ACKNOWLEDGEMENTS

The author extends her appreciation and gratitude to the many Internews staff who made this assessment possible: Revati Prasad, who developed the journalism, partner and community surveys, and trained the enumerators; Linet Omwange and Rahab Nganga for their invaluable administrative and logistical support; Mark Irungu, Samuel Musila and Bellah Mikangi who supported the data gathering process, and Ann Mikia, Medlene Kinyanjui and Dolphine Emali who worked the phones to ensure that people were available for interviews and the surveys. A special thank you is reserved for three people who were unstinting in sharing their vast knowledge: Deborah Ensor for her incisive acumen and guidance, and Ida Jooste and Ernest Waititu for their level-headed and generous support.

A thank you is also owed Rosemary Oduor and Eunice Opul, both from RGA, for their support during the eight focus group discussions. And appreciation goes to everyone who participated in the surveys and interviews – for giving of their time and helping us gain the valuable insights that led to the key findings of the assessment and recommendations contained in this publication.

The Voices in Health project (earlier known as Local Voices) is funded by the United States Agency for International Development.

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ABOUT INTERNEWS

Internews is an international media development organization whose mission is to empower local media worldwide to give people the news and information they need, the ability to connect, and the means to make their voices heard. Founded in 1982, the organization has worked in over 70 countries and trained more than 70,000 media professionals worldwide.
# CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXECUTIVE SUMMARY</strong></td>
<td>2</td>
</tr>
<tr>
<td>A INTRODUCTION</td>
<td>9</td>
</tr>
<tr>
<td>B INTERNEWS IN KENYA</td>
<td>13</td>
</tr>
<tr>
<td>1. The Internews in Kenya training model</td>
<td>15</td>
</tr>
<tr>
<td>THE SEVEN CORNERSTONES OF INTERNEWS IN KENYA</td>
<td>20</td>
</tr>
<tr>
<td>TRAINING MODEL</td>
<td></td>
</tr>
<tr>
<td>1. In-depth journalism training</td>
<td>21</td>
</tr>
<tr>
<td>2. In-newsroom mentoring</td>
<td>21</td>
</tr>
<tr>
<td>3. Media Resource Center</td>
<td>22</td>
</tr>
<tr>
<td>4. Travel Grants</td>
<td>22</td>
</tr>
<tr>
<td>5. Roundtables</td>
<td>23</td>
</tr>
<tr>
<td>6. Working with news editors</td>
<td>23</td>
</tr>
<tr>
<td>7. NGO engagement</td>
<td>24</td>
</tr>
<tr>
<td>2. The media matters</td>
<td>25</td>
</tr>
<tr>
<td>C ASSESSMENT METHODOLOGY</td>
<td>30</td>
</tr>
<tr>
<td>1. Journalist phone survey</td>
<td>35</td>
</tr>
<tr>
<td>2. In-depth Interviews with journalists</td>
<td>36</td>
</tr>
<tr>
<td>3. Partner survey</td>
<td>38</td>
</tr>
<tr>
<td>4. In-depth interviews with partners and key stakeholders</td>
<td>39</td>
</tr>
<tr>
<td>5. Community survey</td>
<td>39</td>
</tr>
<tr>
<td>6. Focus Group Discussions</td>
<td>43</td>
</tr>
<tr>
<td>D KEY FINDINGS</td>
<td>44</td>
</tr>
<tr>
<td>1. Demand for health news is high</td>
<td>48</td>
</tr>
<tr>
<td>2. The media is central to stigma reduction</td>
<td>49</td>
</tr>
<tr>
<td>3. Training journalists to cover health is critical</td>
<td>50</td>
</tr>
<tr>
<td>4. Training journalists to report on health has the potential to deliver greater results</td>
<td>54</td>
</tr>
<tr>
<td>5. Internews training creates better journalists and contributes to informed and enlightened journalism</td>
<td>55</td>
</tr>
<tr>
<td>6. NGOs who engage with the media are more successful in reaching the public</td>
<td>58</td>
</tr>
<tr>
<td>7. Radio is a primary source of health information, and the most trusted</td>
<td>62</td>
</tr>
<tr>
<td>8. The overall scope and quality of media coverage of health still lags</td>
<td>62</td>
</tr>
<tr>
<td>9. A newsroom “health news” disconnect</td>
<td>64</td>
</tr>
<tr>
<td>E CONCLUSION AND RECOMMENDATIONS</td>
<td>67</td>
</tr>
<tr>
<td>Obstacles</td>
<td>68</td>
</tr>
<tr>
<td>Recommendations</td>
<td>68</td>
</tr>
</tbody>
</table>
IN 2003 a staggering 700 people were dying as a result of HIV complications in Kenya every day. Acquired immunodeficiency syndrome (AIDS) was a disease of crisis proportions, still characterized at the time by secrecy and fear, rumor and myth, and sensational stories and misleading information.

2003 was also the year that Internews launched its USAID-funded health journalism program in Kenya. The aim: to create a more supportive social environment to prevent and mitigate the impact of HIV and AIDS, by working with the media to ensure more enlightened and informed media coverage of the disease and other health areas.

Nine years later, from May-June 2012, Internews conducted a legacy assessment of its work to gauge insight into the impact of the media project aimed at improving the health of Kenyans, presented here in this report.
Our research was grounded in the maxim that information changes lives, and can even save lives. Guided by two overarching questions – do people want or need health news, and are they satisfied with the health news available to them – we used a mixed methods approach, conducting surveys, focus group discussions and in-depth interviews, as well as mining years of project data and reports.

For the purpose of the assessment we sat down with 16 journalists and surveyed 89 journalists – all trained more than once by Internews – to better understand the impact of Internews training and mentoring on the professional development of journalists. We sought the input of key health partners in government and civil society to better understand how health information has changed, and how their engagement with media has evolved, to gain a high-level view on health information and Internews’ role in the past nine years. We surveyed 61 partners and key stakeholders and interviewed 12 individuals who represented these organizations and agencies. And to better understand why and how people access health news, and its impact on the communities where Internews has been most active, we reached out to two communities: in Korogocho, an informal settlement on the outskirts of Nairobi, and Kisumu, a city on the shore of Lake Victoria in Nyanza Province, which also has the highest HIV prevalence in the country. To do this, we conducted eight focus group discussions with 89 participants and surveyed 626 community members. Finally, we mined existing data, such as quarterly reports, previous evaluations, annual donor reports, and other relevant information against which we checked our data, and to provide background information of the project.
Our key findings suggest that:

- Public demand for health news is high.
- The media is a critical element in the response to HIV and AIDS and associated stigma.
- Training journalists to cover health is critical – it changes lives.
- Internews approach to health journalism is incredibly effective and has had a deep impact on trainees, newsrooms, partners and audiences.
- The media, and in particular radio, is a trusted source of health information.
- The overall scope and quality of health media coverage still needs improvement; there is a seeming disconnect between what people want and what they believe is available.

Several people we interviewed also noted that the media not only plays a pivotal role in public health, but can and does have a preventive influence. Regina Ombam, Head of Strategy for Kenya's National AIDS Control Council (NACC), summed up her view of the role of the media this way: “Principally I look at journalism in the health sector as a very strong preventive method to use as a cost effective way to deal with health.”

In other words, the media is a key factor in improving the lives of Kenyans by providing more, better, and deeper coverage of complex health issues that matter to them.

The following are specific findings from the responses of the three groups we surveyed.

**Journalists:**

- 84% of those surveyed strongly agreed that Internews support was instrumental in their professional development, indicating that they had either been promoted or offered a job as a result of their training.
- 75% stated that Internews training was more useful than their diploma courses.
- 98% felt more recognized and respected in their profession.
- 88% stated they have had more stories published after Internews training.

**Partners and key stakeholders:**

- 93% of health-focused partners stated working with Internews had been beneficial for their organization’s work.
- 88% reported that since working with Internews, their relationship with the media had improved.
- 85% responded that they engaged more often with the media.

**Community members:**

- 87% of those surveyed rated health news as very important;
- 90% of focus group participants stated that they find news stories about health issues, rather than PSAs, more useful and compelling;
- 95% of all respondents said that after visiting a doctor or community health center that they were likely to listen to a radio station for health information.
Radio is by far the most common source of general information, with 74% of people reporting using it every day; 66% of all respondents used radio as their primary source of health information – at best every day, or at least once a week.

It should be noted upfront that this assessment does not claim that the overall changes in the local media landscape and public health seeking behavior is solely attributable to the work of Internews. However, Internews is recognized as an important actor working in Kenya in the field of health journalism, filling a critical gap related to the media’s focus on, and telling the story of, HIV and other related health issues since 2003.

Linus Kaikai, managing editor of the Nation Broadcasting Division of the Nation Media Group (NTV), spoke about the enormous value derived from having Irene Choge, who has become one of the leading health journalists in the country through her work with Internews, in his newsroom. Simply put, he said: “We need more Irenes.”
A STORY A DAY...
THE MEDIA AS A PREVENTIVE TOOL IN PUBLIC HEALTH
Overall, our findings show that the demand for health news is high: everyone we spoke to, including senior news editors rank it high on their list of “wants.” Yet consistently the majority of people we interviewed or surveyed indicated that health news was not covered as well or as often as it could be. Which begs the question, where does the disconnect lie, when even news editors agree that health news is critical?

We found that some of the barriers in the way of a more integrated approach to making health news part of the daily news agenda include that: health remains the poor relative to political, finance, and sport news; a lack of resources in newsrooms translates into a perception of a lack of interest in reporters specializing in health news; and that health news stories which are not usually event-driven often take a backseat to more sensational news and on-the-spot reporting.

Our recommendations include that Internews considers increasing its training footprint in the newsrooms through its training of trainers approach; works more closely with educational institutions in the field of journalism; trains journalists to focus analytically on the policies that inform public health; involves the senior level structure of the media houses more strategically, and leveraging and maximizing new technologies.

What was clear throughout the study was that enlightened, informed and accurate media stories were trusted and made a difference in the lives of many people. It reminded of the old saying that “an apple a day keeps the doctor away.” Except in this instance, it is more a case of “a story a day …”
A STORY A DAY...
THE MEDIA AS A PREVENTIVE TOOL IN PUBLIC HEALTH
WHEN INTERNEWS launched its Local Voices health media program in Kenya in 2003, AIDS-related illnesses were claiming 700 lives a day in Kenya. Nine years later, the country has taken enormous strides in tackling HIV, with the media playing an important role in relaying and amplifying critical health messages related to HIV infection.

Telling the story of HIV from a media perspective requires that one also looks at the prevalence of infection with the virus. Research shows that Kenya is experiencing a mixed and geographically heterogeneous HIV epidemic; both as a generalized epidemic among the mainstream population, and as a concentrated epidemic among those most at risk of HIV.¹

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¹ KENYA’S HIV PREVALENCE AMONG ADULTS 15–64 YEARS OLD IS ESTIMATED TO BE 6.3% (KENYA DEMOGRAPHIC AND HEALTH SURVEY 2008–09).

