



# Media Epidemiology, Infodemic Management, and Social and Behavior Change (EIS) Fellowship Program

A Media Health Preparedness Training for Current and Future Outbreak





# Overview

The COVID-19 pandemic underscored the vital role of journalists, media producers, and social media influencers in communicating health information effectively. However, many lack the necessary skills to interpret scientific data, leading to misinformation. To address this gap, the Nigeria Centre for Disease Control and Prevention (NCDC), the African Field Epidemiology Network (AFENET), and USAID-funded Breakthrough ACTION-Nigeria (BA-Nigeria) partnered to create a competency-based training program to improve the understanding and enhance the skills of media professionals on

Basic Epidemiology, Infodemic Management, and Social and Behavior Change (EIS). The nine-month fellowship, referred to as the **Media-EIS program**, equips media professionals with the tools to accurately translate scientific information, counter misinformation during disease outbreaks, and use effective communication skills in addressing health emergencies and crises. It aims to engage, involve, and empower media professionals to prepare for current and future outbreak coverage and reportage.



Globally, disease outbreak response depends on scientific guidance by responsible authorities and commensurate compliance by affected populations. Scientific guidance has to be timely, precise and efficacious for affected populations to comply with. This is not always the case. Scientific information tends to be too complicated for affected populations to comprehend, thereby creating an information void.

Also, recommendations of safety practices that often require behavior adjustments or change are often perceived by affected populations as intrusive, obstructive and disruptive to their everyday lives and culture. This environment becomes very healthy for perpetrators of misinformation.

The purpose of public health communication is to empower people with the right information so that they can make informed decisions for themselves. Most people get their information from either





traditional or social media and, unfortunately, the media whose responsibility is to set the agenda for public discourse are often not able to inform and educate the population, due to a lack of comprehension of scientific information, inability to distinguish between correct and false information and complexity of preventive behaviors. This complicates and prolongs outbreak response.

**The Media-EIS is a response to this situation. It is an institutionalized intervention that will develop a network of media practitioners who will understand the basic science of outbreak response, drive behavior change and be a critical guardrail against infodemics.**





# Training Motto

Connecting people  
and science for  
improved health  
outcomes

# Goal



Our goal is to strengthen media professionals' capacity for quality news reporting and content production related to disease prevention, preparedness, detection and outbreak response considering a One Health approach. It also promotes positive behavior and increases accurate information on disease prevention and mitigation. By integrating trained media professionals into public health outbreak response efforts, we aim to enhance Nigeria's overall prevention, preparedness and response capabilities by connecting science and people for improved health outcomes.



# Objectives

Leverage the role of media as sources and channels of communication to improve the public's understanding of diseases and promote preventive behavior.

2

Enhance media professionals' understanding of basic epidemiology, infodemic management and and social and behavior change for disease outbreaks and health emergencies.

1

3

Enhance Nigeria's overall capacity to prevent, detect, and respond to outbreaks in line with the International Health Regulations (IHR) recommended benchmark actions for risk communication and community engagement.

Foster trust among the government, media, and the general population.

4

# Development Methodology

Our approach to designing the fellowship program was systematic and intentional, guided by **a series of strategic steps:**



## **DESK REVIEW:**

We reviewed existing literature to identify pertinent training needs and priorities. This literature review informed the development of a draft version of the needs assessment tool.



## **BRAINSTORMING AND STAKEHOLDER ENGAGEMENT:**

We engaged One Health stakeholders, media practitioners and health and communication experts in further refining the tool. The engagement process ensured stakeholders' buy-in to the process.



## **PRE-TEST:**

The tool was pre-tested among media professionals across radio, TV, print and online – five participants from the initial brainstorming session and five participants who had not interacted with the tool. This process was important to assess the tool's relevance, usability and accuracy. The feedback from this process further enhanced the validity of the tool.





### **ONLINE NEEDS ASSESSMENT:**

The needs assessment was widely disseminated through regional webinars and social media groups. Analysis of the assessment largely informed the training curriculum of the Media-EIS fellowship program.



### **SELECTION PROCESS:**

We established a transparent selection process, sharing the selection criteria as part of the call for applications for the program. A three-level screening process conducted by a joint committee reviewed applications. The final screening was conducted by representatives from academia, broadcast organizations and public health institutions. In addition to ensuring gender balance, factors like professional background, organizational support, and geographic representation were considered to ensure comprehensive coverage across Nigeria.



