Building Media Literacy: Training Hindi Journalists in Uttar Pradesh to Enhance Government Health Communication and Counter Misinformation

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Paper Number: 240224

Abstract

The media has an essential role in disseminating critical health information and countering misinformation, particularly during public health crises. This paper seeks to understand how training Hindi journalists in the State Uttar Pradesh (UP) of India can strengthen government health communication and counter misinformation around public health issues. Authentic information routed through media has the potential to build media literacy as well. A quantitative approach is adopted for this study, and the data were collected through purposive sampling using a questionnaire. The population is the Hindi print and digital media journalists of UP. An analysis of data suggests that a majority of journalists who had received some training on public health-related issues found these very useful in enhancing their knowledge base. Several untrained journalists also said the training would be useful, suggesting that the training was purposeful. Well-trained and informed media would ensure accurate, credible, and evidence-based reporting, thereby helping in checking misinformation. This, consequently, supports and strengthens the health communication initiatives of the government. Analysis suggests that media organizations and journalism training institutions should prioritize structured educational programs focused on public health reporting, including in Hindi and other regional languages. Hindi media has the largest circulation and readership in the country among all regional languages and English. The study recommends that the government should only indirectly support the media houses, media training institutes, journalism schools, educational institutes, and non-governmental organizations in training journalists for the larger public good.

Keywords*: Media, Training, Communication, Misinformation, Hindi, UP*

Introduction

The impact of the media on the people is known. There is a rich body of scientific evidence to prove the immense impact the media has on people. Policymakers and health professionals, too, are guided by media coverage. Hence, the media must disseminate accurate information so that policymakers can make decisions that are useful for the public (Keshvari et al., 2018). It shapes perceptions and influences behaviour change (Panjaitan et al., 2023).

The media's role in disseminating health information was re-emphasized when the Coronavirus-19 disease broke out. The citizens depended on the media to give all the information, especially about health.Even governments relied on the media to communicate with the citizenry.

1.1 Infodemic

As the world was struggling to deal with the Corona virus, another phenomenon of an unprecedented magnitude unveiled itself simultaneously. This event—infodemic-- an overflow of information about COVID-19 that was mostly unreliable, spread quickly, and was accepted by the people. As per the World Health Organization (WHO), the phenomenon of an 'infodemic' refers to the availability of an abundance of information, including inaccurate or misleading, and available both online and offline when a disease breaks out. This can lead to confusion among the people, prompting them to adopt risk-taking behaviours that can be harmful. It also erodes the public trust in the health authorities and can slow down the public health responses. (WHO, 2021). According to the global health body, an infodemic can intensify pandemics if the masses cannot make out the difference between authentic and fake information. Accepting misinformation and disinformation as genuine can harm their health.

1.0.1.Myths and Misconceptions

People believe in conspiracy theories floated as infodemic because they offer a rationale in uncertain and anxious times (Henschke, 2024). This disinformation may be advantageous for experimental manipulation, political, and financial gains. It has also been employed by anti-vaccination activists to further their objectives (Diseases, 2020).

The COVID-19 pandemic was surrounded by many myths and misconceptions. Lack of information about the disease resulted in discriminatory behaviour against the patients and their families. There was mistrust against the authorities because the healthcare institutions were unable to handle the inflow of patients and provide timely information--at least initially.

Some of the preventive steps that were prescribed during the COVID-19 pandemic were alcohol intake, bathing in alcohol or chlorine solutions,

eating garlic, using hot-water baths, using hand dryers, using UV disinfection devices, and taking advantage of extreme temperatures to promote virus killing (Naeem et al., 2020; Krishna et al., 2021).

1.1.2 Initiatives to Check Infodemic

Newspapers and other media channels put in efforts to ensure that only authentic information is disseminated in the public domain. Putting the responsibility of authentic reporting on health and medical journalists, the Association of Health Care Journalists (AHCJ), a U.S.-based organization, says that its members are aware that consumers of media could be influenced by the information available in the public domain that could adversely impact the decisions they make about their health (healthjournalism.org, n.d). However, since the virus is new and not much was known about it, any effort, though welcome, did not yield the desired results. The social media platforms were full of information, some verified and some not. Some of this was consumed by the masses, and some also found their way into the print and electronic media.

