

## Civil Society of Partners' Training Programme at Bhopal

### Eli Lilly Intervention-4

**Bhopal (Madhya Pradesh) 9<sup>th</sup> – 10<sup>th</sup> July 2011**

IMCFJ Conducted the second Civil Society Partner's Training Programme of West Zone **"How to engage with Media"** at Bhopal (Madhya Pradesh) on **9<sup>th</sup> – 10<sup>th</sup> July 2011**.

In this training programme a total 19 CSO's participated. Resource person included Mr. Dhananjay Singh, IMCFJ Media Trainer, Mr. Manish Srivastava, Media Trainer IMCFJ, Mr. Jasvinder Sehgal, Media Trainer IMCFJ and Mr. Pawan Kumar, Media Coordinator IMCFJ.

Mr. Dhananjay & Mr. Manish also have a experience of BBC Training. Mr. Nagesh chaura (MPSSS), Miss Urmila Mohite (FMR) , Mr. C.A. Mathew (IDF), Mr. Rahul Mishra (GRAVIS), Miss. Malka Bano (ADF), Mr. Paul Alemao (LOK SEVA SANGAM ), Mr. Paras thapa (EHA ), Sanjeev Barik (EHA), Sandeep Mishra (VHAI ), Mr. Nilesh Dhoble (VHAI ), Mr. Ehtesham (VHAI ), Mr. Jubair (VHAI ), Mr. Sanjeev Mishra (VHAI ), Mr. Pradeep Sharma (VHAI ), P.C. Isaae (VHAI), Gaurav Jain (State IES Officer TB, D.H.S. Bhopal), Manpreet Kaur (THE UNION), Edwin Rodrigo (CETI).

Mr. Gaurav Jain (State TB Cell IEC Officer) & Mr. Umesh Elavadi (WHO-RNTCP State Consultant of MP) both of them said that this type of training session are very important for civil society partners. They appreciated the training session topic covered by IMCFJ Media trainers.

On the second day ,the training was joined by Dr.B.S. Ohri Joint Director, Tuberculosis Cell Madhya Pradesh State. Dr. Ohri met all the participants & questioned them about the training.

In presence of Dr. Ohri interview sessions were played by the participants. Dr. Ohari shared his view with the participants and also expressed his gratitude to the organizer for conducting such type of first training with CSO's partners of West Zone.

Mr. Jasvinder Sehgal began the training session by explaining the Topic “**Media in India**”. He told the participant **Media of India** consist of several different types of communications media: television, radio, cinema, newspapers, magazines, and Internet-based Web sites. The Indian media was initiated since the late 18th century with print media started in 1780, radio broadcasting initiated in 1927, and the screening of Auguste and Louis Lumière moving pictures in Bombay initiated during the July of 1895 —is among the oldest and largest media of the world. Indian media—private media in particular—has been "Free and Independent" throughout most of its history. The period of emergency (1975–1977), declared by Prime Minister Indira Gandhi, was the brief period when India's media was faced with potential government retribution. The country consumed 99 million newspaper copies as of 2007—making it the second largest market in the world for newspapers. By 2009, India had a total of 81,000,000 registered Internet users—comprising 7.0% of the country's population, and 7,570,000 people in India also had access to broadband Internet as of 2010— making it the 11th largest country in the world in terms of broadband Internet users. As of 2009, India is among the 4th largest television broadcast stations in the world with nearly 1,400 stations.

The organization Reporters without Borders compiles and publishes an annual ranking of countries based upon the organization's assessment of their press freedom records. In 2010 India was ranked 122<sup>nd</sup> of 178<sup>th</sup> countries, which was a setback from the preceding year.

In 2<sup>nd</sup> Session Mr. Dhananjay explain with the help of PPT presentation to the participant what is media advocacy, why it is necessary and what are the common aspects we have to keep in mind before starting a media advocacy. Some of the other forms of advocacy include:

- **Health advocacy:** Health advocacy supports and promotes patient's health care rights as well as enhance community health and policy initiatives that focus on the availability, safety and quality of care.
- **Ideological advocacy:** in this approach, groups fight, sometimes during protests, to advance their ideas in the decision-making circles.
- **Interest-group advocacy:** lobbying is the main tool used by interests groups doing mass advocacy. It is a form of action that does not always succeed at influencing political decision-makers as it requires resources and organization to be effective.
- **Legislative advocacy:** legislative advocacy is the “reliance on the state or federal legislative process” as part of a strategy to create change. Mass

advocacy: is any type of action taken by large groups (petitions, demonstrations, etc.)

- **Media advocacy:** is “the strategic use of the mass media as a resource to advance a social or public policy initiative” (Jernigan and Wright, 1996.) In Canada for example, the Manitoba Public Insurance campaigns illustrate how media advocacy was used to fight alcohol and tobacco-related health issues. We can also consider the role of health advocacy and the media in “the enactment of municipal smoking

Mr. Jasvinder focused on engagement of media. He said depending on budget you can engage media you can call your area health journalist’s on tea party which is not much more expensive. Keeping continuous dialogue with key health journalist’s of your area. Maintaining the diary of contact’s for area health journalists.

Participants raised their questions about media engagement. Everyone has submitted their problems with media. During question answer session Mr. Dhananjay clarified queries about; when to hold press conference. He said before you start planning a press conference, you must ask yourself if what you have to say is news worthy. If you call a news conference every time there is some minor event or development in your organization you will irritate the very people you are trying to attract. Journalists will soon think you are wasting their time.