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9
A STORY A DAY...
THE MEDIA AS A PREVENTIVE TOOL IN PUBLIC HEALTH

Violet Otindo of Citizen TV working at the International AIDS Conference in Washington, DC, in 2012. CALLIE LONG
Kenya's response in terms of HIV testing has expanded widely since 2000, with voluntary testing and counseling (VCT) facilities numbering 4,438 in 2010, up from almost 1,000 sites in 2007. Ten years ago, Kenya only had three such sites. Provider initiated counseling and testing has expanded and is now available in 73% of health facilities.

Kenya has also adopted the World Health Organization (WHO) and the United Nations Joint Programme on HIV/AIDS (UNAIDS) recommendations and incorporated Voluntary Medical Male Circumcision (VMMC) as part of its HIV prevention portfolio. With support from donors, the country has done more than 351,919 VMMCs as of December 2011, making Kenya one of the top performers in scaling up VMMC in East and Southern Africa.

When scientists finally pinpointed that HIV caused AIDS in 1984, it forced journalists to grapple with scientific language that included terms such as retroviruses, mutation and antiretrovirals. Then, when studies showed that sex workers, people who inject drugs, men who have sex with men, migrant and other marginalized groups – people already treated as pariahs by society – were especially vulnerable, the information contributed to the overall hostility that surrounded the disease. It also compounded political inaction and fueled even more sensational stories in the media.

Kenya was not spared. When the epidemic was first reported in Kenya and the first case identified in 1985, it was a disease shrouded in secrecy in all sectors. People were in denial, refusing to admit that it was real, choosing to believe that it only struck those who went “against communal norms,” and could only be treated by traditional healers. In some parts of the country, death from the disease was attributed to a curse. Cultural practices, the myths associated with the disease, and the secrecy and shame that accompanied it was creating a perfect storm of crisis. Not only were those in power taking too long to recognize the impact of HIV on the entire population, but the media in Kenya also lagged in reporting proactively, with insight, and sensitively on HIV and AIDS. For a long time, HIV left in its wake death, disgrace, unfairly tainted and devastated families, and communities that were completely overwhelmed by the impact.

Kenyan journalists (as did their peers around the world) struggled to tell the story of this complex, often confusing and constantly changing disease, even as the media landscape

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3 IBID
in the country itself was undergoing a rapid democratic evolution. Although at a policy level, a National AIDS Committee was establish in 1985, followed by the National AIDS/STD Control Programme (NASCOP) in 1987, little was happening in terms of implementation. This changed when former President Daniel Arap Moi in 1999 declared the AIDS epidemic a national disaster and established the National AIDS Control Council. However, it would take several years, beyond 2003, before any real public health progress was seen in terms of stemming the tide.

Today, nine years after Internews launched its health journalism program, the public health and media picture is far better than that of the bleak early 2000s, although the journey is far from over.

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7 Ibid.
Internews trained journalist, Samuel Otieno, on assignment.

KATE HOLT
INTERNEWS IN KENYA

The USAID-funded media project, first known as Local Voices, and later as Voices in Health, set out to create a more supportive social environment for preventing and mitigating the impact of AIDS, by working with the media to ensure better quality coverage of HIV and other health concerns. Over the years, big gains have been made in supporting journalists. In 2003, working from a small office in downtown Nairobi the team of four staff held three workshops and supported five journalists with travel grants. The first roundtable, and the only one that year, was held in 2004; compared to the 13 held in 2011. Since 2003, the number of trainings has also increased significantly, with 25 held in 2011. Travel grant awards shot up...
The program’s objectives were to secure the commitment of news media managers and owners in the response to HIV and AIDS, while strengthening the skills of journalists and providing them with on-going resources to expand and improve their reporting on this critical health issue. It would arm journalists and talk show hosts with the knowledge and vocabulary to include constructive and accurate messages about HIV and AIDS in their daily programs to counteract confusion, tackle denial and stigma associated with the disease, and increase dialogue with experts and public officials.

As HIV disease evolved, so too did training to encompass HIV policy change. Starting in 2009, the program expanded its health journalism focus to include mother and child health, family planning and reproductive health – in recognition of the fact that communities in Kenya often grapple with all these health issues simultaneously.

More than 900 journalists have since been trained intensively to: report responsibly on the HIV epidemic; make the science related to the disease accessible; and dispel myths to reduce stigma. Internews records show that at least 1,287 stories are directly attributable to support via workshops and other events, such as roundtables.
1. **The Internews in Kenya Training Model**

HIV and related health issues are complex topics. To report effectively on HIV a journalist has to investigate and sometimes challenge social structures, cultural values, and myths and beliefs that contribute to the epidemic. This often means writing about sensitive topics such as sexual behavior, inadequate social services, and the denial of basic human rights. How a story is presented is therefore as important as the content. Language and tone can and do reinforce negative stereotypes about HIV, particularly in communities where stigma and discrimination exist. Accurate and appropriate language however encourages consumers of news to be more thoughtful and reflective about HIV. Journalists who use inclusive language to illustrate the scope and context of the disease shed new light on the social causes and impact of HIV in their communities.

We found that the Internews approach was designed to ensure that trained journalists

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**BOX 1: EVALUATION OF PREVIOUS WORK: MEASURING THE IMPACT OF JOURNALISM TRAINING**

Measuring the impact of this kind of health journalism program presents challenges. Unlike traditional behavior change communications approaches, Voices in Health does not attempt to control the message. However, data derived from regular monitoring of media coverage by Steadman Research Services in Nairobi between 2003-4, using a set of indicators related to journalism and stigma, laid the groundwork to develop an instrument to measure the quality and frequency of reporting on HIV and AIDS, and establish a baseline. This involved monitoring the frequency and quality of HIV and AIDS reporting on 11 radio stations contracted in 2003 and followed up in 2004.

- **Internews training model has an impact on HIV journalism**
- **Unsponsored news stories on HIV increased by 52% within a year of training.**
- **Unsponsored shows/call-in programs on HIV increased by 225%.**
- **110% increase in prime time HIV programs on air.**

- An increase in more complex HIV-related topics, such as the prevention of vertical transmission, HIV and religion, antiretroviral treatment, sexual abuse and nutrition.
- KBC English, with its national coverage, recorded the highest increase in HIV and AIDS slots – up from 4 to 38, in both prime time and non-prime time slots.
- Citizen Radio increased its HIV slots from 3 to 16 in just one year.
- Increasingly, programs included personal testimonies and the voices of those personally affected by HIV.
- Sponsored HIV on-air programs did not last, as was not sustainable.

A formal evaluation four years later in 2008 referred to the Kenya program as a gold standard among the family of Local Voices programs around the world. It pioneered many aspects of the model that continue to demonstrate results to the present.

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1. **LOCAL VOICES: PRELIMINARY FINDINGS FROM RADIO CONTENT ANALYSIS – KENYA (2004).**
2. **IBID.**
Lorraine Anyango of the Daily Nation, gathering information for a health story in Kisumu. PAT HOLT
“Before Internews, we were just dumping information. Internews helped us to write more meaningfully about HIV and understand how to show its real face.”

SANDRA NDONYE, INTERNEWS-TRAINED JOURNALIST
In December 2007 when post-election violence spiraled out of control in Kenya, Internews addressed the positive role the media should and could play during the crisis.\(^1\) The death toll rose to over a thousand, and displaced some 350,000 people. Many pointed a finger at the media for their role in fuelling and exacerbating the conflict. And while some elements of the media did indeed play a role, Internews believed that what was crucial was how the media could contribute positively to rebuilding society. This included a critical health angle. People whose health was already compromised by chronic diseases such as HIV were extremely vulnerable to the stress that came with the violence and conflict. The disruption also increased the likelihood of complications and avoidable deaths with people being cut off from health services and life saving medication.\(^2\)

Incidences of gender-based violence also meant an increased risk of contracting HIV. The Internews team responded by tailoring its training to focus on the health impact of the post-electoral violence. Kenyan journalist and Knight Fellow Joseph Warungu put it this way: “A journalist is responsible for not only what they say, but also what they allow others to say.” In addition, several roundtables were held to facilitate discussions in the media on the potentially disastrous consequences the violence could have on Kenya’s public health system.

produce accurate and compelling content throughout their careers, rather than producing one-off reports. The cornerstones of the training include seven fundamental steps: in-depth journalism training; in-newsroom mentoring; using the media resource center; travel grants, working with newsroom editors, roundtables and engaging NGOs (Please see insert on pages 20-24). By being immersed in this focused training, the journalists are encouraged to play a pivotal role in stimulating discussion, challenging stigma, and prompting policy action.\(^9\) The result – informed, accurate, engaging public information on radio, television, print and online that brings with it sustainable returns.

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\(^2\) In the Kenyan context, the NACD estimates that about 1.4 million Kenyans are HIV-positive, and of these 300,000 need ARVs (although some 210,000 are on treatment).

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— underscored by examples such as Eudias Kigai’s story on VCT.

Eudias worked for a Catholic radio station, and after attending an Internews training focused on VCT, she produced a four-minute insert on mobile VCT services. She wanted to follow-up with an interview with a VCT counselor, to encourage listeners to go for HIV testing. Her news editor only gave her 15 minutes for the show, and assigned her a Sunday morning slot when most of their audience would be at church. However, after hearing the insert and seeing the response of listeners who had heard the program, the editor suggested that Eudias link the story to

“I hear others ask, ‘who are these guys, how can we access them, I also want to change how I do my work.’”

COLLINS ADEBE. SHERI FM

Continued on page 25
THE SEVEN CORNERSTONES OF INTERNEWS IN KENYA TRAINING MODEL
1. **IN-DEPTH JOURNALISM TRAINING**

Good journalism, whether about HIV, health or other subjects, relies on the story-telling skills of journalists. While most other models place more emphasis on developing a knowledge of HIV, Internews develops journalists’ knowledge of the scientific language related to HIV disease, as well as their journalism skills, whether it be for radio, TV, print or online media almost in equal measure. Providing journalists with HIV knowledge is therefore merely one aspect of the training: if journalists are not able to package HIV knowledge effectively, and translate it into compelling stories, then their work will not have an impact. The approach demands a high level of trainer involvement, as journalists are assisted with the production of their stories during the training. Journalists also always leave the training session with a ready-for-broadcast or ready-for-publication story, as it is important that journalists get the opportunity to apply their new skills to an end product, with the help of the trainer. And with a broadcast or publication-ready story, editors get to hear or see the difference between pre- and post training stories.

A critical component of compelling journalism is that stories have a “human face.” Training always includes a site visit, which gives the journalists the option to interview people. Training is also always based in a specific HIV theme, grounded in the knowledge that it is over-ambitious to teach journalists everything there is to know about HIV in a single workshop. And journalists from different media are mostly trained separately, as each medium requires very specific journalism skills and story-telling techniques.

Finally, the programs that journalists produce belong to them, and their media houses own the copyright. Internews only facilitates quality production, working behind the scenes to develop capacity. It does not tell journalists and their editors what to broadcast, although careful guidance is given to support them in capturing good news angles and interesting story ideas. As one journalist noted, “… the documentary I produce remains with me. I need to thank them.”