In the initial weeks of the outbreak, the priority of the Indian authorities was to handle the outbreak by strengthening the health systems, preventing the spread of the disease, and finding a cure. Scant attention was paid to addressing misinformation and disinformation. Also, the media were neither skilled nor equipped to report on a severe public health issue of this magnitude. No timely official information made things worse. Health reporting is not a priority for the media in Indian, like elsewhere in the world. Public health finds space only when there is a crisis, financial misappropriation in the healthcare system, or some political intervention.

Once the government got a grip on the situation, measures were taken to counter the deluge of information on COVID-19 by fact-checking, engaging with the media, and calling in subject experts to educate and inform the people. The Union Health and Family Welfare Ministry organized daily briefings on COVID-19 for the journalists in New Delhi. This served a twin purpose. On the one hand, it ensured that only verified and authentic information went out in the public domain, and the queries from the media were addressed; on the other hand, it sensitized the journalists on the issue. Messaging through the subject experts educated the masses and helped them make informed decisions (Pieri, 2021). Online sessions for journalists on various aspects of the disease, its prevention, and treatment were helpful in awareness generation.

These measures were taken because of the extraordinary magnitude of the crisis. This was an exception to the norm. Generally, such efforts on the part of the government are lacking, and the focus is mostly on the achievements of the government of the day or an individual, be it the Minister concerned, or if there is a new initiative by the government

1.1.3 Context and Justification of the Study

According to the Registrar of Newspapers in India's annual report 2021-22, there was an increase in the number of publications registered in the country during the fiscal year 2021-2022, despite the pandemic. This suggests the growth of the print media has not been adversely impacted by the increase in audio, visual, and digital media.

The Press Registrar General of India (erstwhile Registrar of Newspapers for India) in its annual report for 2022-23 claims that the Hindi publications have the largest share in the overall circulation with 19, 96, 36,883 copies per publishing day, accounting for 49.57 per cent of the total circulation.

Similarly, the Internet in India Report, 2024, brought out by Kantar-IAMAI, predicts that over 900 million people in India will be using the internet by the end of 2025, with more internet users joining from the rural parts.

The internet penetration varies across the states, with Kerala, Goa, and Maharashtra having a penetration of 72%, 71% and 70% respectively. The three states with the least internet connectivity are Jharkhand, Uttar Pradesh, and Bihar at 50%, 46% and 43% respectively. While the internet coverage is increasing in all these states, the states with lower coverage are showing a faster pace of penetration, the report claims.

Of the 870 million internet users in 2024, as many as 57% said they preferred accessing the internet in Indic languages, and the remaining 43% in English. Among the Indic languages, 24% preferred to access the internet in Hindi—the highest percentage for any Indian language.

Keeping in mind the high readership of Hindi publications and the increasing number of people who are switching to digital media, and the influence that the media has on the people in addition to a low level of knowledge among the journalists on issues related to public health, it would be in the interest of the country and large public good that journalists covering or interested in covering health are trained on the nuances of public health reporting so that their news stories are authentic, credible and evidence-based. This would help these individuals to make informed choices about their health. Getting media interested in health issues and their familiarity with the subject would enhance their involvement through critiquing government communication. This value addition would not only inform the media audience better, but also serve as useful feedback to health administrators. An informed media and a sensitive government can together help in building media literacy among the masses and eventually check misinformation.

Review of Literature

In recent years, health communication has come to the fore of mass communication. The Centers for Diseases Control and Prevention (CDC) defines health communication as the systematic research and practice of

communication procedures, intended to inform and influence health promotion behaviours. People can make informed decisions by using health communication to get the information they need about their health (CDC, 2024).

During the COVID-19 pandemic, epidemiologist MadhukarPai (2020, online) wrote an article in an international journal drawing attention towards the challenges faced by journalists in understanding the disease and in simplifying the technical jargon to communicate with their readers. Dr Pai wrote the article based on his experience of online training of Indian journalists. The training helped in improving their knowledge of the disease and made their news stories simpler and easier to understand by the readers.

The World Health organization, UNICEF, several non-governmental organizations, and subject experts, too, made efforts to educate journalists on the outbreak. These efforts were useful for the English media, but the language media did not seem to gain much because the trainings were held in English, leaving the vernacular media out of the loop.

2.1 Health Reporting

Researchers have long advocated for understanding the needs of journalists reporting on health, and implementing well-developed training programs or courses, keeping in mind the importance of mass media in health communication (Keshvari et al., 2018).

