>
<th>Countries</th>
<th>WHO Regional Office</th>
<th>Panos Regional Office</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>India, Bangladesh, Indonesia</td>
<td>SEARO</td>
<td>Panos South Asia</td>
<td>Countries in Phase I Fellowships will be expanded to broadcast media.</td>
</tr>
<tr>
<td>Pakistan</td>
<td>EMRO</td>
<td>Panos South Asia</td>
<td></td>
</tr>
<tr>
<td>Philippines</td>
<td>WPRO</td>
<td>Panos South Asia</td>
<td></td>
</tr>
<tr>
<td>Botswana, Malawi, Namibia, South Africa, Zambia</td>
<td>AFRO</td>
<td>Panos Southern Africa</td>
<td></td>
</tr>
<tr>
<td>DR Congo, Ethiopia, Kenya, Tanzania, Uganda</td>
<td>AFRO</td>
<td>Panos Eastern Africa</td>
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<tr>
<td>Nigeria</td>
<td>AFRO</td>
<td>Panos Institute</td>
<td>Western Africa</td>
</tr>
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### Awarding fellowships

Three-month fellowships will be awarded to deserving print and broadcast journalists who compete for the awards, to write feature articles and produce programmes on issues around TB and TB/HIV in Africa and Asia. The winning Fellows will be provided both expert technical assistance and financial support. The specific activities include:

- Journalists will be selected through placement of advertisements in leading newspapers in English and local language press in the 16 target countries. Advertisements will be sent to a select mailing list of editors, journalists, NGOs and women’s organisations in the target countries. Additionally, advertisements will be placed on the web sites of Panos, STOP TB, WHO and other partner organizations as well as e-discussion forums about TB and HIV/AIDS.

- In the African region two broadcast (radio) journalists and one print journalist will be selected from each of the countries. In the Asian countries, two print and one broadcast (radio/TV) journalist will be selected. However in India, three print journalists and two broadcast journalists will be selected. The selection process will be rigorous. Writing and reporting skills of the journalists, their past work, the topics chosen by them for their fellowships, their interests, and their commitment to the project will be some of the parameters for selection.
• Two regional selection panels will each consist of representatives from the WHO regional office, representatives from the relevant Panos regional office and leading public health and communication experts.
• The selected fellows will be provided with a fellowship fee ($500), in addition to travel and data collection expenses.
• Each selected print journalist will produce three 1000-word articles. Each selected broadcast journalist will produce a feature of 15-minute duration. All features will be investigative and well researched. Coverage will not just detail problems and challenges, but will also highlight success stories and models and include ‘voices’ of those most affected.
• Selected journalists will broadcast/publish stories in their own media organizations. Panos will liaise with editors/gatekeepers to secure their cooperation to publish/print the work produced by the Fellows.

Planning and capacity building meetings for journalists and WHO and Stop TB staff/partners in Asia and Africa
Panos will organize four subregional training workshops (two in Asia and two in Africa) for the selected Fellows at the outset of the fellowships. Workshop content will be designed in cooperation with the WHO regional offices. Additionally, representatives from the WHO regional office will provide technical information on key TB issues to the journalists. The workshop will provide journalists with an opportunity to interact with key public health and communication experts. Fellows will be trained to produce articles/features that will get frontline coverage in the media as well as mobilise community action. Panos will provide Fellows with orientations on their chosen themes, discuss approaches to the articles, potential contacts, questions to ask and potential leads, and help them understand the reasons for possible differences if any, in views expressed by experts. Panos will also provide journalists with substantive resource material, information on relevant web-sites and contact details of NGOs and community- and faith-based groups to help the journalists in their research.

Strengthening the Existing Network of Fellows
Informal networks of Fellows have already been created during the first-year project in both regions. Panos will undertake a number of activities to strengthen and enlarge these networks, including formation of e-groups, construction of a special section on the Panos Global AIDS Programme web site where Fellows can exchange information regularly, distribution of an e-newsletter with some of the best articles or features from around the world and regular provision of information and story leads. Panos will also provide advance information to Fellows on key upcoming regional and national TB events, developments, policies, programmes and research.

Galvanising Global Support
At the International AIDS Conference in Toronto, Canada, in August 2006, Panos in collaboration with the STOP TB Partnership will organize a series of media activities, which will include a panel discussion on TB and HIV/AIDS and also show selected photo essays from around the world on TB. A session will be organised for selected Fellows.
from the first year project to share their experiences with other journalists. “Panosscope”, a newsletter to be produced for the conference by the Global AIDS Programme, will have a section on TB.

Through these events we aim to help media in the North understand the challenges to TB prevention and treatment as well as the root causes of TB in Southern countries.

Maximising Outputs

Beyond dissemination of the Fellows' work through their own media and the Panosscope newsletter at the International AIDS Conference in Toronto, additional value and impact of the Fellowships will be generated by:

- Translation and dissemination of articles and programmes for vernacular media;
- Dissemination by communication officers of the concerned WHO regional offices;
- Electronic dissemination through e-groups and discussion forums on HIV/AIDS and TB as well as the Panos and Stop TB Partnership web sites.
- Dissemination of a best practices manual on TB reporting in the selected countries/regions and workshops to stimulate public policy debate on TB and HIV/AIDS.

