

# Health Communication and Disease in Africa

Bankole Falade · Mercy Murire  
Editors

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Beliefs, Traditions and Stigma

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*Editors*

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# Foreword

It is an honour to write the Foreword for this very timely and welcome volume that challenges us to develop new ways of ‘seeing and doing’ in the field of health communication in African settings. Much formal health communication in Africa has been imposed on vulnerable communities in a top-down way. Programmes are often implemented as part of internationally funded projects, filtered down through national and regional level policies and leadership by actors who are not always part of target communities. Outcomes have been mixed. There have been some inspiring success stories. There have also been disappointments with communication programmes not achieving their anticipated changes in health behaviours most likely to facilitate prevention, care or treatment of health problems.

This ambitious and important collection tackles the challenges facing health communicators head-on—highlighting how health information and communication strategies often fail to take adequate account of vital influences on health behaviours. These include the day to day material realities of survival in conditions of poverty and intersecting health-damaging inequalities linked to factors such as gender, ethnicity,

disability and age. They also include the varying health-enabling and health-limiting impacts of religious, traditional and cultural beliefs, and varying helpful social norms which crystallise into common sense knowledge and associated habits which may or may not align with the values and goals of the health communicators.

The wide-ranging chapters provide fascinating studies of how social contexts impact efforts to facilitate health-enabling behaviour change across a variety of mental, physical and social health challenges. They also begin to map out an ambitious road map that challenges health communicators to develop new approaches that promise a more effective bridging of the frequent gulf between the communication of western scientific approaches and the real-life experiences and indigenous knowledge systems of their target audiences.

The authors are well-qualified to lead this challenge. Both have extensive practical and academic experience in public health communication. Falade started his career in journalism in Nigeria, and Nhamo-Murire in community health in Zimbabwe. Both used these experiences as stepping stones to doctoral study and teaching in the field of Social Psychology at the London School of Economics (LSE). This is a world-leading centre of research in the editors' inter-locking fields of Social and Public Communication and of Health, Community and Development. Since then both have established themselves as highly respected players in their areas of expertise in South Africa.

They have used their extensive networks to assemble an impressive array of expert authors from various African countries, including Kenya, Malawi, Morocco, Nigeria, South Africa, Uganda and Zimbabwe. Chapters throw vital social psychological light on health communication challenges ranging from issues such as teenage pregnancy and HIV/AIDS to relatively new or neglected topics including COVID-19, mental health, obesity, Alzheimers' Disease and 'selfitis' (smartphone selfie addiction).

With a good balance of theory and case studies, accompanied by detailed reference lists that draw on a judicious mix of established and novel resources—this book will be of great value to health practitioners and policy-makers, researchers and students. Chapters showcase a range of theoretical approaches to health communication. These are skilfully linked by the editors' Introductory and Concluding chapters. Together

they provide the basis for a theoretical toolkit for the development of actionable understandings of the processes through which abstract scientific knowledge is communicated to real people in real contexts—and the social and psychological factors that mediate the success of a communication.

New sources of information, which may contradict highly valued cultural, religious or traditional beliefs will often meet with initial resistance. The book challenges us to think about the social and psychological processes through which previously taken-for-granted knowledge may become problematized as people grapple with new ideas and the associated new ways of being, seeing and acting that they imply. It also pushes us to think through the implications of these new insights for the practice of communication.

The volume does not shy away from complexity in recognising, for example, how religious beliefs may simultaneously obstruct or advance health. Neither do they avoid complexity in advocating a more complex balance of global and local approaches. Chapters provide numerous practical ways in which this balance might be reached. These include, to cite only a few examples, the significant benefits of increased interaction between health communicators and their audiences (as in the use of community radio), the importance of communicating in local languages in particular settings, the use of existing indigenous practices—such as initiation schools and local mentors—as vehicles to transmit health-related knowledge, as well as embedding health dialogue in existing social networks such as respected elders, market women, music festivals, story-telling circles and so on. Radio, TV and internet obviously have high appeal for urban audiences, but may have less traction in some rural settings where access to these is limited. Furthermore local sources of new information may be more willingly trusted in settings where people are suspicious of government programmes.

These are but a few concrete examples of communication strategies that acknowledge that whilst health professionals come with vital scientific knowledge, communities are also experts in their understandings of what behaviours are feasible in the contexts of their daily lives. They are vital partners in efforts to translate scientific knowledge into world-views and practices that make sense to the intended beneficiaries of health

communication efforts, and in formulating new health behaviours that are realistic in the context of their everyday lives.

This book presents a compelling vision of an approach that is deeply rooted in African scholarship. This is a vision that pays close attention to the big picture of macro-social context. It also takes full account of the daily lives and world-views of those whose lives are distant from the scholarly theories, global guidelines and national and regional strategies that dominate this field of practice. The editors and authors are to be warmly congratulated on a volume that promises to provide an impetus for the development of a much-needed indigenous African approach to health communication.

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