



Under the Office of the President

REPORT

**GHANA AIDS COMMISSION/UNITED NATIONS DEVELOPMENT PROGRAMME
CENTRAL REGIONAL MEDIA HEALTH REPORTERS'
CAPACITY BUILDING WORKSHOP**

**SUBMITTED BY
TECHNICAL SUPPORT UNIT
CENTRAL REGION**

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REPORT ON THE GAC/UNDP CENTRAL REGIONAL MEDIA HEALTH REPORTERS TRAINING

1.0 INTRODUCTION

Media organizations have enormous influence in educating, empowering individuals and encouraging behavior change. The Ghana AIDS Commission (GAC) as the overall body responsible for coordinating and managing the National HIV and AIDS response has over the years formed a strategic alliance with the media by offering capacity building workshops for Editors, Reporters and Producers to ensure that members of the inky fraternity across board have a better understanding of HIV and related issues to produce meaningful reports.

In view of this, GAC with support from the United Nations Development Programme (UNDP) Ghana, organized a day's HIV and AIDS capacity building workshop for thirty-six (36) health reporters in Central Region.

The training is meant to equip the reporters to understand better the status of the National and the Central regional HIV and AIDS response and empower them to use their medium to accurately educate the populace, reduce stigma and discrimination and encourage behavior change towards HIV prevention and management.

2.0 KEY OBJECTIVES /SPECIFIC OBJECTIVES

2.1 Key Objectives

The overall objective of the training was to build the capacity of the health reporters on HIV as well as create a platform to discuss challenges on HIV reporting and collectively identify solutions.

2.2 Specific Objectives

The specific objectives were:

- To keep reporters abreast of HIV and AIDS to stem some of the inaccuracies and false reportage in the media.
- To offer a platform for the reporters to dialogue with GAC and partners on challenges they face writing on HIV
- To update the reporters on technical information on HIV and its management in the region.
- To educate the reporters on basic facts about HIV.
- To provide guidelines on human rights and stigma in the GAC ACT and the Anti-Stigma and Discrimination Strategy.
- To draw attention to priorities and strategies on HIV and AIDS
- To draw attention to common errors in HIV reportage

3.0 DATE/VENUE/ PARTICIPANTS

The training was held on 29th May, 2019 at Pempamsie Hotel, Cape Coast. Thirty-six (36) health reporters attended consisting of print, online, radio and television reporters. Other attendees were Dr. John Ekow Otoo, Director, Cape Coast Metro Health Directorate, Mr. Victor Brobbey, a legal consultant, two H2H Ambassadors of the Ghana AIDS Commission, staff of UNDP and staff of GAC from the Secretariat and Central Regional Technical Support Unit.

4.0 OPENING FORMALITIES

4.1 Opening Prayer/Introduction

The meeting commenced at 10:30am with an opening prayer by Mrs. Charity Danso, a H2H Ambassador. This was followed by Self introduction.

4.2 Welcome Address

The Acting Director General Mr. Kyeremeh Atuahene welcomed participants and thanked them for honouring the Commission's invitation to attend the training workshop. He briefed the participants on the HIV epidemic as well as

sensitivities surrounding the social aspects of HIV and AIDS. He stated that it was important to frequently update the media on current HIV information to ensure accurate reportage. The Ghana AIDS Commission he added, has in the last three years, implemented the National HIV and AIDS Strategic Plan 2016-2020 and the goal of this strategic plan is to achieve the 90-90-90 Fast Track Targets by 2020 and end AIDS by 2030.

Explaining the goals of the 90-90-90 Fast Track targets, he said that by 2020, 90% of all people living with HIV would know their status; 90% of all people diagnosed with HIV infection would receive sustained antiretroviral therapy; and 90% of all people receiving antiretroviral therapy would have viral suppression.

Commenting on the progress of the 90-90-90 Fast Track Targets, he said that based on available data as at December, 2018, only 113, 000 out of the HIV population of nearly 335,000 people were on anti-retroviral treatment. He explained that the low uptake of ART was because many HIV diagnosed people were in denial. And some persons who live with HIV also switch from the ARV to herbal treatment or prayer camps as recently showed in a documentary by Joy News. He therefore urged the media to educate PLHIV to adhere to ART as no cure for HIV had yet been found by the scientific community. The only scientifically proven therapy that can suppress the virus is the antiretroviral drug.