Integration with WHO and Partnership programme frameworks

In addition to strengthening and expanding the emerging media networks on TB, another key objective of this second phase is to begin to mainstream working with the media at country level into the programme frameworks of WHO and the Stop TB Partnership. Specifically:

1. WHO technical assistance for TB control at regional and national levels

As highlighted in the first-year experiences of project Fellows, national TB control programmes do not reach out to media or share helpful information with journalists who attempt to engage them, the sole exception being once a year around World TB Day. The new Stop TB Strategy includes two key elements -- engaging all care providers in TB control, and empowering people with TB and affected communities -- and effective use of the media can be a vital enabling function for both. The project will harness the practical ground-level experience and knowledge of Panos staff and the cadres of participating Fellows by making them available as resource persons in WHO technical meetings at regional and country levels, to educate national TB programme managers in best practices for working with the media. This interaction will also serve to create relationships of mutual understanding and trust between TB controllers and journalists from the same regions and countries. Costs for their participation will be off-budget and covered by WHO and/or GFATM grant funds for advocacy and communication. Working with media will also be gradually introduced as a formal discipline for development in WHO’s global technical assistance structure for TB.
2. Stop TB Partnership Subgroup on Advocacy, Communications and Social Mobilization (ACSM) in Countries

This subgroup was launched in February 2005 and has made rapid progress in developing a pedagogy, tools, monitoring & evaluation baseline, and technical assistance framework for strategic ACSM in countries to support TB control. In mid-2005, the subgroup mobilized the provision of technical assistance for 12 countries to devise sound ACSM strategies in their 5th Round applications to the GFATM, 10 of which were approved with a total of more than $30 million for ACSM activities over a 2-year period. Similar initiatives will be organized for future GFATM Rounds to continue expanding the number of country programmes implementing participatory ACSM activities as called for by the new Stop TB Strategy. The Panos project will be mainstreamed into the subgroup through several measures: a) inclusion of Ronald Kayanja, Director Panos Global AIDS Programme, as a core participant in subgroup meetings, conference calls and trainings; b) distribution of the Panos best practice manuals in the ACSM toolkit; and 3) participation of Panos staff and Fellows in the development of ACSM strategies in countries, including GFATM applications.

3. Patient Empowerment

Part of the new Stop TB Strategy is development of TB and TB/HIV patient networks and capacity building for them to advocate for and generate greater political commitment to stop TB and mobilize community participation in TB control activities. Working with the media is one of the most efficient and effective means to empower patients in this role, as well as to reduce stigma towards people with TB and re-humanize them. The Fellowships project will therefore place emphasis on utilizing patient activists in the target countries as primary resource persons to develop critical in-depth reportage on obstacles faced by people in accessing TB diagnosis and treatment.

4. Special focus on Indonesia and South Africa

Indonesia and South Africa provide unique challenges in TB advocacy and media work. Unlike many sub-Saharan African countries, South Africa has a multiplicity of vibrant and independent media with potential to provide critical analysis of TB issues. The country has the highest incidence of HIV/AIDS in the world and one of the highest burdens of TB/HIV coinfection. Support to a small number of journalists through TB Fellowships will only be a drop in the ocean. It is therefore planned to hold a separate workshop for journalists in South Africa and to follow this up with at least four Fellowships to maintain the momentum.

Indonesia also faces a big challenge of TB rooted in the socio-economic challenges of millions in the population. The fourth largest country in the world, Indonesia is a big challenge in TB control and concentrated media work will have to be established if the TB MDG is to be met. Under this project, and working collaboratively with the national TB programme, a consultant will be hired to extend the project methodology to various parts of this huge country. This work in Indonesia and South Africa will provide lessons

The Panos Global AIDS Programme
for more country-level concentrated media work following the Panos Fellowships model which can be used in other countries.

Summary of Activities

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<tr>
<th>Period</th>
<th>Key activities</th>
<th>Number of journalists involved</th>
<th>Remarks</th>
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| May 2006 to April 2007 | • Fellowships  
• Annual network meeting  
• Electronic newsletter  
• E group  
• Production of features (broadcast/print)  
• Regional briefings/meetings  
• Dedicated website | 50 | 8 of the 9 original countries in Phase I plus 8 new countries |
| March 2007 to March 2008 (projected) | Same as above | 100 | New countries added (may add more from West Africa) |
| March 2008 to March 2009 (projected) | Panos Features Service on TB | 150 | Other workshops like Nigeria and Kenya participants involved |

Proposed Timeline for Period May 2006 to April 2007

<table>
<thead>
<tr>
<th>Time Period</th>
<th>List of Deliverables</th>
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<tr>
<td>15 May 2006</td>
<td>• High profile announcements on the Fellowships.</td>
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| May/June 2006     | • Advertisements announcing the fellowships released in English and local language press in participating countries. Information on the fellowships also disseminated through other channels like mailing lists, listservs on HIV/AIDS and TB, Panos and STOP TB web sites, NGOs working on HIV/AIDS, TB, mobility, migration and gender issues.  
• Selection panel finalised.  
• Selection criteria of Fellows finalised. |
| July/August 2006  | • Shortlisting of candidates, interviews and selection process completed. Two candidates from print and one from photojournalism selected from each country except India. Three candidates from print and two for photojournalism selected from India.  
• Planning and capacity building workshops for selected Fellows held.  
• Fellows provided a detailed commissioning briefing on a |
chosen topic.
- Systems for disseminating technical information from WHO/STOP TB Partnership to existing media networks of Panos offices established.

| September-November 2006 | Fellows work on their chosen topics and write three 1000 word articles or produce 15-minute feature programmes for TV/radio with assistance from Panos and WHO. 
- Features published in journalists’ own media. 
- Fellows provide necessary information for monitoring and evaluation of the project. |

| December 2006/January 2007 | Compilation of the articles and radio/TV features. |

| February 2007 | High profile announcement of the results. 
- Dissemination workshops held in each region. |


| February-April 2007 | Dissemination of Fellowship materials. 
- Publication of materials and guidelines on TB reporting. |

**Monitoring and Evaluation**
A monitoring framework will be developed and implemented during 2006 and revised in 2007. A final project evaluation will be conducted during 2008.