### **CURRICULUM DEVELOPMENT:**

Experts from academia, media organizations and public health (One Health) were involved in the development of a competency-based curriculum to ensure relevance and applicability. In addition, we have continued to iteratively improve the curriculum in direct response to the fellows-in-training feedback during the in-person training sessions.

**Throughout each phase, we prioritized collaboration, transparency, and responsiveness to ensure the training program effectively meets the evolving needs of journalists and media organizations in Nigeria.**

# Key findings from the needs assessment

204 media professionals responded to the online needs assessment. Slightly more female media professionals responded to the needs assessment.

Distribution of Journalist that filled needs assessment



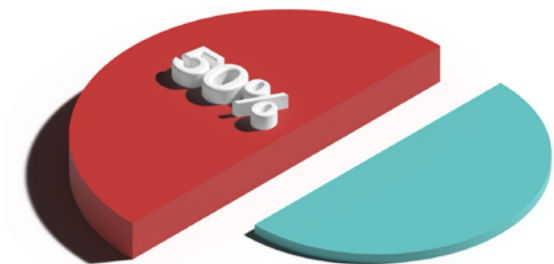
The media professionals represented a variety of media houses - with most representing radio.

# 80%

The percentage of journalists that have the capacity to use their platforms to influence people's health behaviour (positively or negatively).



The percentage of journalists that noted they have limited capacity in understanding epidemiology and infodemic management.





# Meet the Fellows- in-training

In response to the call for applications, **555 applications were received**. The applications went through a three-level screening process, resulting in 45 applicants being invited for panel interviews. 30 applicants were ultimately selected to participate in the program.





WE ARE PROUD TO ANNOUNCE THE FIRST  
**MEDIA-EIS FELLOWS**

The Media Epidemiology, Infodemiology and Social Behaviour Change (Media-EIS) Fellowship program is open to media practitioners in Nigeria reporting on health (human, animal, and environmental) matters across print, television, radio, and online platforms.



**30** Fellows  
Stories



The selected applicants represent diverse perspectives - gender, geographical, and media type.

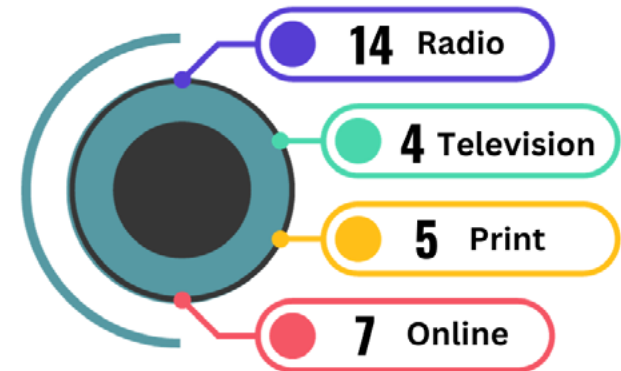
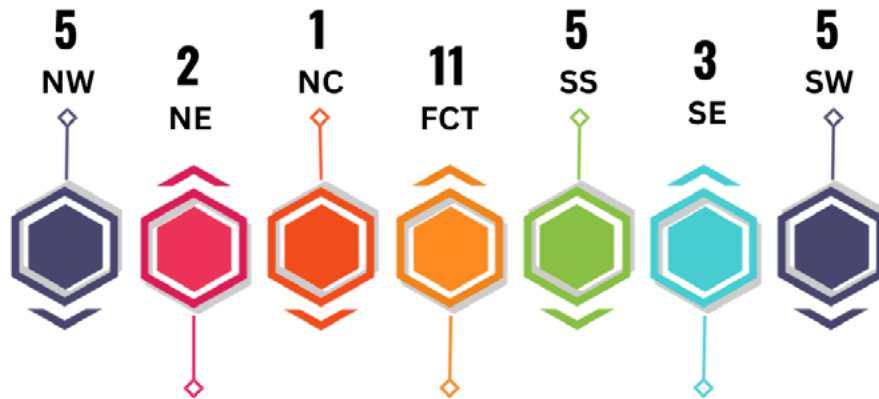
**Female**



**Male**



**Male**





# Collaborative Learning Approach

The Media-EIS program follows a collaborative learning approach, recognizing that fellows-in-training need the opportunity to put into practice what they learn.





As a result, it combines in-person and virtual training, including field visits and assignments.

