Notes from Discussion Sessions of the ZELS Dissemination Event
Held at the Royal Society, 25 February 2019

A: Better communication of research findings

1. What do you find to be the best and most effective means of communicating research results to a wide audience?

   - **Public audience**: TV and other mass media and lay journalism are useful tools in helping the public understand the threat and prevalence of certain zoonoses with certain demographics reacting better to some tools than others.
   - **Livestock farmers**: WhatsApp was widely recognised as being key to both farmer-to-farmer and researcher/health worker-to-farmer information sharing.
   - **Disease control apps and mobile phone technology**, eg. used to report dog bites in tracking rabies contamination and ensure a quicker response.
   - Newer communications technologies have better uptake with the younger generation.
   - **Face-to-face information sharing** through site visits and NGO visits, where the complexities of disease risk and control methods are enacted through plays and music.
   - **Illustrated materials with locally appropriate imagery** are important for convincing local communities of the relevance of disease mitigation in their areas.
   - **Reality TV programmes**, eg. *Shamba Shape-up*, focus on improving family cultivation plots are well-regarded by local communities and are useful for disseminating good practice.
   - A trend in communication has been to deliver information/public health messages through storytelling, theatre, music, dance etc. One such example being the all-female Ethiopian band, Yegna, sponsored/funded by Girl Effect, who worked to empower girls to demand the right to stay in school, refuse FGM, etc. This particular story backfired when it was misrepresented in the tabloids.
   - The **importance of building trust with research subjects**. Many such groups are over-researched and are frustrated by the constant barrage of researchers wishing to extract data, but never receiving feedback. In research where patients were tested for a medical condition, those who received their results promptly were more likely to participate in a related intervention.
   - **Verbal messages via mobile** overcome illiteracy. They have varied uptake depending on the words used. For example, in voicemail to livestock keepers: ‘Hello, this message is about bovine tuberculosis’ may be less engaging than ‘Hello this message is about calf mortality’. Also consider using a language with which the recipient is most comfortable.

2. What is your experience of using social media, mobile phones and other recently developed communication methods to inform livestock keepers, animal and human health workers, rural communities and others? What works, what doesn’t?
• Social media, such as Twitter, can breed mis-information, eg. vaccines vs. antivaxers. Researchers have a responsibility to put accurate information in the public domain.
• The trust issue: what can be said/not said on social media? When does information become sensitive? How does the farmer/patient know who to trust?
• WhatsApp has been used to communicate within the project, and externally with the farmer. In the latter instance, the messages deliver economic and epidemiological information.
• Farmerline: a platform for farmers to communicate with other farmers.
• different audiences require different communication strategies.
• Delivering messages through a mediator trusted by the target audience, such as communicating with farmers via vets/animal health workers.
• Project websites, with blog posts, publications, from which the Twitter feed is linked.
• Invest time in developing a communications strategy.
• Twitter is useful not only to communicate research results, but as a source of information, notifications of research calls and job opportunities, and to identify synergies, opportunities and partnerships.
• The influence of religious leaders can assist in the dissemination of good practice, but occasionally, traditional practices and adherence to them can undermine the messages provided by health workers/policy makers/ researchers etc.
• Twitter could play a positive role in building and maintaining social relationships and trust between colleagues, particularly across a geographic divide.
B: Social science research and influencing behaviour change

1. **With regard to project interventions, how can an environment be provided that encourages people to undertake certain “good” actions? Is enough being done to identify who benefits from interventions, and who should (or may) be baring the cost?**

   - Social science is needed when putting across a complex message to end-user communities.
   - Availability of appropriate models to follow can assist the implementation of behavioural change.
   - Cultural/social practices are a key barrier to uptake within a community.
   - It should be understood that people think in completely different ways and operate under completely different logics.
   - A reward/incentive isn’t always required if communities understand the problem.
   - Farmers may expect a *per diem* to be offered for attendance, without which they fail to understand the benefit derived from involvement and education.
   - The power of verbal communication is enormous.
   - Allowing time in an intervention’s pre-design phase to build trust with communities is essential for developing an environment which encourages good actions.
   - Who is paying to implement the change?
   - More social scientists are needed to work in the area of zoonoses and One Health. Social science helps to construct and frame the questions for the biomedical studies.