Much research was carried out on different aspects of COVID-19, including its impact on the economy, but much of the research was done in English and based on the content picked up from English publications. Very little research based on regional language newspapers is done in English. A study on the reportage of COVID-19 in the Kannada language newspapers concludes that Kannada print media in Karnataka did an appreciable job in reporting the Corona virus pandemic (Mahima, et al., 2021). This study was based on five leading (based on circulation figures) Kannada newspapers and focused on the quality of reports on COVID-19.

A study conducted in Iran to ascertain the quality of health reporting concludes that it was below the satisfactory level and makes suggestions for educational interventions to raise the knowledge base among journalists (Ashoorkhani & Majdzadeh, 2012). The study shows that at least 18% of the news reports were not credible enough for dissemination in the public domain.

A study of health reporting in the United States newspapers indicates that 62 to 77 per cent of examined reports do not contain data about the price, the pros and cons of the treatment, and the quality of medical services (Keshvari et al., 2012).

Public health officials have their own opinions about the influence of the media on the people. Sometimes they use the media to inform and educate the masses, but there are times they keep away from journalists when critical or misleading news articles are published. A study on media coverage of health done in Australia states that journalists prefer to use anecdotes, expert opinions, and focus on controversies in the news reports rather than data, scientific research,or highlight the issues that are non-controversial in nature (Leask et al., 2010). It further points out that lack of technical training, meeting tight timelines, and commercial considerations influence the framing and display of the news story, while calling for better interaction between the public health experts and the media to enable both to understand each other's functioning.

Many commercial organizations even develop personal rapport with journalists and media houses to influence the news. Considering the influence that the media has on the health behaviours and decisions related to the health of individuals, journalists need to be aware about the impact of industry-journalist relationships (Lipworth, 2012).

Spokespersons, press releases, and official briefings constitute the major source of health-related information used by journalists because of the high level of technicality (Ruao, et al., 2012).

This often results in a strong relationship between the public relations messages and health coverage, making the public relations professionals a critical link between the journalists and the health community to the extent that they can even influence the news agenda. This dependence on health organizations for information makes health reporting vulnerable to influence.

A lot of focus in health reporting is put on the quality of reporting and its impact on the consumers of media, and little or no attention is given to the perception of the health journalists of their audience (Friedmann, et al., 2013). Catchy headlines and irrelevant words to create sensationalism are often used to attract readers. Researchersrecommend increasing collaboration between public health practitioners and journalists to enable both sides to understand each other, in sharing the nature of information, and also developing health content that would benefit the readers.

But more importantly, there is also a major communication gap between scientists who communicate in English and the journalists who understand local/vernacular languages. Scientists use technical terminology often not understood by journalists (Kapoor, 2017). Putting the onus of bridging the linguistic divide on scientists and science journalists, the researcher says scientific terminology often used by scientists is a communication hurdle for language journalists that need to be addressed.

Media literacy and defying misinformation have a central role to play on the part of governments and experts in the subject matter. They must use their

authority to educate and influence crowds in favourable ways in times of crisis. A good spokesperson to deliver good messages is critical, particularly when informed choices involve life-or-death situations (Abu-Akel et al., 2021).This conclusion was made through research that focuses on the effectiveness of spokespersons in the social distancing campaign of the pandemic. The best spokesperson turned out to be Dr.Antony Fauci, Chief Medical Advisor to the President of the United States (US).The study reveals that the celebrity spokespersons were the least effective. Therefore, if the content of the message is vital, then the person transmits the message.

An efficient communication strategy entails the formulation of clear messages conveyed through suitable platforms, tailored to cater to a diverse array of audiences, and disseminated by individuals deemed effective (Hyland-Wood et al., 2021; Walsh-Childers & McKinnon, 2024).

2.2 Health Education for Journalists in India

There are major deficiencies in the media education system in India. First, there seems to be no connection between the curriculum in journalism schools and the industry. Also, educational and mass communication institutions do not have a common core curriculum for journalism (Murthy, 2011). The researcher recommends revising the curriculum as the courses are poorly designed.

2.3. ICMR Study on COVID-19 Reporting in India

An investigation by the Indian Council of Medical Research (ICMR) was conducted to evaluate how well Indian media reported the COVID-19 outbreak. News items were assessed based on the recommendations of the World Health Organisation Strategic Risk Communication framework. It was found that 18.8 percent of the articles gave practical recommendations to the readers, and 40 percent of the treatment coverage gave inaccurate information, such as referring to chloroquine treatment or plasma therapy (Kant et al., 2023). Though the majority of the articles followed when reporting the symptoms, the risk factors to severe disease, transmission, and prevention. Only a meagre 1.9 percent cited equity, and 67 percent cited credible sources of information.

