

Zero Leprosy Best Practices

Best Practice: *Media Campaigns for Leprosy Awareness*

Subthemes

- Early detection and prompt treatment
- Reduction of stigma, discrimination, and exclusion

Target Audience(s)

- Trainers
- Health staff
- Persons affected by leprosy
- Other partners such as NTD NGOs

Contributors

Contributing organizations: MORHAN (Movement for the Reintegration of People Affected by Leprosy); Ministry of Health, Brazil; and DAHW-Brasil (German Leprosy and Tuberculosis Relief)

Key Messages

Media campaigns of different types can and have been useful in sharing information about leprosy symptoms, treatment, and cure. Television, film, media, billboards, posters, etc., have great potential in terms of reducing stigma among the general public and encouraging people to seek early treatment. Because these types of media approaches can also perpetuate stigma or create misunderstanding, messages should be carefully crafted and tested before being widely used.

Key Informant / Date Submitted

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Description of the Best Practice

Introduction

Public health marketing has been used to great effect in many countries. Here, I describe several media campaigns for leprosy awareness that have been used by NGOs and the Ministry of Health in Brazil. I will include examples of a few media campaigns in Brazil over the past 20 years.

Objectives and Methodology

In the mid-1990s in Brazil, representatives of the NGO MORHAN noted that some of the posters that were being used for leprosy education, particularly those with photos of people's faces "before MDT" and "after MDT," generated fear and sometimes resulted in people avoiding seeking a diagnosis for leprosy. Campaigns developed in the late 1990s and into the 21st century have focused on more positive

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messages, early symptoms, and curability with early detection. Objectives include both stigma reduction for people affected by the disease, which would also encourage them to seek treatment, and stigma reduction in the general public.

Implementation of Practice

Since the late 1990s, Brazil's Ministry of Health, sometimes in conjunction with NGOs like MORHAN, has sponsored the production of posters on leprosy that depict people who do not have visible sequelae of the disease and are smiling. The message in one series of posters was, "Você diria que eu tive hanseníase?" (*Would you believe I had leprosy?*), as an indication that with leprosy your life does not have to change (1, 2). These posters were distributed to health posts and on messages in public transportation.

During the past two decades, MORHAN has also recruited a number of celebrities to be spokespersons for leprosy education. Actress Solange Couto, one spokesperson who felt a connection with people affected by the disease through her own experiences taking prednisone, was able to get writers on the popular telenovela *The Clone* to discuss leprosy on an episode of the show. Several other well-known performers have become affiliated with MORHAN as well (2).

The Ministry of Health in Brazil has also produced booklets and videos that focus on early detection and on noticing symptoms. As examples, in one video a man injures himself working on a car but the injury doesn't hurt and in one booklet a child notices a woman has burned herself while cooking but doesn't feel pain from the burn. Recent material that has been developed promotes inclusion as well, showing people taking MDT and hugging family members (3).

DAHW-Brasil currently maintains a strong presence on social media, with Facebook, Instagram, and Youtube accounts as well as invited blog entries from people affected by leprosy, healthcare professionals, and researchers (4).

Results—Outputs and Outcomes

It is difficult to assess the effectiveness of media campaigns with the general public, but some studies have looked at how specific materials related to leprosy education are received and understood by different groups, such as schoolchildren (5) and health professionals (6).

Lessons Learned

Media campaigns that were known to be unsuccessful or problematic in Brazil, such as those that show photos of people with advanced multibacillary leprosy before treatment, have been abandoned in favor of campaigns with more positive images or images of early symptoms, such as a depigmented spot on the skin. This is significant for many organizations that continue to use photos of people with severe disabilities such as photos of hands or feet with severe nerve damage or bone resorption. These images, though they may represent one reality for some people affected by leprosy, tend to generate fear and can prevent people from seeking treatment.

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Replicability and Scalability

Media campaigns are a highly replicable practice, but certain types may depend on partnerships among NGOs, government, and media outlets. Social media campaigns may be the most effective and least resource-dependent public health activities today and in the future. Brazil represents one of the largest internet markets in the world, and even in many low-income communities and rural areas people have access to social media sites like WhatsApp, Facebook, Twitter, and Instagram. In Brazil, the television network Globo reaches nearly the entire population of the country. Other countries might take advantage of similar engagement with social media as well as influential film industries (e.g., Nollywood/Nigeria, Bollywood/India)

Conclusions

Media campaigns have great potential for stigma reduction if they are designed with the target population(s) in mind. Focus groups can be a useful tool to assess how different images or messages will be understood or perceived. Recruiting national celebrities can also have an impact in terms of raising awareness and decreasing leprosy stigma.

Further Readings

1. Kelly-Santos A, Monteiro S, Rozemberg B. Significados e usos de materiais educativos sobre hanseníase segundo profissionais de saúde pública do Município do Rio de Janeiro, Brasil. *Cadernos de Saúde Pública* 2009;25:857-867.
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6. Santos AK, Goulart Ribeiro AP, Souza Monteiro S. Comunicação na hanseníase: a recepção de materiais educativos por profissionais e usuários do Sistema Único de Saúde, no município do Rio de Janeiro, Brasil. 2012. Available at <https://www.arca.fiocruz.br/handle/icict/17297>