2. **IN-NEWSROOM MENTORING**

To develop a strong corps of trained journalists able to take and apply skills learned during workshops, Internews takes its training into the local media’s newsrooms. There is an inseparable relationship between workshops and mentoring; the latter is always used to reinforce knowledge gain acquired through structured workshops, ensuring a high-standard of application during professional practice. Regular and consistent mentoring is the key component that gives the Internews training approach its effective and measurable edge over the “occasional workshop” approach. Mentoring consolidates the skills learned in workshops through consistent expert attention that Kenyan journalists are all-too-frequently not able to get from their newsroom editors. It allows trainers to work side-by-side with journalist in their own environments, seeing first hand their constraints and challenges, and helping them apply lessons learned in the most practical, realistic way possible – by actually being there. Mentoring ensures that the relevance, quantity, and quality of programs being broadcast by partner outlets remain high and that skill levels advance to the point where they are sustainable in the long term. The mentoring relationship also allows the Internews team to track and quantify the output of stories, reports, and programs being produced by participating outlets. Experience is that the quality of work increases further under this intensive one-to-one model.
3. MEDIA RESOURCE CENTER

The Write Spot, as the Media Resource Center is known, is a state of the art one-stop information experience where journalists mingle with their peers at the Internews office in Nairobi. It is always busy, with an average of 170 journalist visits recorded per month. Since June 2010, when Internews started tracking the number of stories produced from these visits, data shows that journalists successfully publish or produce 21 stories a month resulting from these visits. Many journalists in Kenya work either as freelancers or as freelancers on contract with a media house, and the Write Spot offers them the much-needed resources to do their jobs, whether in print, radio, TV or online media. This is where they can access fully equipped radio and TV studio production facilities, a stable internet connection, and multiple computer workstations that are set up to create an atmosphere similar to that of a newsroom.

Science journalist Daniel Aghan, who represents Kenya’s Media for Environment, Science, Health and Agriculture (MESHA), commented when looking around the busy center: “I admire this room. It’s the only one in Nairobi. It helps connect journalists. Always, when I receive a call [from journalists] from this number, I know it’s from people who are serious about pursuing their work.”

4. TRAVEL GRANTS

Two kinds of travel grants benefit Internews-trained journalists: self-guided and mentored travel grants. These allow the journalists to cover HIV-related stories in different parts of the country, and give them an opportunity to focus on news stories in parts of the country that their media houses may not necessarily be able to afford or be willing to support, often because of distance and location. If journalists don’t have the opportunity to travel to these areas, news that may affect communities remains under-reported or not reported on at all. As these stories require research, they often lead to a series of reports focused on an issue. Sometimes, they even lead to breaking news, as was the case in October 2011, when Kiundu Waweru reported on stories about a needle exchange program for injecting drug users and condom use among the Muslim population of Mombasa. While interviewing drug users on their knowledge of the risk of HIV associated with injecting drugs, they told him that they collect used needles and syringes at the garbage site, dumped there by the local hospital. Following up on the lead, he found that Coast General Hospital had been dumping medical waste in an area easily accessible to the public, and wrote an article highlighting the many public dangers and health risks associated with this practice.
5. **ROUNDTABLES**

These forums provide journalists with unique opportunities to not only meet with experts in health-related fields, but also to discuss topical issues, and often meet ordinary people affected by these health issues. At the heart of the approach lies a desire to inspire and challenge journalists to engage in open discussions, develop critical and analytical thinking, and gauge editorial direction on key issues in public health. While it may seem that the journalists who attend these events are being served the news on a plate, this is not the case. Rather, they are given an opportunity to engage in a robust and proactive way with newsmakers and are exposed to health-related news stories that may not have been that evident, especially in a news environment that still focuses heavily on local politics, often to the exclusion of all else. The roundtables are often reactive to timely news events, to ensure that journalists cover health stories accurately. One example is the roundtable that followed a news event when a story appeared in The East African, suggesting that HIV test results in Kenya and Uganda were inaccurate. The journalist had misunderstood the scientific paper on which the story was based, which presented a hypothesis for a very specific setting. Within two days, test sites experienced the ripples of the inaccurate and alarmist article, with patients questioning the accuracy of HIV test results. Internews recognized the need to avert panic and a mistrust of HIV testing, organizing a roundtable with experts to correct the misconception that Kenyan and Uganda test protocols were questionable within two days of the story. The author of the scientific journal article, Dr. Omu Anzala, used the opportunity to explain to journalists the science behind the paper, while Drs. Nicholas Muraguri, then of NASCOP, and Nduku Kilonzo, of Liverpool VCT outlined standard practice at test sites.

6. **WORKING WITH NEWS EDITORS**

For journalists to produce compelling stories that impact communities, they need the support of their news editors and media owners. It is considered a critical link in the media chain, and includes their engagement in selecting journalists for training, guaranteeing space for health reporting, and attending trainings in their expert capacities. Above and beyond, Internews brings these editorial gatekeepers together for a forum known as “Coffee with the Editors” four times a year. With the old saying that “stories sell” in mind, discussions focus on relevant and important issues that affect them directly as the ones who decide what makes news and what gets dropped. The topics include anything from new online audiences to practices that they can test and adopt to strengthen their engagement with their audiences, both traditional and new media-related. One such event in 2011 addressed the issue of increasingly active audiences, who post comments online in response to stories, or share them forward using social media. It was designed to help editors embrace new digital media developments and share ideas of how to take advantage of these new audiences, who may very well be active contributors to the news production process.
7. NGO ENGAGEMENT

When Internews first launched Local Voices in 2003, NGOs working in the field of HIV and AIDS rarely interacted with the media, and seldom publicly criticized government policies that had a negative impact on their work. As Kenya's democratic reforms were still in its infancy, it meant helping NGOs understand that fear prevented critical discourse, and that addressing issues of concern did not automatically constitute an attack on the government and negative consequences for the organization. Yet many of these frontline organizations struggled to see how the media could be a partner to be used to pressure the government for effective HIV and AIDS policies and as a tool to bolster their efforts to educate Kenyans on HIV prevention and treatment efforts. And even in cases where NGOs wanted to use the media, they lacked the knowledge of how to go about this effectively. This presented a perfect opportunity to engage with NGOs and government health agencies to close the gap and leverage a wealth of opportunities offered by the media to engage with Kenyans on these critical and potentially life-saving topics. It meant illustrating that volumes of badly written content seldom translate into good stories. And it meant helping them understand that reaching out to the media and their audiences did not mean that they were promoting the media. Quite the opposite – they were promoting their own vital work, by leveraging airtime and print space as valuable resources.

A media conference called by the National Voluntary Medical Male Circumcision (VMMC) Task Force earlier in 2012, illustrates the power of this approach. Following a media literacy training for 10 members of the task force, made up of NGOs and the government, the group held a live media conference as part of their training, and decided to use the forum to educate the media on women's involvement in male circumcision. To their delight, 65 journalists attended the event.

"After the training my view of the media changed completely. I met journalists who are passionate about their work and they will help us communicate our position if we communicate clearly with them," said Dr. Anthanasius Ochieng, National AIDS and STI Control Program VMMC Program Director and chair of the task force. "I saw how the media can help us advance our work."

Dr. Ochieng, who was interviewed by several journalists after the media conference, noted that "even before the function was over, a colleague from Kericho called to tell me our story was on air on radio."

The media conference resulted in some 25 news and feature stories, both aired and in print.


2 25 NEWS STORIES INTERNEWS WAS AWARE OF, ALTHOUGH MORE HAVE BEEN PUBLISHED OR BROADCAST.
public health, and journalists were simply not encouraged to specialize in health reporting. Yet scientists, policymakers, health experts and workers, and civil society all agreed that the media had the power to shape Kenyan's beliefs about HIV and AIDS in a significant way, including government policy-making and public attitudes towards people living with and affected by HIV and AIDS. In other words, that the mass media was a critical facilitator and amplifier for health communication campaigns.

Studies that showed that the media can change and save lives through information sharing (in this instance health information), shaped the project's approach. It built on the premise that engaging the local media to provide people with locally relevant and accurate, and timely and trusted information could be fine-tuned to make a difference in the lives of audiences.

A news story that illustrates this approach and that came about as a result of an Internews-sponsored travel grant, is the TV news report by Internews trainee and K24 reporter Violet Otindo (who now works for Citizen TV). Violet traveled to Isiolo in Eastern Province after hearing about a condom shortage in the region. She wanted to file a report on a community who had resorted to recycling their condoms by repeatedly washing them for re-use. Violet's report made headlines around the world and went viral online, but critically, the government and development agencies responded by sending emergency condom supplies to the area.

Dr. Peter Cherutich, Ag. Head of the National AIDS/STD Control Programme (NASCOP) remembers the TV report well. “It was a big deal for a week or so and we held a major news conference,” he explains, adding that he now

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11 ibid

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2. THE MEDIA MATTERS

When the Internews program started its work in Kenya, no newsroom culture existed to support journalists who wanted to focus on the theme of Lent (broadcast in the week before Easter). The new program was an hour long and encouraged listeners to use this religious period to care for those living with and affected by HIV and AIDS. Many listeners reported that they had gone for tests after hearing the program.
personally monitors the “pipeline of condoms.” In terms of the impact of Internews’ work with local media in Kenya, Dr Cherutich notes: “One of the greatest impacts of Internews has been the way it has increased HIV coverage in the media. Suddenly, the coverage has been more and more factual, and more and more positive. I think the evidence is there, and it’s clear.”

This speaks to the evidence that strong local journalism focusing on HIV and other health issues with accuracy and sensitivity can help carry local voices, such as those of the “condom-washing” community in Isiolo, up the media chain to also reach decision-makers at a policy level.

BOX 3: WORKING WITH THE LGBTI COMMUNITY

In 2008, the Modes of Transmission Survey showed that 15.2% of all new HIV infections in Kenya were reported among men who have sex with men (MSM). Further research revealed that 60% of MSM in Kenya also live in heterosexual relationships. This translates into a significant HIV burden, especially as MSM remain marginalized and alienated from accessing services, including those related to health. Most importantly, there are legal hurdles involved. “Sex between men is illegal in Kenya – punishable by up to 14 years in prison; the same as robbing a bank as it’s considered a felony. I think the policies should change and MSM should be treated as normal people who need services like everybody else,” explained David Kuria. David, who earlier represented Gay and Lesbian Coalition of Kenya (GALCK), remarked that Internews’ training of members of Kenya’s gay community to tell their own stories – about rights violations and access to health care and life in a society which stigmatizes homosexuality – is “a huge thing. It comes exactly at the right time.” In reference to a press conference following training, he explained: “When I went on the interview panel (yesterday), I was surprised at how calm I was in responding to questions from journalists and was able to share my key points in a clear way. In the past, I’d get upset at their [negative] tone when posing questions, and easily lose focus.”

Dennis Nzokia, editor of Identity, an LGBTI magazine and the only one of its kind in Kenya, noted that Internews was the only media organization in Kenya to reach out to the community. “It opened my eyes.”
“What I am [now] doing is helping other people. A story I did on a girl who was circumcised in preparation for an arranged marriage really touched me. Recently, people called me to enquire about her wellbeing. They wanted to pay for her school fees and get her back to school”.