With a surge in media coverage on COVID-19 during the pandemic outbreak, ICMR undertook several activities, including awareness tweets, vaccine and vaccination updates, testing updates, COVID-19 guidelines, and advisories for media in addition to media briefs and press conferences. These initiatives enhanced positive coverage and brought down unfavourable coverage. Scientists should communicate during health emergencies as it helps in enhancing knowledge of journalists, fights misinformation, and builds public trust, it recommends.

The ICMR (Indian Council of Medical Research) study concludes that public health communication needs an effective and sustainable mechanism at all

times. The study highlights the usefulness of training communication officers.

Post-pandemic health communication has highlighted newer barriers for all stakeholders. This calls for widening the scope of health communication to incorporate infodemic and social media, which gives very little time to the authorities to respond (Ratzan, et al., 2020).

Objectives

1. To understand the influence of professional training of Hindi journalists of UP on public health issues, in strengthening the government's health communication
2. To study the significance of professional training of Hindi journalists of UP on public health issues in countering misinformation

4. Theoretical Framework

4.1. Uses and Gratification Theory of Mass Communication explores the impact of mass communication media and analyzes how people use mass communication media to fulfil mental needs and cognitive requirements. It tries to explain the means by which individuals are likely to be attracted to specific types of media and the satisfaction that they expect to get.

4.2. The Diffusion of Innovation Theory studies the process of adoption of innovative ideas by people. Communication is an important part of the theory as mass media and interpersonal communication channel is used in the diffusion process to influence the public. Diffusion is described as the process through which `an innovation or an innovative process is communicated to the masses using various channels, including the media.' An innovation could be an idea or a practice.

4.3. The Social Responsibility Model argues that the freedom to exchange information must be done with some responsibility towards the public, including factually accurate reports. Social responsibility permits the government to intervene in media accountability systems when the media fail in their responsibility towards society. This becomes particularly critical for health issues.

4.4. The Agenda Setting Theory is about how the media presents selected issues prominently and repeatedly, as a result of which consumers of media perceive these issues as more important than the rest. The more visible the issue is, the more important it becomes to the people.

4.5. The Health Belief Model assumes that individual action is influenced by their own evaluation of the likely outcome of adopting a new or changing existing behaviour. This theory is used to ascertain whether an individual would or would not adopt a particular health behaviour. An individual can

be influenced to adopt a recommended behaviour by changing their perception. Media can be used to influence the perception of an individual.

5. Methodology

The methodology used is quantitative research. This was done to systematically examine how professional training relates to the quality of public health reporting by Hindi-language journalists in Uttar Pradesh.

The data was collected between the months of November 2024 and February 2025 through a closed-ended questionnaire. A quantitative approach was adopted as a large number of responses were expected from the journalists in a large and demographically diverse region. For data analysis, SPSS software and descriptive statistics, cross-tabulations, and chi-square tests were applied to test and establish correlation.

The research universe entailed Hindi language journalists reporting for print and digital platforms in Uttar Pradesh and some based in Delhi/National Capital Region but working for UP-based Hindi newspapers. Freelance journalists and columnists were also included. Responses of those having experience of working with the print media, too, were considered eligible.

The three validated sources relied on to collect a credible and purposeful sample were Uttar Pradesh Soochna Diary App (maintained by the Department of Information and Public Relations, Government of Uttar Pradesh) and the Centre for Advocacy and Research (CFAR), a not-for-profit organization working on media advocacy on health in UP (Uttar Pradesh). For Delhi-based journalists, those journalists accredited by the Press Information Bureau (PIB) were considered.

A filtering process reduced a larger sample pool of 5,700 possible journalists down to a refined sample of 1,300 journalists eligible for participating in the survey. Purposive sampling helped identify Hindi journalists in Uttar Pradesh. The questionnaire was drafted in Hindi as well as English and a final scanning resulted in 324 valid responses.