Finally Mr. Atuahene emphasized the contribution of the media in attaining the 90-90-90 targets. He said GAC and partners instituted the media interaction to get first-hand information from invited participants on their understanding of HIV and the challenges encountered in reporting on related issues.

5.0 PRESENTATIONS

Five resource persons made presentations on the topics as follows:

5.1 THE REGIONAL HIV AND AIDS RESPONSE

The Technical Coordinator Mr. William Yeboah, made a brief presentation on the Central Regional HIV and AIDS response. He stated that the global recognition of HIV as a development and multi-sectorial issue led to the establishment of the Ghana AIDS Commission (GAC) in 2002 by Act 613 and the revised Act 938 (2016). He mentioned that the Regional and District response to HIV is integral to the expanded effort to address the effects of HIV and AIDS in Ghana.

Again, he indicated that the Ghana HIV response is based on accepted international principles which are the 'Three Ones Principle'; One National Plan, One Coordinating Body and an agreed Monitoring and Evaluation system. He also mentioned some of the working documents, institutional structures, Working Partners, and HIV programmatic interventions.

He concluded with the challenges faced by the regional response which included inadequate funding, stigma and discrimination of PLHIV, awareness of HIV and AIDS not being translated into healthy behavioral practices and HIV services provided not being utilized fully.

5.2 Media Perspective on HIV and AIDS reporting in Central Region

The President for the Central Region Ghana Journalists Association, Mrs. Nancy Tettey gave an overview of the media perspective on HIV and AIDS reportage in the region. She stated that the media is the fourth estate of the realm whose role is to inform and shape public opinion in the society. The media she said are the mirror of society and must use the power they wield to help contribute in educating the public on pertinent issues that are of utmost importance to its wellbeing.

Ms. Tettey stated that over the years, journalists in the region have reported on the HIV and AIDS epidemic which has caused havoc to many families since its discovery in the early 1980s and this was because most people were mis-informed on the basics. She mentioned that in years past, news reports were basically on “victims of the disease” who were often castigated because they were considered promiscuous with the reason being that the major mode of transmission is through unprotected sex.

Ms. Tettey mentioned that effective reporting on HIV and AIDS which was on the agenda of the workshop posed a unique challenge to journalists and newsmakers. This was because the 1992 Constitution spells out the right of the public to information but at the same time cautions about the individual's right to human dignity and privacy.

She advised that the media houses present make it their ultimate aim to help reduce the impact of the disease on people in the region with factual stories whilst at the same time being sensitive to the plight of persons living with HIV as well as the people affected by it.

5.3 HIV Situation in the Central Region

The Metro Health Director, Dr. John Ekow Otoo gave an overview of the HIV situation in the Region. In his presentation, he mentioned that the Region has a population of 2,434,951 and an annual population growth of 2.1%. The region at the moment has (584) health facilities (65) ART sites and (448) functional HTC/PMTCT sites and with the current HIV prevalence of 1.8%.

He educated participants on the package of interventions carried out at the various health centres, saying that such services include HIV Testing and Counselling, Prevention of Mother-Child-Transmission of HIV, Safe blood screening and transfusion, HIV Exposure Prevention (PEP) and others. Dr. Oto pointed out that HIV testing is essential for expanding treatment and achieving the 90-90-90 targets while it helps people to make choices about

HIV prevention. Statistically, he presented the HIV and PMTCT trend analysis for the immediate past three years. The 90-90-90 campaign status of implementation was also highlighted.

He concluded that service providers are doing their best in managing the HIV epidemic in present limited resource settings. However, client's health behavior patterns, lifestyle and the social misunderstanding of the dynamics of the epidemic are major challenges affecting HIV management.