VENTER MWONGERA, FREELANCE JOURNALIST
The language used by the media to describe and define the disease has also shifted dramatically over the years. Internews very early on advocated for a sensitive approach in the media to the language used to describe HIV. Emphasis was placed on language being constructive, used to dispel myths and stereotypes, and not contribute to prejudice. The take home message for those who trained with Internews was very clear: when writing about HIV and AIDS, use straightforward and non-judgmental language. Country Director Ida Jooste explains: “It is important that we discuss with journalists to the shifts in science, social perception and the attendant shifts in language. Where possible, they should lead the trend towards more appropriate language, and should always use correct scientific terminology.”

Traditionally, however, development investments in the media have relied on paid messaging and serialized dramas to convey important health information. Social Behaviour Change Communication (SBCC) approaches use the media as a conduit, rather than as a partner, underwriting PSAs and other targeted health advertising. While acknowledging the effectiveness of traditional messaging campaigns to raise awareness of such public health issues as HIV and AIDS, our assessment showed that on their own, the impact of one-way message campaigns does have its limitations. However, telling the story of real people and employing local and participatory coverage of aspects of a disease such as HIV in communities are not only extremely powerful tools in raising awareness of specific issues, but can amplify communication initiatives contextually.

This was confirmed after we tested people’s responses to news reports and traditional media campaigns, during the eight focus group discussions held for the purpose of this assessment. A total of 49 men and 40 women participated in the discussions, during which they were shown two public service announcements (PSAs) advocating for safe sex practices, and two television news reports representing real life stories related to HIV. More than 90% preferred the real life TV stories to the PSAs, or adverts as they called them. Consistently, the participants, including those who preferred the PSAs, said that they felt that the TV reports spoke to their real life experiences – real stories about real people.
“I think there’s been a lot of impact. We have participated in forums with journalists on topical issues, and we’ve partnered with Internews in training journalists. Now we see much more health-related activities translated into articles and electronic media. Almost every day there is something on health. ... precipitated by the work done and organized by Internews”.

DR. JOSEPH SIJIENI OF KENYA’S NATIONAL AIDS & STI CONTROL PROGRAMME (NASCOP)
BYOND the obvious questions of where people ranked health news in relation to other news, whether they valued the work of Internews, and what benefits they thought they had derived as a result of Internews’ training and related support, we also wanted to know whether our work had by extension impacted the end users of the health news – the potential audiences. This was important, given the truism that the media acts as a critical facilitator and amplifier of health information beyond that of messaging campaigns. By surveying and interviewing not only the direct beneficiaries of Internews’ work – the journalists, NGO workers and other key stakeholders – but also over 700 community members from different regions in Kenya, we gathered both quantitative and qualitative data that we triangulated to test assumptions and gain fresh insights.
Internews’ trained journalist, Samuel Otieno, interviews a health provider while on assignment.
Most importantly, we wanted to find out whether the outcome of training journalists and NGOs intensively and consistently over the course of nine years indeed resulted in better quality media coverage of HIV and other health areas, and whether the media can play a preventive role in public health.

We also wanted to understand how working with the media and supporting journalists, as well as the Internews partners in their work, makes health reporting sustainable and iterative, and contributes overall to individuals’ and communities’ understanding of health as a priority in their lives. This we believed would give us a deeper understanding of the impact and trajectory of the media’s contribution to addressing HIV and AIDS and other health needs of Kenyans during Internews’ health journalism program.

We therefore chose to mirror the Internews training methodology to focus the assessment, using a mixed method approach through surveys and in-depth interviews with journalists as well as staff and representatives of HIV-related NGOs and government partners who had all been trained by or engaged with Internews. Taking it one step further, we also reached out to the community to gauge their insights and understanding of the importance of health news in their lives. These communities are a vital link in the media continuum, as they represent the audiences and consumers of news. As they have no vested interest in Internews, we believed that their appraisal of the health media landscape in Kenya would contribute directly and greatly to our assessment of the impact of Internews’ work.

Key research questions were:

- Whether the Internews method of training and mentoring had an impact on the professional development of journalists and how;
- Whether health information within the context of the media landscape has changed and how;
- Whether health-related NGOs’ and government agencies’ engagement with media has changed and how;
- What the impact of health information on people’s lives is and why; and
- How communities receive health information.

As part of the analysis of background information, we noted the major accomplishments of the program’s impact and sustainability. This included the establishment for the first time of several weekly radio programs with an HIV focus over the years (and since expanded to include other health-related news), the creation of at least two regular health slots on primetime national television, as well as one national newspaper creating a weekly health pull-out section. We also took into account that many trainees have also won journalism awards from other organizations and media houses, such as CNN, over the years, and that several more have won scholarships for their work in health reporting. In addition, our quantitative data supported the premise that focused capacity building helped ensure career advancement for a number of the trainees. (See Section D: Key findings).

As Internews does not produce content and does not seek to control messaging, it is impossible to directly attribute the impact of its work, i.e. Internews is never publicly credited with a story that is published or broadcast. Internews is therefore very much a behind the scenes partner in addressing health in the media as a critical issue of public concern in that it supports and trains
members of the media and works closely with health agencies to support them in their media relations. We therefore focused on analyzing the context and environment within which the Internews program takes place, to build a narrative of the impact of Internews work. It was not within our remit to evaluate the health project. The assessment therefore does not measure project results against specific objectives, or management capacities. This is done regularly, as part of the program’s overall monitoring and evaluation, which is reported on a quarterly and semi-annual basis in donor reports.

We used both quantitative and qualitative tools in our mixed methods approach, understanding that because of the anecdotal nature of people’s responses, our qualitative findings could only be interpretive. However, we believed these personal inputs from individuals would offer insights into their perceptions, thoughts and beliefs about the topic that we may otherwise not be privy to. We were also interested in seeing whether the qualitative data would correlate with the quantitative data.

The qualitative aspect of the assessment was done using an interpretive approach, concerned with process and context, rather than focusing on differences and comparisons, focusing on “broad, panoramic views, rather than micro-analyses.” In addition, we compiled summary statistics from Internews in Kenya’s database of outputs over the course of nearly nine years. As part of its overall monitoring and evaluation of the project, Internews in Kenya maintains a database to document and capture outputs related to activities for each reporting quarter. We felt it important to review and include the data from this database as it provides an excellent overview of activities and outputs successfully completed, spanning 2003 - 2011.

The target population for this study was men and women between the ages of 15 and 65 and were drawn from: the pool of journalists trained; key partners (health agencies);
OUR APPROACH

COMMUNITY
To understand the impact on communities where Internews has been most active, we targeted people in three different communities to get indicative quantitative data about the impact of health information on people’s lives and qualitative data about why and how they receive health information. The sites chosen corresponded with the broadcast footprint of Internews partner stations.

- Eight focus group discussions with 89 participants. Kisumu and Korogocho
- Survey of 626 community members. (Kisumu, Korogocho, Kwale)

MEDIA
In order to better understand the impact of Internews training and mentoring on the professional development of journalists, we conducted key informant interviews and a phone survey with selected journalists trained more than once by Internews.

- Survey of 116 journalists. (Nairobi, Eldoret, Kisumu, and Mombasa)
- Sixteen in-depth interviews with journalists. (Kisumu, Nairobi, Mombasa)

HEALTH PARTNERS
We sought the input of key health partners in government and civil society to better understand how health information has changed and how their engagement with media has changed, in order to get a high-level view on health information and Internews’ role in the past nine years.

- Survey of 61 partners and key stakeholders (NGOs and government health agencies). (Kisumu, Nairobi, Mombasa)
- Twelve in-depth interviews with individuals representing partners and key stakeholders (NGOs and government health agencies). (Mombasa and Nairobi)

PROJECT DATA
We mined existing data, e.g. quarterly reports, previous evaluations, annual donor reports, and other relevant publications for background and information.
stakeholders that included government agencies focused on health; and communities.

For the purpose of the assessment, Internews commissioned a consultant (and the author of this publication) with prior knowledge of Internews to work with Internews staff and a Kenyan research consultancy, Research Guide Africa (RGA). In addition, staff members of Internews also helped with the development of the surveys, trained enumerators, and overall, offered support to the assessment team.

The research was conducted between April and May 2012 and included data collection in Nairobi, Korogocho, Kisumu, Eldoret and Mombasa. The research team comprised a lead consultant researcher, Internews Program Officer Revati Prasad and five Kenya Internews staff members: Bellah Mikangi (Project Assistant: Health & Digital Media); Medlene Kinyanjui, (Program Officer: Health Program), Maryanne Waweru-Wanyama (Projects Researcher: Health Program), Benson Murigi (Media Resource Center Assistant: Health Program), and Samuel Musila (IT Assistant).

The journalists represent the broad spectrum of Kenyan media in broadcasting (mainstream and community), print and online platforms.

The following are descriptions of the tools used during the assessment.

1. **Journalist Phone Survey**

   In April 2012, Internews contracted an independent research firm, RGA, to conduct a phone survey of journalists that Internews had trained more than once. Internews compiled a database of trainees from 2003 and 2011 and attempted to survey the entire sample (116) of journalists who had been trained by Internews at least twice, and up to 6 times. Of the 116 journalists identified – 44 women and 45 men with the average age 32 years – eight now work, or are closely affiliated with Internews, and were therefore deemed ineligible; one passed away; 15 were unavailable or unreachable; and three declined to participate. Eighty-nine of the 116 original and 108 eligible responded to the survey.

   Participants were informed that answering the short survey on a voluntary basis, while remaining anonymous, would help Internews understand how its journalism workshops and roundtables have helped them in their professional development. The data was disaggregated according to gender. Participants' ages were ascertained, as well as their professions (where they could select as many as appropriate) and in which sector e.g. radio, print, online or television (as many as appropriate); which described them best in terms of how they were employed; their educational and other training backgrounds; and what the focus themes were of the Internews' training (where they could select as many as appropriate). In addition, the journalists were asked to rank the top three health topics they thought the Kenyan media should focus on. The list of topics included: family planning, women's health, children's health, malaria, TB, HIV, STDs, cancer, heart diseases, nutrition; and access to health services.

   Participants were also given a list of professional events/activities that may have happened since their last training, such as whether they had won an award, earned a promotion, received negative feedback from co-workers or management, left the profession or had more stories placed than prior to the training. Again, they could check more than one. Using a Likert item, each participant was

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14 See About the Author (p. 2)
15 Journalist Phone Survey. Appendix 2.
given the opportunity to evaluate, using different levels of agreement or disagreement, the following statement: “Internews support was instrumental in my professional development.” Finally, the journalists had the option to respond to two open-ended questions, which asked them to tell us what they thought was the most or least helpful to them in their careers about Internews’ training.

2. IN-DEPTH INTERVIEWS WITH JOURNALISTS

We interviewed in-depth 16 journalists, all of whom had either been trained by Internews, or had in their senior-level editorial capacities encouraged and supported journalists in participating in Internews’ trainings. Some had also worked closely with Internews as media representatives during roundtables, trainings and other events, contributing to the discourse on public health in the Kenyan context. The journalists were from Kisumu (3), Korogocho (1), Nairobi (8) and Mombasa (4) and were identified to participate in interviews from April through May 2012. They represented both junior and senior level journalists. The unequal distribution between male (12) and female (4) representation is a reflection of the reality prevailing in Kenyan newsrooms, which are still largely male dominated, especially with regard to senior editorial positions. The exception was one female news editor, Catherine (Chiku) Wanjiku, of the community radio station KOCH FM in Korogocho.