In addition, a group mentoring program has also been established to promote personal and professional growth, allowing individuals to learn from each other's experiences, perspectives, and insights.

The **mentor's role** is to create an environment where the fellows-in-training can discover their own solutions through reflection, discussion, and collaboration.





# Structure of training content

- TRACK 1 - Epidemiology (October - December 2023)

- TRACK 2 - Social and Behavior Change (January - March 2024)

- TRACK 3 - Infodemic Management (April - June 2024)



What this looks like in practice is outlined below:

- **Month 1** - Faculty meeting and virtual session
- **Month 2** - In-person session and virtual session
- **Month 3** - Individual and/or group assignment, group mentoring and virtual session





- Field visits, mentoring, outbreak response, etc. are ongoing and happen throughout the engagement period. In addition, each fellow-in-training was assigned a health area group to enable them to dive deeper into a particular health area and apply their learnings to assignments related to the health area. The health areas include:

- 1. Vaccine-preventable diseases**
- 2. Zoonotic diseases**
- 3. Antimicrobial Resistance (AMR)**
- 4. Climate and Environmental Health**
- 5. Non-communicable Diseases**
- 6. Communicable Diseases**

RESOURCEFULNESS  
SKILL AND COMPETENCE  
COMMITMENT & DEDICATION  
INTEGRITY  
RESILIENCE



**Topics covered  
in each track**





## TRACK 1: EPIDEMIOLOGY

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6
<ul style="list-style-type: none"> <li>• Introduction to Public Health</li> <li>• Introduction to Epidemiology</li> <li>• Key Terms &amp; Concepts in Epidemiology</li> <li>• Natural History of Disease</li> </ul>	<ul style="list-style-type: none"> <li>• Principles of infectious disease prevention and control</li> <li>• Measures of disease frequency</li> <li>• Public health surveillance</li> </ul>	<ul style="list-style-type: none"> <li>• Outbreak Epidemiology</li> <li>• Overview of Incident Management System</li> <li>• Health Data - analysis, interpretation and display</li> </ul>	<ul style="list-style-type: none"> <li>• The One Health Concept</li> <li>• Emerging Diseases and Zoonoses</li> <li>• Surveillance</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccine Preventable Diseases &amp; Immunization</li> </ul>	<ul style="list-style-type: none"> <li>• National Rapid Response Team (NRRT)</li> <li>• Non Communicable Diseases</li> </ul>

## TRACK 2: SOCIAL AND BEHAVIOR CHANGE/RISK COMMUNICATION

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6
<ul style="list-style-type: none"> <li>• Role of the media as gatekeepers and agenda setters</li> <li>• Building and nurturing trust</li> </ul>	<ul style="list-style-type: none"> <li>• Audience segmentation</li> <li>• Overview of SBC</li> <li>• Risk Communication</li> <li>• Psychology of crisis (Understanding perception)</li> </ul>	<ul style="list-style-type: none"> <li>• Community engagement</li> <li>• Gender considerations for SBC during emergencies</li> <li>• Ethical interviewing</li> </ul>	<ul style="list-style-type: none"> <li>• Storytelling for change</li> <li>• Content distribution &amp; amplification for disease prevention &amp; response during outbreak</li> <li>• Media relations with NCDC</li> <li>• Code of Ethics for Nigerian journalists</li> </ul>	<ul style="list-style-type: none"> <li>• Active listening</li> <li>• Field visits</li> <li>• NCDC Media Engagement Strategy</li> </ul>	<ul style="list-style-type: none"> <li>• Communication channels</li> <li>• Panel discussion: Roles in public health emergencies</li> <li>• Infection prevention and control</li> </ul>



## TRACK 3: INFODEMIC MANAGEMENT

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6
<b>Introduction to Infodemics</b>	<ul style="list-style-type: none"><li>• <b>Infodemic Dynamics and Crisis Management</b></li><li>• <b>Understanding your audience and infodemics</b></li></ul>	<b>Infodemic Management</b>	<b>The role of media in infodemic management</b>	<b>Building resilience against misinformation</b>	<b>Development of a unified campaign</b>

# What fellows-in-training say about the training program

“The subject topics are so relevant to my work and it has kept me hungry for more. Excellent facilitation.”

– **Smith Nwokocha**

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“I enjoyed all the lectures so far. In particular the lecture on SBC, risk communication and Ethics. Introducing the playing of videos related to the subject matter under discussion have also been quite helpful in aiding the learning process.”