5.4 Provision on Human Rights of Persons Living with HIV and AIDS, Enforcement of Law

The Legal Consultant Mr. Victor Brobbey gave a presentation on the Ghana AIDS Commission ACT (938) 2016. He stated that the ACT as compared to the previous one has included the establishment of a National HIV and AIDS Fund, and special provisions which promote and protect the rights of persons living with HIV or AIDS.

Under the ACT, a person living with or affected by HIV or AIDS shall enjoy the fundamental human rights and freedoms enshrined in the Constitution (s.28). And a person shall not directly or indirectly discriminate against a PLHIV based on the actual or perceived status of that person or of a close associate of that person (s. 28). He said that a person who suffers an act of discrimination based on the actual or perceived HIV status of that person or of a close associate of that person may institute legal proceedings to claim damages against the person who carried out that act of discrimination (s.28).

He further expressed that a PLHIV has the right to a reasonable standard of health which includes access to health care services. (s.29) and a person shall not give medical treatment or carry out a medical research on a PLHIV or AIDS without their consent except where the PLHIV is unable to give consent. However, where a PLHIV is unable to give Consent as provided for in subsection (2), a guardian may give consent to the medical treatment or

medical research in accordance with the Patients' Rights Charter of the Ghana Health Service. He added that a person living with HIV who is unable to give consent to a medical treatment or medical research to be carried out on him/herself shall not be deprived by another person of medical treatment, based on religious or other beliefs.

Finally, he mentioned that every person shall enjoy a right to privacy and confidentiality as regards to the HIV status of that person. And a person shall not disclose any information that concerns the HIV status of another person to a third party without the written consent of the affected person. He urged all the participants to be abreast with the ACT and more importantly adopt a positive behaviour towards PLHIV.

5.5 The Basic Facts and UNAIDS Terminologies on HIV and AIDS

The Director for Technical Services, Dr. Fred Nana Poku took participants through the basic facts on HIV and AIDS, and what the acronyms HIV and AIDS mean. He mentioned the modes of HIV transmission as; sexual t, mother-to-child transmission and blood related transmissions. He pointed out that HIV is found in high significant concentrations in body fluids such as blood, semen, vaginal fluids and breast milk.

Dr. Poku also touched on the myths and misconceptions surrounding the HIV and AIDS epidemic. In addition, he took the participants through the approved UNAIDS terminologies to aid their reports on issues relating to HIV and AIDS.

He expressed the need for media persons to know the terminologies because it is key to understanding HIV. He added that understanding the terminology used to describe the virus, the infection, it causes, and strategies used to diagnose, treat, and prevent HIV and AIDS is necessary for good reportage. He indicated that the use of appropriate language has the power to strengthen the response to the HIV epidemic. And because these terminologies keep on evolving, there is the need to be abreast of them.

Finally, he went through the terms and common errors made by media houses when reporting on HIV issues with the participants and urged them all to report on HIV using the appropriate terminologies.

6.0 QUESTIONS & DISCUSSIONS: EMERGING ISSUES

- Media excluded from GAC Committees

A participant wanted to know why the media has no representative on GAC committees and the Director-General responded that the new GAC Act which establishes the various Committees of the Commission has no slot for the media. He however, made the participants understand that the Commission would consider the media inclusion in future amendments of the Act.

- HIV Policy ending 2020- What next?

A participant expressed that the Commission's target is to end AIDS in Ghana by 2030. And from the Director's speech, he mentioned that the Commission's strategic policy document spans to 2020. He therefore wanted to know what the Commission was going to do from the year 2020 to 2030, the period the policy document does not cover. The Director General of GAC responded that the policy document in operation now is a medium term policy which covers a period of five years (2016-2020), and that the Commission is developing a new policy framework to help run its operations from 2021 to 2025.