2. **How can the complexity emerging from social science analysis be communicated (both to other scientists and to various end-user communities) in a way that is accessible but doesn’t over simplify?**

   - Benchmarking against peer groups elsewhere can act as a useful motivator.
   - Ensure you are speaking to the right people, and that they do what they say they do.
   - Ask end users what their concerns/needs priorities are. This helps to allow interventions to be prioritised.
   - Use a suitable and relatable means of communication for the target audience, eg. cartoons are effective for children
   - Feedback to the communities enhances social impact.
   - Engagement events & workshops are essential to gain access to households in order to undertake the intervention.
   - The person communicating the message needs to be trusted within the target community. This is not necessarily the researchers, or local government. In some communities it is vital for the local Imam to be invested in the research.
   - When holding engagement events, consider framing the event around something the community knows and care about, such as fishing, with the risk of the disease embedding into the general training.
• A multi-pronged approach to any communication is often needed, eg. roundtable + Twitter campaign + posters/cartoons. Consider piloting these interventions

3. **What more needs to be done to support social and biological scientists working together? What has worked?**

• Effective co-design of projects is required from the outset, with a multi-collaborator approach from planning through to execution. Regular team meetings
• Funding initiatives need to accommodate interdisciplinarity, e.g. behaviour change experts, and offer longer programme durations.
• Offer social scientists good projects/research/ideas.
• Research by social scientists often focuses on the biologists doing the research, not the research itself.
• Strengthen the links between social sciences department and biology department.
• Understand that vocabulary can be ambiguous
• Scientific conferences encourage scientists to present in a limited time, e.g. ten minutes, which helps crystallise the message.
• Social and biological scientists must be open to having their assumptions challenged and acknowledge that what people know is profoundly shaped by the experiences they have, and the cultural, economic and political contexts they live in and the value systems that surround them. Northern researchers must recognise that they also are influenced by social, economic, political and historical contexts and value systems which lead to questions being asked in particular ways or some forms of knowledge being prioritised.
• Recognise that social scientists are not an homogenous group.
C: Moving research into practice

1. What are the main challenges and are there examples of where success has been achieved?

Some emerging technologies have rapid uptake but in other areas, (such as vaccine R and D) the regulatory framework can stifle progress. Multivalent and combined vaccines provide a way of rapidly conferring the benefits of long-pathway vaccine research and development. The cost of animal vaccines can be an issue although there are some cheap vaccines available. There is a role for global organisations such as FAO, OIE and The World Bank in the uptake of new vaccines and therapeutics. On the other hand, diagnostic tools are much less-heavily regulated, yet, new diagnostics are only helpful when supplied with an onward programme of disease mitigation.

In discussing how one can influence the behaviour of ‘customers’, such as livestock keepers, an example was given of how livestock keepers had begun purchasing a more expensive but more effective insecticide spray, despite there being a cheaper but lower quality option on offer (the preferred choice prior to the project). This appeared to have been an effect of the livestock keepers having participated in the research, and the role of proactive extension officers. The key role of livestock extension officers and other locally embedded partners was also commented on by others in the discussion groups. It was mentioned that people are much more likely to adopt a new practice if they are told about it by a trusted local person offering verbal advice in person. It was mentioned that people say they trusted a friend or neighbour more than anyone else. A powerful story can spread by word of mouth from person to person.

The very poor veterinary infrastructures in low and middle income countries (LMICs) was identified as being a big problem.

Interventions are usually required at a multi-pathogen level, since awareness of one disease, and estimations of its prevalence, often overshadow awareness of lesser-known or less feared diseases. There is a need to be sure of the effectiveness of technical intervention at every step and also consider all the ethical aspects.

It was mentioned that a desire to access international markets may be a driving motivation behind animal health interventions in LMICs. Examples were offered such as dairy exports from Ethiopia and beef from Tanzania to Saudi Arabia.

Perception of risk was considered to be an important factor. It was remarked that zoonoses, their symptoms and diagnosis, do not feature prominently in peoples’ awareness of public or individual health in some regions. Animal diseases can be of more concern to people than zoonoses. Often, people are unable to provide an accurate or quantifiable assessment of their own good health, where ‘normal’ health is considered as ‘being able to get up in the morning to go to work’. It was mentioned that social scientists can advise on local perceptions of good health and disease.
In one group, a comparison was made between DFID, where it was said there is no clear animal health policy and where country offices have little interest, and USAID who were said to be easier to engage with regarding animal health.

2. **Is there sufficient collaboration between industry, policy-makers and researchers and, if not, how can this be encouraged**

   It was generally concluded that there are insufficient links, and this is often because the interests and agendas of potential collaborators are not well-matched. To resolve these issues, project co-design should be undertaken from the outset and involve all key collaborators.

   Building collaborations outside the academic world can be challenging and sometimes costly. Communication, and building trust, with collaborators is time consuming and can be under-estimated. If trust is lost between collaborators, it can take a long time to be rebuilt. Difficulties can arise and an example was given of where industry offered to sponsor a conference but there were government concerns that they could be unduly influenced.

3. **How important is it to have pilot demonstrations and trials in multiple sites?**
   
   This was deemed to be of high importance, often being a fundamental step in building genuine and fruitful working partnerships between collaborators, but it was recognised that restrictions imposed by grant funding can often impede pilot or proof-of-concept work. There are questions also about scaling up and sustainability.

   The problem of pilot or free trials is that they may not reflect what happens in reality. Emphasis placed on the technical outcomes of trials can obscure political, social and economic issues and power relations which can have a significant influence over whether interventions will actually work on the ground. There is an important, crucial and perhaps leadership role for social science in designing effective, acceptable interventions.