

tongues, translating a leprosy campaign into different languages is thus time consuming and costly. As for the impact of a campaign, the BBC’s research showed that its sustainability directly correlates to the amount of time it runs. “The lesson is that you have to keep hammering away at the message,” he said. However, this does not preclude innovative approaches. “Social messaging can be entertaining,” he added.

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Where the print media are concerned, the workshop heard that a new role for newspapers was evolving in the area of civic journalism, and that this could provide opportunities for coverage of more social issues, such as leprosy. But participants were reminded that newspapers were commercially driven, required articles that bore the stamp of authenticity and that were suitably packaged for the readership.

On the subject of presentation, Dr. Mohan Agashe (actor, theatre director, psychiatrist) said the purpose of the media should be to motivate rather than educate, “to stir curiosity and bring people to the level where they want to be educated.” Make leprosy the subtext not the text, he said. “Tell a story while giving an injection.”

Group sessions and open debate were also a source of insights and ideas.

In seeking to dispel myths and change mindsets, Dr. H. Srinivasan (Indian Journal on Leprosy) suggested it was sometimes better to

work with deeply entrenched belief systems rather than trying to overturn them. “If somebody tells you he was fated to get leprosy, it’s no good telling him it has nothing to do with fate. Why should he believe you? Instead, agree that it probably was fate, but that it was also fate that he came to you to be cured with MDT.”



Mahendra Shinde

Another point that the seminar underscored was that in order to reach the broader community, it was necessary to employ the right people for the job. Medical people can’t run social programs. These should be left to people who understand the community at large.

The session also emphasized the important role that cured persons can play in speaking out about the disease and assuming a leadership role in NGOs and other organizations. Mahendra Shinde (Bombay Leprosy Project) suggested this was easier said than done, recalling how he had applied for a government position advertised as giving priority to a person affected by leprosy, only to find this was not so.

In closing the conference, Dr. Gokhale pledged various follow-up activities, including creating a resource center on leprosy, identifying spokespersons in hyper-endemic districts, reviewing discriminatory laws, and championing the role of cured persons at the center of any initiative.

“We must recognize this hurts the pride of this country,” he said. ■

doctors in Bihar and Jharkhand.

“As a media house, we have a social responsibility,” says Chatterjee. “Basically, our job is disseminating information. But at the same time, if we are able to disseminate information that society actually needs — about disease, for example — then I think that is also our role.”

Reaction has been positive, with a number of people saying they had not been aware that the disease was curable, for example. “It showed that our perception that influential members of society did not know that much about leprosy was correct, and that targeting them was the right thing to do,” said Shankar.

One man who was closely involved in the booklet’s production, and has made full use of it since, is Dr. Rajan Shukla, NLEP’s state coordinator for Bihar.

“The aim of the booklet was not to have people come and join us, but promote attitudinal change,” he says. “In the past, it was important to promote awareness generation among patients; today, with the success and availability of MDT, this is less of a priority. Now is the time to focus on members of the general public; their attitudes make or break stigma.”

In an illiterate society, every literate person is an influencer, he points out. “When literacy levels are low, people believe what others say, because they

can’t read about it for themselves. Therefore, the literate have a responsibility to spread awareness.”

In addition to the copies distributed with the newspaper in Bihar and Jharkhand, another 10,000 copies were printed, and these have proved very handy as a promotional tool to give to district officials, legislators, industry federations, as well as banks, which have money for social initiatives. It has also been useful to give to other doctors. Dr. Shukla recalls handing the booklet to six or seven heads of department at Patna Medical College. When they started reading, there was a “pin-drop silence,” he says. “They found out things about leprosy they never knew.”