The interviews comprised a series of semi-structured, open-ended questions, to gain insight into the value added to their professional lives as journalists through training with Internews. Each interviewee was also asked to rate on a scale of 1 to 10 (one being poor and 10 being excellent) where they thought health reporting in general landed in
Kevin Mureithi, K24 producing a story on ARV adherence during a mentorship travel grant to Nyandiwa, Nyanza, Nyanza.
the Kenyan media, reporting on HIV and AIDS, and other news, such as politics, financial, sport and entertainment. All interviews were recorded, and the interviewees informed that their comments would form part of a published assessment and therefore be part of the public realm.

The journalists represented national and community radio, online news media, television and mainstream print media; several of them were in senior editorial positions, with the others either working on staff, as freelancers on contract, or as freelancers. Two had left the profession: one to work in public relations for an NGO, and one who works as a consultant in media development training, which has included working for Internews. The data was analyzed by reviewing the interview transcriptions, checked against the recordings, and then clustered into overarching themes, and where appropriate, into sub-themes.

3. PARTNER SURVEY

A survey of Internews’ NGOs partners and key stakeholders was conducted in April 2012, to understand whether our work in training NGOs in advocacy, strategic communication, media relations, and networking of journalists and health NGOs has been beneficial to their work.16

A survey was conducted in-person, over email and by phone to ensure the broadest geographic reach and a higher response rate. Of the 74 surveys sent out, Internews received

16 PARTNER SURVEY. APPENDIX 3.
responses from 61 individuals, each representing a different partner, making for a response rate of roughly 82%.

The partner organizations selected for the survey were those with whom Internews has been the most actively engaged over the last four years, regularly attending media-related events such as roundtables, participating in training and offering expert advice and support. The organizations range from newer NGOs to government agencies – all focused on HIV and AIDS. Some have been working for only a few months, while others have been established for many years. When asked to approximate how long they’ve engaged in the sector, partners surveyed averaged around 15 years. Their experience with Internews ranged from a few weeks to several years, averaging 3.5 years.

Posing both closed and open-ended questions, our survey asked partners to assess their work with the media and their relationships with Internews. Questions related to the Kenyan media included whether their press releases/media events are covered by the media, whether anyone in the organization interacts with journalists who cover the issues they work on, whether they are satisfied with the media coverage of their stories or issues they focus on, and how helpful do they consider working with the media.

Related to Internews’ support, the survey asked participants to indicate their level of engagement with Internews, what help they had received related to support with press releases, training in strategic communication skills, and building relationships with journalists.

4. IN-DEPTH INTERVIEWS WITH PARTNERS AND KEY STAKEHOLDERS

Interviews with individuals representing Internews’ partners were conducted in Nairobi and in Mombasa from April through May 2012. They represented government health agencies and NGOs with a focus on health and HIV. Twelve people participated in the interviews, which were made up of a series of semi-structured, open-ended questions, to gain insight into the value of having partnered with Internews and to understand whether our work training health agencies in advocacy and strategic communication, and networking of journalists and health NGOs has been beneficial to their work.

All interviews were recorded, and the interviewees informed that their comments would form part of a published assessment and therefore be part of the public realm. The data was analyzed by reviewing the interview transcriptions, checked against the recordings, and then clustered into overarching themes.

5. COMMUNITY SURVEY

As part of the overall assessment, Internews contracted the independent research firm, RGA, to conduct a community survey of 626 people across three communities in different regions of Kenya. A sample of just over 200 respondents was drawn from each of three distinct locations: Korogocho, Kwale and Kisumu.
A little bit should be noted about the three communities to give context to the environments in which the community surveys were done.

**Korogocho**, which literally means crowded shoulder to shoulder in Kiswahili, is one of Nairobi’s largest informal settlements. It is officially home to between 150,000 and 200,000 people, although some believe closer to a million call it home – all pressed into less than 2km. It lies to the northeast of Nairobi. Korogocho is known for its extreme poverty and high unemployment rates. It is also home to Nairobi’s only city dump, Dandora, which provides a meager income (less than $2 per day) to thousands of people who pick over and sort the garbage daily. The site is not without controversy, as many believe the site to be a convenient dumping ground for all kinds of hazardous materials, including medical waste. There is little formal infrastructure, no central sewer system and no piped fresh water, and few resources, all contributing to poor health. Korogocho was also one of the sites of the 2007-8 political unrest over the disputed presidency of Kenya.

**Kisumu** is a port city in Nyanza Province in western Kenya, with a population of some 400,000 people. It is the third largest city in Kenya and hugs the shores of Lake Victoria, with many people earning a living from fishing in the lake. It is also the traditional home of the Luo people and one of the places where Kenya has focused its male circumcision drive. The aim is to get more than 1 million men between the ages of 15 and 49 to agree to the procedure, based on studies that show that circumcision reduces the risk of a man contracting HIV by as much as 60%. Nyanza Province’s HIV prevalence is the highest in the country at nearly 15%, and Luo men, who traditionally are not circumcised, were found to have a prevalence rate three times higher than men who do practice circumcision.
A STORY A DAY ... THE MEDIA AS A PREVENTIVE TOOL IN PUBLIC HEALTH
Kwale is a small town with an urban population of some 20,000 people in Coast Province, and is located near the port city, Mombasa. It has a high poverty rate at nearly 75% as indicated during the census for 2005-6. The per capita health spending for the fiscal years 2008-9 and 2009-10 was estimated at KES 31.18

The locations were selected for their demographic diversity: Korogocho as one of the largest informal settlements in Kenya; Kisumu district with its urban, rural and peri-urban populations (although we focused on the peri-urban divisions of the city); and Kwale as predominately a rural area. All three areas also fell within the footprint of broadcast and print media outlets whose journalists had been trained by Internews. Across all three locations, 48% of people surveyed self-identified as having enough money to eat, but not enough for clothes. It was the most common description of household income in each location, from 53% in Korogocho, 42% in Kisumu, and 47% in Kwale.

RGA employed Probability Proportional to Size (PPS) sampling technique, where selection probability for each element is set to be proportional to its size measure, so that a division with a higher population would also yield a higher sample size. The number of interviews per division was allocated proportionally across the sub-locations that made up that division. At the final stage, villages within the sub-locations were selected randomly, with a maximum of 10 interviews per village to maximize the spread. RGA employed PPS because the limited disaggregation available in census data meant a stratified random sample was not possible. Although the PPS approach can improve accuracy by concentrating on large elements that have the greatest impact on population estimates, the sample drawn and the survey results cannot be considered representative of the whole population. Populations with very low incidence in the general population may be under-represented.

In all areas, random starting points were characterized by an identified landmark – the household nearest to that point was where an interview could be carried out. After every successful household, four households on the left were skipped, with enumerators calling on the fifth household. At household level all persons aged 15 – 49 years had an equal probability of being selected and the Kish grid19 was used to select one qualifying member. Up to 2 call backs could be made to the households should the selected person not be available. Korogocho and Kisumu households had call backs mainly over the weekend to increase the probability of finding the selected respondent.

Supervisors accompanied at least 10% of all surveys and a mandatory minimum of 15% of all surveys conducted was back-checked, which involved calling the respondent and checking on selected demographic questions and the selection technique. In addition to basic demographic information, the survey asked respondents about their information needs, specifically in terms of health and their information sources, how often they use the sources of information, and how much they trust them. The surveys were conducted in English, Swahili and Luo, which meant that responses in the two latter languages had to be translated into English for the purpose of analysis.

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6. **FOCUS GROUP DISCUSSIONS**

Eight focus group discussions took place during April and May 2012, with participants drawn from two communities: Kisumu and Korogocho. Each of the four focus groups represented: young women between the ages 15-24; young men between the ages 15-24; women between the ages 25-65; and men between the ages 25-65. The aim was to have a minimum of eight participants in each discussion group, with the optimal number, 12. The independent research firm RGA drew participants from the communities through a random individual selection process within the defined demographic groups, inviting them to participate in a focus group discussion. Due to time pressure, we did not hold focus group discussions in Kwale.

Each focus group was informed that their inputs, while anonymous, would help Internews gain a deeper understanding of the impact of health reporting and news in the media, and that their inputs would be used as part of an assessment that would be published.

The discussions were facilitated by the author, with the help of co-facilitator and translator Eunice Opul from RGA, while the other member of the team, Rosemary Oduor (also from RGA) took notes, backed up by summary notes by the author. All discussions were recorded for verification purposes, especially as in many instances people switched between English, Kiswahili, and in the case of Kisumu, Dholuo. The notes were taken in English.

The format of each focus group discussion was:

- Welcome and introductions of the research team, as well as the participants;
- An explanation by the facilitators of the focus of the discussions and the value each participant would bring to the process;
- A run-down of the process;
- Permission sought to record/document their comments, as well as take their photographs;
- Showing two PSAs (HIV-related) and two television news reports that had been broadcast by media and were done by reporters trained by Internews: (1) Condom recycling story and (2) The elderly and HIV;
- An open discussion, with people encouraged to engage with each other, rather than only talking to the facilitators (lasting between 2 and 2.5 hours each);
- Participants were thanked and asked to sign a release form/register and that they had received a small stipend. Each participant was given a small stipend for attending the focus group discussion: 300 Kenyan Shillings (approximately $3.50) to help pay for transport.

In Kisumu, the focus group discussion took place in a hotel in town, whereas in Korogocho, the discussions were held in the community center.

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**FOCUS GROUP DISCUSSION TEMPLATE. APPENDIX S.**

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It should be noted that this assessment does not claim that the overall changes in the media landscape and public health seeking behavior is solely and entirely as a result of the work of Internews. But seeing that Internews is recognized as an important actor in Kenya in the field of health journalism, certainly, the organization has contributed greatly to addressing needs and filling gaps telling the story of HIV and other related health issues. This was substantiated repeatedly by key stakeholders and others whom we quote extensively throughout the publication. Equally important is that several people commented during the interviews that Internews’ approach happened within a paradigm for social change that is participatory, sustainable, and empowering.
Anne Soy of KTN, who was trained by Internews, and the overall winner of Storyfest 2012.

JAVIER MORELO
The aim of this assessment, as described earlier, was to gain a deeper insight into and understanding of the impact of Internews’ health journalism and media relations training on public health. This also included taking into account other forms of support given media houses and NGOs, such as access to resources and helping to establish and build strong networks between the media and those working in the non-profit sector focused on HIV.

It was also interesting to note that there were no key differences in people’s responses across the three different locations (Kisumu, Korogocho and Kwale) to the question of the importance of health news. This in itself is a useful finding, as it suggests that people share similar views about the importance and need of health news across diverse geographic locations.

Regina Ombam, Head of Strategy for Kenya’s National AIDS Control Council (NACC) in the Office of the President tackles the role of the media head on. “Principally I look at journalism in the health sector as a very strong preventive method to use a cost effective way to deal with health. Once people know about their health, they will take responsibility for it. This will save the country much more than if we let people get diseases and then treat them.”