- Shift of NGOs Focus of Activity

A participant from GBC shared the story of a friend who runs an NGO whose main focus was on HIV and AIDS, but has for the past years shifted focus to other aspects of the social work because there is no funding for HIV and AIDS projects. And he wanted to know if the Commission has intentionally decided to shift the funding to other projects or just decided to focus on other things. The Director General responded by saying that it is incorrect to say that the

Commission is shifting funds, but rather the Commission is now having funding challenges. The Director General went on to explain that the Commission was giving out a lot of money for projects when it was getting funds from the World Bank, WHO, European Union and other bilateral donors like the United States government, Netherlands government, Danish government and others. He cited Ghana's current status as a Middle Income Country, and the economic crisis that started in 2007 and 2008 as part of the reasons for the withdrawal of funding. He however, stated that the Commission is running on funds from two partners being the US government and the Global Fund which is only enough to cover limited activities like providing anti-retroviral drugs and test kits. The Director General added that the HIV response has come to a point where the Government of Ghana has to take over the procurement of HIV commodities.

- GAC's unresponsiveness on Dzidor issue

A participant brought up the Joyce Dzidor Mensah's case, and wanted to know why Ghana AIDS Commission has decided not to issue any response to her allegations or claims. In his opinion, because she was an HIV Ambassador, her remarks paint a negative picture of the Commission. The Director General responded to this by saying that GAC as a matter of policy decided not to issue any response to her claims and allegations, and made the participants to understand that Joyce Dzidor Mensah is always coming back to answer her own questions as seen in the media.

- Claim of Herbal Remedy/Cure for HIV

A participant wanted to know how the Commission was handling uncertified medical practitioners who are making claims to a cure for HIV and AIDS. The Director General made the participants understand the function of GAC as a planner, coordinator and implementer of HIV and AIDS related activities and not a regulator of health practitioners. The regulation of health practitioners, he added is the Food and Drugs Authority's responsibility. The Director General was of the view that the media has a major role in streamlining these

activities since these practitioners use their channels to inform the public about their claims.

7.0 TIME WITH H2H AMBASSADORS

Mrs. Charity Danso and Mrs. Gifty Torkonu shared their experiences as persons living with HIV and the need for people to treat Persons Living with HIV with love and care.

They appealed to the public to stop stigmatizing and discriminating against PLHIV and rather accept them into their families. They also encouraged the media persons to take advantage of HIV tests at health facilities and test to know their HIV status to make informed decisions.

8.0 PRE & POST TEST

The participant's knowledge on HIV was accessed using a Pre and Post test method. However when the team compared both tests it was realized that most of the participant did better in the post test, with the possible reason being that knowledge on HIV and AIDS has increased after the presentations and discussion. The average scored by 36 participants for the pre-test was 26 for 36 participants while for 23 participants for the post test, the average score was 28.

9.0 CONCLUSION

The workshop brought together media houses from all over the region to share their expertise and provide strategies which would contribute to improving the Central Regional HIV and AIDS Response. It was a successful meeting with 80% representation of key Journalists. Participants were encouraged to continue to provide platforms on their shows for the Technical Support Unit to provide education on HIV and AIDS to reach a larger audience. The meeting came to an end with a closing prayer at 3.10 pm.

10.0 POST REPORTAGE

At least four FM stations, Peace FM, Hot FM, Benya FM and Rich FM broadcast news on the workshop. Peace FM dwelt on the Acting Director General Mr. Kyeremeh Atuahene's statement of no cure for HIV. It stressed the need for all PLHIV to adhere to their antiretroviral drugs to stay healthy.

Benya FM focused on the 90-90-90 Fast Track Targets and their significance to the national HIV response.

Peace FM and Hot FM dwelt on the existence of HIV despite the low number of commercials on educative messages. It featured the Acting Director General on the availability of ARVs at all public health facilities. It also presented the Heart-to-Heart Ambassadors and NAP+ Ghana representative on living right and adhering to antiretroviral treatment. All of them stressed on the fact that, there is no cure of HIV.