– **Blessing Enebeli**

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“I’m impressed with the enhancement in the tutorial materials and the segmentation/alignment of the modules. The modules are aligned in such a way that enables fellows-in-training to better flow with the topics.”

– **Raphael Obasiohia**

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“What impressed me the most is the level of engagement of facilitators with fellows-in-training, creating a platform for interaction before, during, and after their sessions.”

– **David Arome**

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“During our virtual engagement, we gained further insights and information that expanded upon what we had already learned in class. The interactive session allowed us to ask specific questions, discuss scenarios, and explore real-world applications of the concepts we had studied. This hands-on interaction with a real expert in the field not only deepened our understanding of the subject matter but also provided us with practical examples and case studies to strengthen our knowledge and reinforce our learning.”

– **Hadiza Bawas**

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“The interaction with the subject matter expert has greatly facilitated the application of knowledge gained from class teachings. By engaging in a direct conversation with the expert, I was able to deepen my understanding of the subject matter, clarify any doubts or misconceptions, and gain practical insights and real-world examples. This interaction has bridged the gap between theoretical knowledge and its practical application, allowing me to effectively incorporate the expert’s knowledge and perspectives into my work. Overall, the interaction has enhanced my ability to apply and contextualize the classroom teachings in a meaningful way.”

– **Chukwuemeka Agulonye**

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# ...and the value of the training program's field visits

"The field visit gave a more creative insight into how I can effectively communicate with my target audience."

– Adenike Adebawale

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"Interacting with someone living with the condition made me see some other perspective I had not seen before and that has helped me to refine our communication material."

– Precious Ogaga

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"It [The field visit] was enlightening; it allowed for real-time understanding of my audience, key messages and importantly how best to communicate to them that will draw in the behavior objective that I am aiming to achieve."

– Vanessa Richard

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"It [Interactions with the subject matter experts] has dynamically broadened my understanding of the topic. I can say for sure, I'm a better professional and will keep putting to use the knowledge gained. Thank you so much, Media EIS Fellowship Team, for these exceptional facilitators."

– Smith Nwokocha

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# Media-EIS fellowship Program: The future we see



**Improved Health Communication:** A pool of Media-EIS fellows who will effectively communicate public health information to the general population, including preventive measures, disease symptoms, treatment options, and vaccination campaigns. This will contribute to increased awareness and understanding of health issues among the public, thereby facilitating informed decision-making and behavior change.



**Timely and Accurate Information Dissemination:** Upon graduation, the Media-EIS fellows will be equipped to disseminate timely and accurate information during public health emergencies, such as disease outbreaks or natural disasters. Their ability to translate complex scientific information into accessible language will enhance the opportunities for the public to receive reliable updates and guidance from trusted sources, and ultimately reducing confusion and panic.





**Enhanced Trust and Credibility:** By promoting transparency, accountability, and credibility in health communication, the program will help to build trust among the government, media, and the general population. This will foster a supportive environment for public health initiatives and encourage greater compliance with recommended interventions, such as vaccination or quarantine measures.



**Effective Infodemic Management:** The Media-EIS fellows will become proficient in identifying and countering misinformation and rumors circulating in the media and on social networks. By debunking myths and providing evidence-based information, they will help to mitigate the spread of false information, prevent panic, and minimize the negative impact of infodemics on public health efforts.



**Behavior Change Promotion:** Media-EIS fellows will play a vital role in promoting positive behavior change among the public, encouraging adherence to healthy practices and preventive behaviors. Through targeted messaging and outreach activities, they can address cultural norms, social barriers, and misconceptions that may hinder behavior change, leading to improved health outcomes at the community level.



**Enhanced Community Engagement:** The Media-EIS fellows will engage with communities to raise awareness, address concerns, and mobilize support for public health initiatives. Their involvement will facilitate community participation in disease prevention and control efforts, fostering a sense of ownership and responsibility for health promotion activities as well as building community resilience against the impacts of infodemics and health threats.



**Sustainable Network of Media Professionals Proficient in Public Health Communication:** The Media-EIS program will contribute to building the capacity of media professionals as health communicators. In addition, it will create a sustainable network of skilled individuals who can continue to support public health initiatives in the long term. By investing in training and mentorship, the program ensures the continuous development of human resources critical for effective health communication and outbreak response.