The National AIDS & STI Control Programme’s Dr. Cherutich certainly believes in the power of the media as “demand creator” and its critical role in public health. He has worked with Internews since 2008 in media training on male circumcision and HIV testing. “In terms of HIV testing, increased coverage of HIV leads to more testing, and I can attribute this, at least partly, to Internews.”

Regina Ombam, Head of Strategy, National AIDS Control Council (NACC)

Referring to the government’s voluntary male medical circumcision initiative, he explained: “The impact of one story of death would have collapsed the whole program.” Bearing in mind that Kenya is one of the top performers in scaling up voluntary male medical circumcision in East and Southern Africa, as mentioned before, it is important to note that Dr. Cherutich fully acknowledges the role of the media in the campaign. “We needed the media to cover it accurately. This happened. When [the journalists] got the science correct, whatever angle they decided on, the reporting was helpful.”
In response to the TV news story about the Isiolo community having to recycle condoms due to a shortage, one person during a focus group discussion said: “For me [this] clip is captivating, showing an area where life is difficult, and it took a media initiative to show [how people were frustrated not having condoms].” Another person remarked: “It makes the government aware of the needs of the people; the role of journalists, they help people to be more educated about STIs and HIV.”

Other responses from the focus groups ranged from “[journalists] are there to educate people, and also check on the impact and follow-up on issues, to “they are the link between the health services access and the community in general.” Comments such as these support the journalists’ and key stakeholders’ perceptions and beliefs that the media plays an important preventive role in public health.

Indeed, as Dr. Cherutich had noted, when the story about the Isiolo community broke, everyone, including the government, took notice and responded.
“There have been so many myths and missed opportunities [related to health reporting]. We have dedicated sports reporters who know the rules of the game and the names of the players, but if we randomly assign reporters to cover health, then the public and health services get a raw deal. There is a real need to identify medical reporters, because every disease is important.”

DR. MAURICE SIMINYU, PROVINCIAL DIRECTOR OF MEDICAL SERVICES OF THE MINISTRY OF HEALTH

1. **DEMAND FOR HEALTH NEWS IS HIGH**

Results from the community survey and responses during the focus group discussions across two locations indicated a very big public appetite for health news.

Of the 626 people polled across all three locations (Kisumu, Korogocho and Kwale), 87% ranked health news as very important, and when asked to indicate which three health topics they would like more information on, the respondents most often ranked HIV the highest.

During one of the focus group discussions, when asked about the importance of health news including HIV-related news, both men and women across all ages agreed that health news was very important and that they were interested in it, answering with a resounding yes. One person even noted: “[Health], it’s a human right.”

Positive feedback on health news included comments that indicated that people had learned much from HIV-related news:

- “Radio Lake Victoria informs me on health and also KBC channel especially with information on HIV on ways of prevention and use of ARVs to prolong our lives.”
- “Journalists not only gather information, they create awareness and will encourage the provision of more condoms [for instance].”
- “There was a documentary on male circumcision and how it reduces the risk of HIV transmission.”
- “We all get enough information on HIV, but STDs is not adequate. It is like HIV became the umbrella for all sexually transmitted diseases that have not been given publicity. They have been eclipsed by HIV and AIDS.”

From a media point of view, all the journalists we interviewed agreed that health news is critical. NTV’s Linus Kaikai noted that from his perspective, although “health issues are very pertinent […] a lot needs to still happen” on the news front to raise it from the below average coverage that is still the norm. As one reporter put it, “even we journalists need health news.”
2. THE MEDIA IS CENTRAL TO STIGMA REDUCTION

The Standard newspaper’s Steve Umidha writes in May 2012 how ignorance led to years of stigma and discrimination for a 22-year old law student. He tells the story of Dorcas Kawira who was born HIV positive, and how it convinced her to publicly reach out to others. “Stigma and discrimination is difficult to address if people don’t talk about the disease,” he quotes Dorcas saying, writing that when she fell ill after being orphaned, family members refused to pay her medical bills, “since she was dying anyway.”

Dorcas’ story, like that of many other people living with HIV, offers a glimpse into the reality for many people who had been diagnosed as HIV positive. It also defines the level of stigma and discrimination associated with the disease that still exists, even if only as a shadow of the level of stigma in the early days after the virus was first identified. Importantly, Dorcas’ story is one that offers the media an opportunity to respond positively to one of the biggest challenges stymieing those working to turn the tide on the disease – that of stigma. Despite the many campaigns initiated by the Kenyan government and NGOs, stigma and discrimination against people living with the disease was very much a reality in the mid-2000s, and one that lingers to this day.

Both the journalists and the NGO representatives and staff we interviewed spoke to the fact that especially during the mid-2000s, many media outlets provided the much-needed and critical channel of communication during this time, and actively promoted discussions in their news and programming about the disease and its associated stigma. Several journalists also related how they quickly understood that HIV-related stigma formed major barriers to effective prevention and that they needed to quash the tired and clichéd depictions of the disease as a “grim reaper.” Although it was still a difficult story to tackle in the late 1990s...
and early 2000s, by the mid-2000s, things had started changing quite dramatically.

“[At first] the media houses were not willing to talk about it. It did not make the headlines. But since then, there has been a big shift right up to the senior level,” recounted Internews-trained Sammy Muraya, who now works as a media consultant. “Internews was part of making that shift possible. The biggest fight was killing stigma. And this had to start with the journalists themselves. Not with the public. But with the media.”

NASCOP’s Dr Cherutich, in addressing the issue of the media’s role in stigma reduction associated with HIV and related-health matters noted that “increased coverage [does] influence stigma.”

“We have seen coverage from policy level to community level, TV crews going to homes talking to people about how there were in denial, how they found out, how they told their family, how they were sick but are healthy now ... the media has encouraged that dialogue and there is certainly less stigma and less discrimination now,” he explained.

One particularly poignant comment came from a young man during a focus group discussion. Referring to the TV news report on the elderly living with HIV, he noted that “on the 80-year old man, we saw that HIV has no age limit. It showed us that there is a need to still have education for all, not only younger people.”

3. TRAINING JOURNALISTS TO COVER HEALTH IS CRITICAL

In July 2009, the story of Halima Yassin, a woman from northeastern Kenya living with HIV, stunned viewers of Kenyan Television Network (KTN) when she told the station’s two Internews-trained journalists, Ziphora Karani and Charles Wekesa, how her family had abandoned her because of her HIV status.

Supported by Internews with a travel grant and mentoring, the two journalists captured Halima’s story as she explained how her wealthy family had left her for dead. “My mother and younger sister drove me and dropped me far away. I had to crawl to a main road where I was spotted by a ‘Good Samaritan’ who brought me here”; here being...
the Garissa District Hospital. The hospital would become her home for nearly five years. Halima also maintained that her father had tried to poison her. “I then realized that my HIV status [had] cost me the love of my parents.”

After the news story aired, reactions flooded in to the KTN newsroom and its sister publication, The Standard newspaper. Overwhelmingly, people thanked the station for highlighting the story. It also led to the Kenyan government promising to create further awareness of the issue in the northeastern parts of the country, using vernacular radio stations, and BBC’s Somali Service. And for Halima, telling her story so publicly brought unexpected help, as a viewer who saw it on television offered her a decent place and domestic support to care for her.

Halima’s story as told to the KTN reporters vividly illustrates the media’s role as the “connective tissue of society,” so described by the writer and social media educator, Clay Shirky. The outcome of the news report not only illustrates the far-reaching social

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23 SHIRKY, C. 2010. COGNITIVE SURPLUS: CREATIVITY AND GENEROSITY IN A CONNECTED AGE. LONDON: PENGUIN PRESS
consequences for an individual, but also for the wider public in terms of raising awareness of critical health issues and their consequences, while at the same time prompting an immediate response from the government.

“We have an obligation to tell these stories to make a difference,” explained Ziphora Karani, who noted that Halima’s story was part of an HIV and AIDS-related series produced by her and Charles for KTN.

This is one example of the coverage of HIV as an important health-related story and the impact of the media, made possible through focused in-depth journalism training and again, the additional support of a travel grant.

For a Mombasa-based journalist, his radio stories are equally important. He explained that he saw health news in a personal light that speaks to the role of the media as a preventive health tool. Crucial for him was the fact that the health journalism training had changed how he wrote about people, and that he “not injure those living with HIV,” while helping the public understand more about HIV and make wise decisions.

In analyzing the in-depth interviews with journalists and editors, it was also clear that they all thought they had derived both professional and personal benefits from the Internews training and other media events, such as roundtables. Many of them remarked that prior to Internews’ starting the health journalism program there was limited coverage of HIV-related news, let alone other health news, giving them little opportunity to focus on it in their daily work or even think about it as an important issue in their lives. [24]

Chiku (Catherine) Wanjiku, a news editor with the community radio station KOCH FM that serves Korogocho, put it this way when asked about the importance of covering health topics as part of their news line-up and whether it makes a difference in the lives of their audience: “Now we do a [full] feature on HIV every Wednesday. But as a forum for the community, we’re also going broader than HIV to look at other things, like malaria, family planning, young mothers. We are the voice of the voiceless.”

**BOX 6 HIGHLIGHTS AND SUCCESSES**

Over the years, many journalists who have been trained by Internews have won awards. Of the 89 interns trained journalists we surveyed, 55% recorded that they had received some kind of recognition for their work, through Internews or others.

In 2011, Beryl Ooro of K24 brought home an award for her story on 89-year old Silvanus Olunga from Butula. Winning in the HIV/AIDS Reporting in Africa category of the CNN Multichoice African Journalism 2011 award, she said: “I am now even more motivated to push for excellence in journalism.”

One of the judges remarked: “The story is brilliant and fascinating. For too long, the story of HIV/AIDS pandemic in Africa has been told that one begins to wonder if there is anything new to say. And then, here is a story that throws up an entirely new perspective, which shows that an age group (octogenarians) hitherto considered not at risk can also be vulnerable.”

Country Director Ida Jooste summarizes Internews’ approach to rewarding journalistic excellence this way: “At Internews, you don’t get a certificate or graduate for attending or completing the training. You get it for putting that training into practice. So, training is Phase 1. Producing stories is Phase 2. Phase 3 is the graduation. And Phase 4 is when you have produced even better or more stories, when we recognize journalists for going beyond the basic requirements of their craft.”
The survey also mirrored the results of the focus group discussions, with the majority of the participants (87%) saying that health news was “very important.” The survey also asked people whether they had enough information on health; those who said they had enough information on malaria (44%) and HIV (45%) outstripped those who said that they did not have enough. The opposite was true for other non-communicable diseases. People responded that they had no information on diseases such as cancer (49%), diabetes (49%), heart-diseases (60%), and asthma (51%). When asked to rank the top three health topics they would like more information on, survey respondents most often ranked HIV as one of the top three at 42%. This was the case across all three communities surveyed (Kisumu at 92%; Korogocho at 82%; Kwale at 88%).

The data also illustrates the important role that health news plays in peoples’ daily lives. In fact, 95% of the respondents indicated that they were likely to listen to a radio station for health information after visiting a doctor or community health center.

