What Role can the Media Play to decrease stigma during the COVID-19 Outbreak in Lebanon?

Tip sheet for Media Professionals

In response to COVID-19, the media, be it televised, print, or social media, have an instrumental role to play. From increasing awareness, to decreasing anxiety and stigma as well as helping people cope with the circumstances and ultimately respond to the outbreak
To remain a trusted source, media stakeholders are also encouraged to do their best to keep up to date with the outbreak using reliable information from the Ministry of Public Health and the World Health Organization, and to be as diligent as ever in their fact-checking. Adequate coverage of COVID-19 can:

- Promote physical and mental health and encourage people to seek needed services
- Build solidarity by covering proactive initiatives and stories

What can YOU do?

1	2	3	4
Use non-Stigmatizing Language	**Adopt Positive Messaging**	**Increase Public Engagement**	**Spread the Facts**

1. Use non-Stigmatizing Language

Stigma can drive individuals to hide illnesses to avoid discrimination, guilt and blame, stigma can prevent them from seeking healthcare, and can discourage people from adopting helpful behavior, all of which can contribute to the spread of COVID-19.

DO ✔	DON'T ✘
Use the official name of the virus (COVID-19 or corona virus)	Don't attach a location/area, religion, gender, age, profession ethnicity, race, etc. to the disease.
Speak accurately about COVID-19 risks, based on latest official health advice (MOPH, WHO)	Don't use shaming or stigmatizing language about those who violate physical distancing measures or attribute it to demographic characteristics.
Use the below terminologies when talking about people and COVID-19: People who… - May have acquired - Have acquired - Are being treated for - are recovering from - died after contracting - might be at risk for transmission of COVID-19	Don't refer to people with COVID-19 as: Cases, infected, diseased, victims, suspects, infecting others, virus spreaders, contagious, infectious. Don't use criminalizing or dehumanizing terminology, or language that places guilt or shame on the person who has COVID-19 (such as "spreading the virus").
Respect privacy and confidentiality.	Don't try to find or mention identifying information of people who have COVID-19 (name, location of "infection", personal information, etc.)
Be kind and considerate of people's feelings.	Don't use sensationalist, dramatic or derogatory language at the expense of a person's dignity.

2. Adopt Positive Messaging

Positive messaging cultivates a sense of control, increases motivation, builds social solidarity, and communicates hope for people to continue fighting with us.

DO ✔	DON'T ✗
Share stories of recovery and mention the total number of recoveries with reference to MOPH and WHO updates. Host people who have recovered to share encouraging messages.	Don't report only on the number of new cases, active cases and deaths.
Emphasize prevention, cautiousness and recovery (such as "For most people, this is a disease they can overcome").	Don't disseminate insufficient knowledge about how COVID-19 can be prevented, acquired or treated.
Highlight a communal responsibility and solidarity in protecting one other.	Don't use a fear-based approach or speculate worst-case scenarios.
• Integrate mental health awareness messages (ex: how to cope with stress during this period) in reporting about COVID-19 • Use information from reliable sources (ex: MOPH-National Mental Health Programme or WHO). See the MoPH and WHO Practical Guide for Media Professionals* on the coverage of mental health. *Refer to refrences	Don't portray only some ethnic groups or use typeface, symbols and formats that suggest a particular group.
Communicate encouragement for all those who are on the frontlines and publicly thank them (like health and social care workers directly or indirectly involved, first responders, and frontline workers).	Don't repeat or share unconfirmed rumors (i.e. a dramatic increase in number of cases that hasn't been confirmed by MOPH) or use exaggerations to generate fear i.e. "plague", "apocalypse"

3. Increase Public Engagement

Focusing on engagement allows more people to have access to helpful content, reduces the impact of a health emergency, contributes to preventing the overburdening of health services, and saves more lives!

DO ✓
Invite culturally appropriate social influencers, celebrities and religious leaders to speak about supporting others to reduce stigma.
Ensure key information is presented in an engaging format accessible to all, including those living with disability (auditory, visual, etc.).
Encourage people to stay connected with each other through social media and check in regularly on each other.
Avoid disseminating information difficult to understand by the general public.

4. Spread the Facts

Misinformation can promote myths, increase fear and panic, lead to ineffective and often harmful health and social practices, and add burdens with unnecessary economic costs.

DO ✓	DON'T ✗
Continue to encourage good hygiene practices in-line with most recent WHO guidelines.	Don't interpret health information and data without taking the opinion of health professionals.
Clarify and counter myths and misconceptions. Refer to the rumor log that was developed by UNICEF, WHO and UNDP on the Ministry of Information site (https://corona.ministryinfo.gov.lb/info/corona-fact-check) and to WHO Myth Busters. (https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters)	Don't neglect to correct a misinformation aired through media platforms.

DO ✔	DON'T ✗
Signpost and link people to nationally supported sources of accurate information (WHO Lebanon, MoPH, UNICEF…)	———
Signpost hotlines of MoPH (1214), COVID-19 Call Center (01-594459), the National Emotional Support and Suicide Prevention Hotline (Embrace Lifeline-1564).	———

Useful references:

- MOPH COVID-19 repository of updates, awareness material, regulations…:

  https://moph.gov.lb/en/Pages/2019-فيروس-التاجي-المستجد/24870/2

- WHO official updates-COVID-19 page:

  https://www.who.int/emergencies/diseases/novel-coronavirus-2019?gclid=CjwKCAjw5cL2BR ASEiwAENqAPjwqY38W9V_Qn96gRyZVn6Yuy3VIjyixN4Xo6xwlM0zH7nslR5HRXxoCHTMQA vD_BwE

- Guide for media professionals on coverage of mental health and substance use:
  English:

  https://www.moph.gov.lb/userfiles/files/Practical%20Guide%20for%20Media%20 Professionals%20on%20the%20Coverage%20of%20Mental%20Health%20and%20 Substance%20Use.pdf

  Arabic:

  https://www.moph.gov.lb/userfiles/files/20%الدليل20%العملي20%للإعلاميّين20%حول20% التغطية20%الإعلاميّة20%لمواضيع20%الصحّة20%النفسيّة20%واستخدام20%المواد20% المسبّبة20%للإدمان.pdf

- Corona ministry information:
  https://corona.ministryinfo.gov.lb/info/corona-fact-check

- WHO Myth Busters:
  https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/ myth-busters