**LIST OF PARTICIPANT AT GAC/UNDP-JUTA MEDIA INTERACTION
IN THE CENTRAL REGION**

No	Name	Organization	Telephone
Media			
1	Mr. Asana Gordson	Mynewsgh.com	0269961713
2.	Mr. Kwame T. Sarpong	Arise FM	0245010676
3.	Mr. Kwabena Sage	Live FM	0548150973
4.	Mr. Asorba Kofi	Eagle FM	0500123456
5.	Mr. Anthony Abrowah	Ahomka FM	0243707343
6.	Mr. Naabayim Amissah	Chronicle	0244247082
7	Mr. Francis Thompson	Asafo FM	0240925564
8	Mr. Abdul Hammed Amposah	Radio Windy Bay	0208219427
9	Ms. Ellen Aidoo	Radio Peace	0241929444
10	Mr. Ahinful G. Charles	Hope FM	0240708676
11	Ms. Jennifer Yorke	Benya Fm	055333508
12	Mr. Kojo Asante	Golden Star FM	0242469235
13	Ms. Vida Amos	Ocean I TV	0502731573
14	Mr. Adabor Frank	Spark FM	0554494258
15	Mr. Samuel N.E Obeng	Ocean I TV	0501409564
16	Ms. Catherine Woode	Cape Fm	0554361498
17	Mr. Ebenezer Ademah	Anyidado FM	0241561879
18	Mr. Daniel K Essour	NAP+ Ghana	0544531937
19	Mr. Oman Bin Abdullah	Yes FM	0245547823
21	Ms. Noami Acquah	Coastal TV	0546215042
22	Mr. Kwaku Bee	Abrantee	0546460395
23	Mr. Ohene Seyere	Intenship,okor	0541415349
24	Mr. Emmanuel K Ahiaku	Splash FM	0241473557
25	Mr. King Ralph Osei Agyeman	Breezy FM	0554059856
26	Mr. Kweku Boako	TV-Africa	0246888807
27	Mr. Fifi Quianoo	TV- Africa	0546884356
28	Nana Kwaku Arhin	Obra pa FM	0556792207
29	Mr. David Yaboi	Ghanaaian Times	0241577353
30	Mr. Joe Gharbin	GBC Radio	0267268370
31	Mr. Aba Aikins	ATL FM	0547944447
32	Ms. Baidoo Brigdet	ATL FM	0558692045
33	Ms. Shirley A- Addo	Graphic	0244221751
34	Mr. Douglas	Amponsah Coastal Fm	0541779080
35	Mr. Okwan	Obromakoma FM	0542720288
36	Ms. Sally Ngissah	Peace FM	0547773144
37	Mr. Fredrick Bansah	Obrempon FM	0244733701
38	Mr. Afedzi Abdullah	GNA	0543750010
39	Ms. Alice Tettey	GNA	0244620104

40	Mr. Kwame Kakraba	Darling FM	020150144/0244951833
41	Mr. Adu Gyamfi Marfo	Kingdom FM	0243039147
42	Mr. Oscar Adom	Rich FM	0247865297
43	Mr. Theophilus kwofoe	Darling FM	0247731660
GAC Headquarters			
44	Mr. Kyeremeh Atuahene	GAC	0244526899
45	Dr. Fred Nana Poku	GAC	0241188797
46	Ms. Margaret Yamoah	GAC	0277780683
47	Mr. Eric Adisenu	GAC	0276133119
48	Mr. Isaac Baah	GAC	0277512051
49	Ms. Judith Ashong	GAC	0542860259
GAC Technical Support Unit, CR			
50	Mr. William Yeboah	GAC-TSU	0244855774
51	Ms. Joana Mensah	GAC-TSU	0249855250
52	Mr. Emmanuel. Mensah	GAC -TSU	0205220534
53	Mr. Albert Agyen	GAC-TSU	0271893646
NAP + Ghana, Central Region			
54	Mr. Daniel K. Essoun	NAP+ Ghana, CR	0554531937
55	Ms. Joana Fynn	NAP+ Ghana, CR	0242948105
Heart-to-Heart Ambassadors			
56	Ms. Gifty Torkornu	GAC- H2H	0203942557
57	Ms. Charity Owusu Balou	GAC- H2H	0242246016
UNDP Staff			
58	Ms. Belynda Amankwa	UNDP	0244263415
59	Ms. Yoko Reikan	UNDP	0207356031
60	Ms. Priscilla Mawuena Adjeidu	UNDP	0268 891133
61	Ms. Irene Sasu	UNDP	0503129221
Consultants/Resource Person			
62	Mr. Victor Brobbey	GIMPA	0266861752
63	Dr. John Otoo	GHS	0244687248