Every journalist we asked also rated health news important, saying that there is a need for the Kenyan media to expand on their coverage of health, to include cancer, family planning, nutrition and other health-related topics. However, as far as HIV-specific reporting is concerned, science writer Gatonye Mbugua believes that if it drops off the [news] table now, “it [a high HIV prevalence rate] will come back.”

And although NTV’s Linus Kaikai also argues for more coverage of broader health issues, he did caution against HIV being swallowed up other diseases. “It still needs focused training as there is still a gap. We need balance.” He also stressed the importance of journalists being trained to tackle health policy and administration stories, given their potential to impact lives.

“One of the greatest impacts of Internews has been the way it has increased HIV coverage in the media. Suddenly the coverage has been more and more factual and more and more positive. I think the evidence is there and it’s very clear.”

DR. PETER CHERUTICH, NASCOP
4. **TRAINING JOURNALISTS TO REPORT ON HEALTH HAS THE POTENTIAL TO DELIVER GREATER RESULTS**

Traditionally, development investments in the media rely on paid messaging and serialized dramas to convey important health information, with SBCC approaches using the media as a conduit, rather than as a partner. While acknowledging the effectiveness of communication campaigns to raise awareness of such public health issues as HIV and AIDS, our assessment showed that on their own, these one-way message campaigns can be limited. It is also widely acknowledged that the visibility and impact of media campaigns and other targeted advertising can be short-lived, as they are expensive and depend entirely on sponsorship. However, training journalists to tell a health story well, employing sound and tried and tested journalistic principles, and putting a human face on a news story, i.e. telling the story of real people, can pay dividends, as it can amplify and facilitate communication campaigns contextually.

This was confirmed to us, after we tested people’s responses to news reports and traditional media campaigns, during the eight focus group discussions held for the purpose of this assessment.

We showed each of the eight focus groups four video clips: two PSAs focused on safe sex and HIV prevention, and two news clips related to HIV. The PSAs focused on young people’s sexual behavior as part of the “Chill” campaign, and the other on the issue of sexual promiscuity. The two TV news stories told the stories of the condom recycling community in Isiolo, and how HIV affects the elderly by focusing on one man in his 80s living with the disease.

In all the discussion groups the video clips elicited strong reactions that offered personal insights into some people’s perceptions. In one instance, a man from Korogocho said that although the PSAs and news advocated that people use condoms, he still felt that the message failed, because even if condom dispensers are in the open and user-friendly, “we shy away from using them, for fear of other people seeing us taking condoms.”

During one of the discussions, women (aged 25-64) were confused by the Chill PSA message, aimed at young people advocating that they abstain from sex. “The Chilling
doesn’t make any sense – it’s a song; it promotes other things, not abstinence,” one person noted. Others were quick to agree. One woman also said that the “V” sign associated with the abstinence campaign was not appropriate, as for her, it signified “legs spread”; rather a single finger shown as the number 1 should have been used, to indicate “no” if the message was to promote abstinence.

One person however said that for her the Chill campaign worked, exactly because it showed young people dancing and having fun, while still advocating abstinence.

In a different discussion group, one person remarked that they felt that the PSAs lacked “truth,” because “we know that the actors are paid to do advertisements.”

Overall, the people who participated in the focus groups were deeply thoughtful about the subject matter and engaged in the discussions. The majority of the participants were also willing to share strong opinions and views and connect with others in the group. Because of their repeated exposure to the PSAs in the media, the majority of the participants were well aware of the campaigns. As was expected, the different age groups presented generationally different views, e.g. “Yes, ‘chilling’ is sometimes understood by some youth as ‘abstinence, but some don’t”; and “I am an elderly person and sometimes we go for a ‘side dish’ due to being away from home for work, and get exposed to HIV.”

Repeatedly during the focus group discussions, people said they wanted to hear about their own communities, their own lives, and their own issues in Kenya, especially in the context of the news stories they watched. One person noted: “[News] … it’s educative and informative at the same time, like the condom washing [story]. Another pointed out that because of all the other information available, news stories like the condom washing one had “more impact.”

When asked which of the two different kinds of communication and messaging worked best for them – news stories or PSAs – people without fail chose news. Even though the “advertisements” made them laugh in some instances, or left them puzzled in others, time and again, across geographic locations, gender and age, people said they could identify easier with the people in the news reports. In the end, the real stories of real people, resonated most with the majority of the participants in the focus group discussions; of the 49 men and 40 women who participated in the discussions, more than 90% preferred the real life TV stories to the PSAs, or advertisements as they called them.

Many of the individuals interviewed for the assessment spoke about the benefits and value derived from training and engaging with Internews. While ‘benefits’ speak to more tangible results (e.g. promotion at work, more stories placed, better media coverage of events of NGOs), ‘value’ speaks to the broader outcomes of Internews’ training and engagement with the media, its partners and key stakeholders. Bearing this in mind, our findings showed that the overall aim of the program to create a supportive social environment for preventing and mitigating the impact of HIV and AIDS through enlightened, informed and committed journalism was met, over and over again.
“We have not gotten to the point where people see health as a personal responsibility. When people think about health, they think about sickness. The screening programs and going to regular check-ups is still something that is very alien to most of our people. To the common Kenyan, you’re only sick when you’re feeling pain, when you’re vomiting, when you can’t eat, when you’ve lost weight. No one imagines that 10 years before, a sickness has been building up over time. It is a mindset and if we can change the mindset of communities and populations [it can] lead to a social transformation.”

DR. PETER CHERUTICH, NASCOP
How journalists who have been trained by Internews write about HIV (and other related health issues) was one of the clearest themes that emerged from the data. Repeatedly, journalists referenced writing and their new understanding of the importance of appropriate language as one of the main benefits derived from their training, to the point where at least one felt that even his editorial team had changed their view of the language used to describe HIV after he had been able to substantiate why pejorative language, even if unintentional, was not acceptable. Journalists also mentioned that the training had broadened how they thought of HIV as a public health issue, and that it gave them a new perspective on how to find different angles to tell this critical story.

In addition, our findings showed that added to the journalists’ ability to increase the placement of their health stories, 95% agreed that Internews’ support had been instrumental in their professional development.

During the interviews, many journalists also referred to the benefits of the Internews travel grant awards that had taken their reporting to a new, higher level of not only experience, but also exposure to other issues they may not have known about. MESHAS’ Daniel Aghan added that as important as it was for urban-based journalists to travel to other parts of the country, the organization’s engagement with rural journalists was for him one of the biggest “pluses.”

“These journalists are usually neglected in this part of the word. It’s expensive to train them and people think there are no people to report to in rural areas,” he remarked, adding that this meant that a big gap had been filled. “We journalists many times felt that we were orphans, with no one to turn to. And look now at the quality of reporting on HIV and health. We used to be sensational. But now, journalists no longer just report on the bad things. We put a human face on our stories. Internews with its focus and support has dismantled the myth that we need lots of money – rather, with a little bit, and facilitation, we’ve done wonders.”

Other quantitative results showed that 60% of the journalists surveyed said that Internews provided the training that was most useful to their career – even more so than college education. This compared to 16% for diploma courses and 10% for a university course. Of those who had completed a diploma course, 75% felt that the Internews training was actually more beneficial.

What is perhaps more difficult to measure is the personal development experienced by the journalists we interviewed. It was however clear from their answers that being taught how to critically analyze their own stories compelled them to analyze their own attitudes. For Mombasa-based journalist Ibrahim Jaafar Oullum, it meant extraordinary empowerment. Learning about stigma and discrimination through Internews gave him the courage to do something he did not think possible – challenge his editors when he felt that HIV-related language used in the news casts was not appropriate. “Before the training I could not challenge [my editors], but now when I have a reason, I can back it up with facts.”

Many of the interviews also reflected an attitudinal change. In their one-on-one interviews several journalists mentioned how their own use of language and even thinking had changed. “Seriously changed,” as one reporter put it. Another journalist recounted how he had tested his own personal fears by going for voluntary testing, after many months of encouraging people to do the same on air – a deeply liberating move he believed was measured against 65% who had completed a diploma course and 38% who held either an MA or BA degree from a university.
that took his work as a talk show host to a new level of honesty and integrity.

Linus Kaikai of NTV was quite clear. “Internews contributed to the positioning of NTV.”

“NTV is an issue-driven station,” he explained, “not an events-driven one. We want to report what can and ought to happen in key areas [such as health].” As a result of working with Internews, and having journalists from his newsroom trained in health, NTV created a weekly slot called Health Assignment. The idea is that other journalists will contribute to the slot, while at least one journalist is dedicated to it. For Kaikai, health is as big as politics, and more importantly, should also be considered within the framework of policy.

This speaks to the work done by the Internews trainers and the organization’s approach to training. Based on the responses from the journalists interviewed, the trainers have helped them understand how to cover HIV with thoughtfulness and sensitivity, and how to apply this to their own analytical thinking. In addition, by expanding the range of HIV health-related topics, Internews also successfully conveyed the deep complexity of the virus, which intersects with public health and science, as well as many other areas, such as politics, socio-economics, religion, and human rights to name only a few. The result – more informed and enlightened journalism and better journalists.

Dr. Nicholas Muraguri, former head of the Kenyan National AIDS and STIs Control Programme (NASCOP), and now leading the UN’s Secretariat for its Global Plan to eliminate HIV among children and keep their mothers alive, noted publicly: “There is a difference between the articles written by graduates of Internews and others. Those who have gone through Internews know how to handle stories; they know how to research and source stories. They know what language to use. Their stories are more relevant, contextualized, informed and ultimately meaningful to audiences and the country.”

6. **NGOS WHO ENGAGE WITH THE MEDIA ARE MORE SUCCESSFUL IN REACHING THE PUBLIC**

Before working with Internews 60% of partners reported never or rarely (once or twice a year) engaging with the media. When asked to provide examples of how Internews support has been beneficial (an open-ended question), 94% responded positively, mentioning that the training they received from Internews was beneficial (54%), while 40% rated the connections and networking opportunities with journalists as examples of a clear benefit.

Working with Internews garnered a very high score, with 93% of health-focused partners surveyed saying that this engagement was beneficial for their organization’s work. In addition, 88% reported that since working with Internews, their relationship with the media had improved, with 85% saying that they now engaged more often with the media, and 77% noting that Internews had “helped build relationships with journalists.” This speaks to the sustainability and impact of the training, which is designed to make the important link between NGOs and the media, build their capacity for media relations, as well as to develop communications strategies for engaging their audiences through the media.

Reachout Centre Trust (a partner of Internews) in Mombasa is an NGO that works with vulnerable groups such as people who use drugs, sex workers and trafficked persons.
The organization’s director, Taib Abdulrahman Baseeib, explained how he realized that if the media did not write about the issues his organization works on it was probably because they did not have the information to do so. “We had all this information, reaching 10,000 drug users, putting 600 through rehabilitation, helping 7,000 people get tested [for HIV], and supporting people in getting onto HIV care and ARVs.” For him, the “click” happened when he understood the role that the media plays in public health and how this contributes to the community and society. “[This] is why it is important for the media to focus on health issues. Health is the basis of a strong society.”

Even with all this information, Baseeib said that he was not sharing it “because of fear of the media and being misrepresented.” He explained that it was only after being trained by Internews that he fully understood how critical it was to be proactive and provide information to the media, to the point where he now regularly works with five radio stations and “pops in to share information” often to raise awareness of issues and “connect with the community.”