**Enhanced feedback to government and health professionals:** The Media-EIS fellows will also leverage their knowledge, skills and platforms to provide feedback to health authorities on perceptions and events in the community that will improve informed decision making and strategy development.

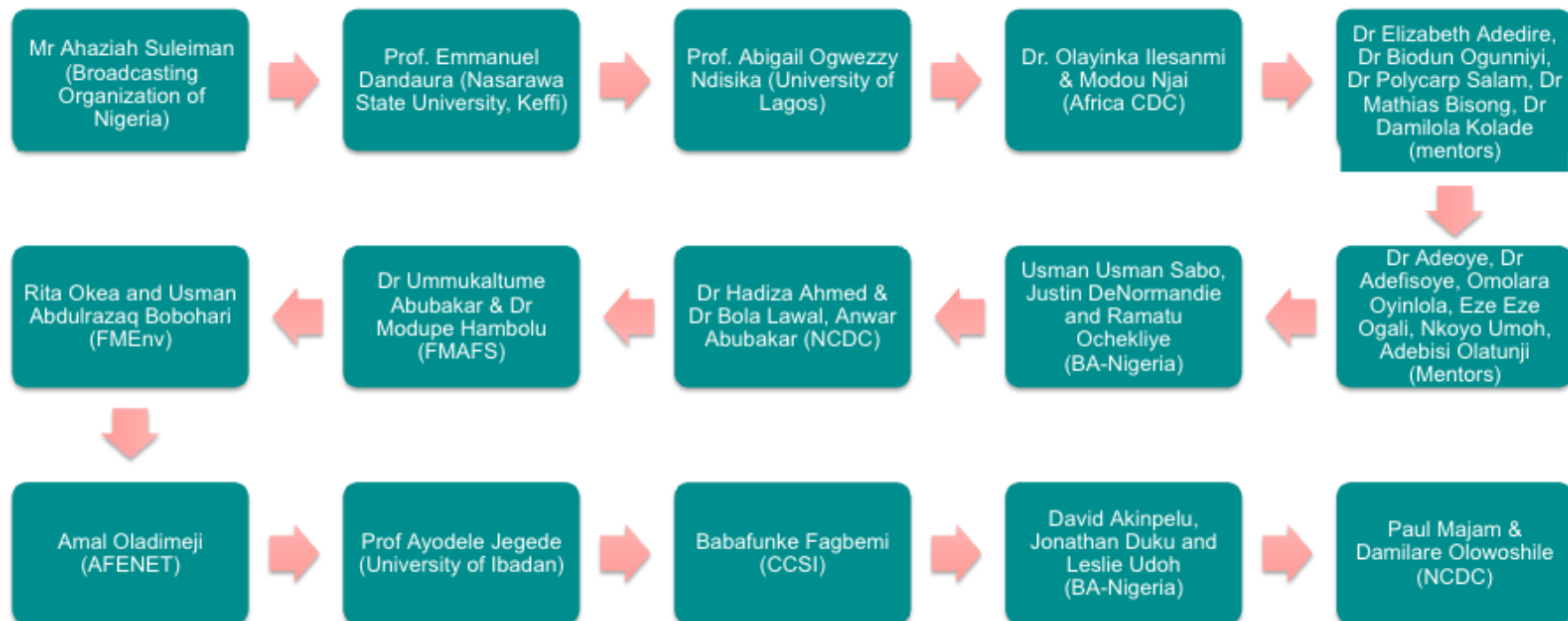
Overall, the Media-EIS program strengthens public health initiatives by improving communication, fostering trust, countering misinformation, promoting positive behavior change, engaging communities, and building sustainable capacity in health communication.

These benefits contribute to more effective and coordinated public health prevention, preparedness and responses, ultimately leading to improved health outcomes for the population.





# Who are the fellowship faculty members?



The faculty is supported by the Media-EIS technical advisors.

# Fellowship Technical Advisors



**Dr. Olayinka Umar-Farouk**  
Resident Advisor



**Dr. Oyeladun Okunronmade**



**Dr. Patrick Nguku**



**Dr. Yahya Disu**



**Dr. Muhammad Shakir Balogun**



**Mrs. Lisa Mwaikambo**



**Mr. Oliver Iorkase**

For more information about the Media-EIS fellowship training program, email [mediaeisfellowship@gmail.com](mailto:mediaeisfellowship@gmail.com)