“It really opened my eyes how to work with reporters, and effectively.”

Pauline Irungu of the Global Campaign for Microbicides, who was first trained by Internews in 2005, is clear how this has helped her in her work with different health agencies. “It transformed the way I work – the training helped me translate NGO-speak into English ... today, I can describe microbicides in one sentence.” Even more critical is the extensive network she has built over the years with journalists, based on the Internews model of networking. “Now people call me, saying that they heard that I have a story.”

Time and again, individuals working for health agencies note this as a radical turnaround – they are now proactively sought out by the media after training and events organized and held by Internews.

For Irungu, this has helped her “jump hurdles” in addressing information gaps, by now being able to have conversations about complex scientific health-related issues with the reporters who will translate it for the general public. “If the media communicates it the wrong way, it affects all of us, and influences how policy makers decide ... it can even lead to funders hesitating. The media plays a pivotal role.”

Irungu also acknowledges what she terms the “massive transition” in how the media report on HIV and other health issues. In the past, she explained, the stories all fed fear, by “evoking scary images.” Now “it’s more knowledgeable. There’s better analysis. And it’s not so sensational.”
“Internews has done a phenomenal job of introducing a different way of doing journalism. There is no other organization that has been so consistent in health training. Most others have not systematized the training in terms of the mainstream and alternative media (in urban and rural settings); most others’ training has been ad hoc.”

DR. KIMANI NJOGU, AFRICA HEALTH AND DEVELOPMENT INTERNATIONAL
Internews brings reporters out to the field to do extensive research during trainings, to see first hand the stories they are writing about. Here, a local civil society organization called Reachout brings journalists along on their daily outreach work with people who inject drugs in Mombasa.

JAVIER MEREDO
Radio is a primary source of health information, and the most trusted. The data from the community surveys done in Korogocho, Kisumu and Kwale point to the pivotal role the media, and especially radio, plays in how people access information about health.

Across all three geographic areas, radio is by far the most common source of general information, with 74% of people reporting using it every day. We cross tabulated this with the source most commonly used to access health information, and found that 66% of all respondents in the three areas used radio as their primary source of health information — at best every day, or once a week.

We also asked people to rate the trustworthiness of the sources of information they used. In terms of the media, 73% indicated that they thought radio the most trustworthy source of health information; 54% indicated TV; and 39% print.

The government scored 49% - less than radio and TV, although churches and mosques registered 69%. Radio as a trusted source of information still came out ahead with a leading margin.

Of importance for this assessment were questions related to future behavior for health information needs. The following data indicated a high level of trust in radio as a primary source of health information: 95% of the respondents said that after visiting a doctor or community health center that they were likely to listen to a radio station for health information, compared to 83% who said that they would watch a health-related TV program, and 72% who said they would read a newspaper.

More than half of those surveyed (59%) said that they would contact a radio station for more information, whereas 41% would search the internet.

The overall scope and quality of media coverage of health still lags. However positive the feedback was in terms of health news from both the community surveys and the focus group discussions, it also became clear very quickly that most people felt that in general, there was not enough information on health available to them. Ironically, this was also backed by the journalists and key stakeholders, both of whom act as drivers of health information and news.

When asked in the survey to rate the Kenyan media from 1 to 10 on their coverage of a variety of news topics, NGO partners and government health agencies gave the highest scores for the coverage of entertainment, followed by sports, and then news. Health coverage only garnered an average score of 4.76 out of 10.

When asked directly about health coverage, 66% of partners surveyed said health coverage was average, while 23% said it was good. When asked to “grade” the Kenyan media in terms of their coverage of health-related issues, the average score was 5 out of 10.
slightly higher grade was accorded HIV reporting, at 6.5 out of 10.

The findings from our surveys and focus group discussions therefore clearly showed that although communities rank health news as very important across the board, many respondents felt that news stories on health were often too short and not given enough time. Even as health news still struggles for its place in the daily news agenda, community members and the consumers of news feel that much more can be done to highlight it. Their comments included:

- “We need longer documentaries with more in-depth stories.”
- “Journalists need to go for testimonies, because they create impact.”
- “The documentaries need to be longer, and with more detail, so as to reach more people with true testimonies that touch on their lives.”
- “People telling about real stories have more impact, especially accompanied with pictures.”

Another person felt that beyond the news bulletins, health news should be given prominence in other time slots: “[Health news] is not adequate. They often bring them short, and sometimes late in the night. They should bring it like fillers when watching a movie.”

The community survey also asked if people had any, some, or enough health information. While in terms of malaria and HIV, those who had enough information outstripped those who did not have any information, non-communicable diseases such as diabetes, cancer, heart disease and asthma showed the opposite to be true. Again, these findings correlate with the responses of participants to the eight focus groups discussions. As one person noted, “On health issues, I feel the HIV awareness has been overdone, and society has accessed information and behavior change practices. There is now a need to focus on other aspects of health, like healthy eating.” Again, these findings correlated with the answers from journalists, who were asked in the survey which health topics they felt needed more focus. Their responses: Cancer (27%); HIV (15%); and access to health care (12%).

From analyzing the interviews and survey results, it would seem that there is a common perception that people want health news, and want more of it. 97% of all the partners and key stakeholders surveyed said that working with the media was helpful to their work, with 77% saying that Internews “helped build relationships with journalists,” and 88% agreeing or strongly agreeing that since working with Internews their relationship overall with the media had improved. In addition, 85% of partners surveyed recording that their press releases and events were now being covered by the media, with 90.2% indicating that they had someone in their organization interacting directly with journalists who cover the issues they work on. Yet 45% said that coverage of their issues by the media could still improve, and 66% of those surveyed said that health coverage was average, compared to 23% who felt it was good.

NASCOP’s Dr. Sitienei links it to Kenyan society, noting that “one of the biggest challenges still [for Kenya] is health seeking behaviour. ‘[..] people need to understand how important this is, and in terms of messaging in the media, yet an area that I would love to see pick up.’
9. A NEWSROOM “HEALTH NEWS” DISCONNECT

Analyzing both our quantitative and qualitative data indicated a clear consensus: people rate health news as very high and important.

The responses as quoted extensively throughout this assessment, as well as the quantitative data from the surveys indicate that Internews’ approach to working with the media is reaping many benefits for its partners, as well as the media. Yet consistently, when asked to rate health news coverage in Kenya, whether during the surveys or in one-on-one interviews, it got a very average grade. One senior news editor even scored it below average. This begs the question where the
disconnect lies, especially when everyone, including the communities we surveyed and gathered for focus group discussion, agree that health as an issue is very important, as is the news that makes it accessible to everyone.

Ntenga Arori, head of programs for the Kenya Broadcasting Corporation (KBC), puts it best when he notes that a serious need still exists for newsrooms to cover health issues. “I don’t know what it is about us, why we think that health issues can always come later. We need to find out why, because we need health news.”

Given this, it is little wonder that both journalists and partners experience some level of frustration as they still struggle against a newsroom culture that somehow still does not accord health news the importance it demands.
Shitemi Khamadi photographs a sign for the Dandora Health Clinic taken during an Internews photography journalism field trip. Part of the trip involved interviewing people who live on the Dandora dumpsite outside Nairobi.

KATE HOLT
CONCLUSION AND RECOMMENDATIONS

THE APPROACH of the assessment focused on gaining a deeper understanding of the impact and trajectory of the media’s contribution to addressing HIV and AIDS, as well as other health-related areas, and whether Internews’ work had any measurable impact. We did not set out to prove a hypothesis. Rather, we wanted to gain insight into Internews’ impact as a preventive tool in public health from a community, media and stakeholder perspective. Grounded in the premise that information changes lives, and can even save lives, we also wanted to see whether the outcome of the impact is iteratively sustainable. We understood that our qualitative findings would be interpretive, given the anecdotal nature of the responses. However, when analyzing and interpreting the data, we found many instances in which the two data sets (qualitative and quantitative) supported each other.
Consistently, across gender, age, and geographic location, communities placed a high premium on health news. The same held true for Internews’ partners, government agencies, and the journalists we interviewed. From a health seeking behavioral perspective, one factor was identified as a major stumbling block: a systemic societal lack of awareness of health matters beyond HIV.

However, from a media-related perspective, journalists and partners indicated that Internews is the one organization that can and does address awareness of health through its work with the media and its partners and other key stakeholders. NTV’s Linus Kaikai summed it up: “Internews is very important. It was first in the newsrooms.” And African Health and Development International’s Dr. Kimani Njogu said: “Internews has done a phenomenal job. I give them a straight A.”

Many remarked that as an organization, Internews had also brought great value to the media profession, in part through its collegial and participatory approaches; its in-depth, long-term training methodology; and for identifying a critical gap in news coverage in Kenya, vis-à-vis HIV and health journalism. In addition, the majority of journalists, NGO and key stakeholder staff that we interviewed independently acknowledged and were appreciative of the Internews’ method of training, which according to them is extremely effective, and has done much to close the gap.

OBSTACLES

Four main barriers were identified during our assessment as standing in the way of a more integrated approach to making health news part of the daily news agenda.

1. Health news remains the poor relative of other news, such as politics, finance and business, sport and entertainment.

2. A common thought is that unless the story deals with a sensational event, such as corruption or a catastrophe, it’s often quickly set aside to make way for other news.

3. Health news is often covered by generalists rather than specialist reporters/journalists.

4. Newsrooms lack a variety of resources, which can translate into a perception of a lack of interest in supporting journalists to specialize in health reporting.
We identified five recommendations related to Internews’ interventions based on the challenges highlighted by the media, Internews’ partners and key stakeholders, as well as members of the community.

1. Increase its training footprint in the media’s newsrooms for more focused and direct in-house training, i.e. Internews needs to continue and increase their “in the newsrooms” approach, working one-on-one in the journalists’ environment.

2. Work more closely with academic and educational institutions in the field of journalism to support and develop specific health journalism curricula.

3. Move beyond the more traditional health journalism training, to train journalists to focus analytically and critically on health policy, and data journalism.

4. Involve the senior level structures of the media houses even more strategically, so as to ensure even greater participatory buy-in.

5. Help the media develop and leverage in a more proactive way existing mobile technologies as an interactive vehicle for health news. As one person noted: “There is a need for health news directly on our phone as a way to reach people.”

Although not a recommendation, but more of an expressed desire from the media, the NGOs and government health agencies, was that Internews needed to continue its training for both journalists and health-focused NGOs, that there was scope for a broader thematic approach to health training with a focus on health-related policies.

The hope is that every newsroom commits to one health story a day, ensuring more enlightened and informed media coverage of HIV and other health areas that Kenyans grapple with daily. In so doing, this will be a step towards closing the gap that currently exists between the consumers of news and those who provide it. Like an apple a day, one such story, everyday, has the potential to not only increase awareness of critical health issues such as HIV and others, but also position the media to play a critical preventive role in public health, keep ignorance at bay, and ultimately ensure that health news finds its rightful place on the news agenda. A story a day ...

“Health stories are rarely covered in-depth from a socio-economic perspective – a gap from a health reporting point of view.”

REGINA OMBAM, NACC.