Results and Analysis

Table No. 1

The relation between training on public health and improving the quality of health reporting and knowledge enhancement of knowledge of journalists

Did you receive any formal training in health reporting during your career? * How useful were these trainings in enhancing knowledge on the issue? * Were these trainings effective in improving the quality of reporting? Crosstabulation

Count

Were these trainings effective in improving the quality of reporting?			How useful were these trainings in enhancing knowledge on the issue? Very useful	Useful	Can't say	Not useful	Not useful at all	Total
Highly effective	Did you receive any formal training in health reporting during your career?	Yes	86	4	1	1	0	92
		No	26	9	5	0	2	42
	Total		112	13	6	1	2	134
Effective	Did you receive any formal training in health reporting during your career?	Yes	17	29	1			47
		No	16	22	18			56
	Total		33	51	19			103
Can't say	Did you receive any formal training in health reporting during your career?	Yes	2	1	0	0	0	3
		No	9	4	45	1	2	61
	Total		11	5	45	1	2	64
Somewhat effective	Did you receive any formal training in health reporting during your career?	Yes	5	3	1			9
		No	3	3	5			11
	Total		8	6	6			20
Not effective at all	Did you receive any formal training in health reporting during your career?	Yes				0	1	1
		No				2	0	2
	Total					2	1	3
Total	Did you receive any formal training in health reporting during your career?	Yes	110	37	3	1	1	152
		No	54	38	73	3	4	172
	Total		164	75	76	4	5	324

Interpretation

Table No 1 examines the relationship between formal training in public health, the usefulness of such training in enhancing knowledge of journalists, and its effectiveness in improving the quality of reporting. The results are derived from a cross tabulation analysis, chi-square tests, and correlation measures.

Training and Effectiveness in Reporting:

From the valid 324 responses, 152 have received formal training on public health reporting. Of these, a significant proportion—86-- rated the training sessions highly effective, while 47 described it as effective.In contrast, of the 172 who did not receive training, a relatively smaller proportion—26-- still considered health reporting training highly effective. However, a large number –73 respondents-- were unsure about its effectiveness. Only three respondents of a total of 324 respondents found the training not effective at all. The responses indicate that training is generally seen as beneficial.

Training and Usefulness in Enhancing Knowledge:

The majority of journalists—110—from a total of 152 trained respondents found the public health training to be very useful in enhancing their knowledge base, whereas only 54 out of 172 untrained journalists held a similar view. A significant number of untrained journalists –38-- described the training as `useful', suggesting that even those not having undergone formal training also recognize its potential. Interestingly, 73 respondents (all untrained) opted for 'can't say' on how useful training would be.

Chi-Square Test Results:

The Chi-Square test results indicate a strong association between formal training in health reporting and its effectiveness ($x^2 = 85.500$, $p < .001$). This means that respondents' opinions on training effectiveness are not random but significantly influenced by whether or not they have received formal training.

Correlation Analysis:

Pearson's correlation ($r = 0.469$, $p < .001$) and Spearman's correlation ($r = 0.480$, $p < .001$) both show a moderate to strong positive relationship between receiving formal training and improved reporting quality. This suggests that as the level of formal training increases, so does the perceived effectiveness of reporting.

However, there is still a section of respondents who are unsure of the effectiveness of formal training, highlighting a possible gap in training awareness, quality, or applicability.

The results strongly confirm the positive impact of formal training on both knowledge enhancement and reporting quality in health journalism. Journalists who received training overwhelmingly rated it as useful and effective. However, a proportion of untrained journalists were unsure about the effectiveness and usefulness of training, indicating a need for increased awareness and accessibility to such programs. The findings suggest that media organizations and other stakeholders should prioritize structured training programs in health reporting to improve overall journalistic quality and public health awareness.

Table No 2:

One-Sample t-Test on the Preference for Training in Regional Languages

One-Sample Test

	Test Value = 0					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference Lower	Upper
Should the training be organized in regional languages?	112.401	323	<.001	1.028	1.01	1.05

One-Sample Effect Sizes

		Standardizer[a]	Point Estimate	95% Confidence Interval Lower	Upper
Should the training be organized in regional languages?	Cohen's d	.165	6.244	5.751	6.737
	Hedges' correction	.165	6.230	5.737	6.722

a. The denominator used in estimating the effect sizes.
Cohen's d uses the sample standard deviation.
Hedges' correction uses the sample standard deviation, plus a correction factor.

Interpretation

A significant majority of respondents favour the idea of organizing training in regional languages.

Table 2 presents the findings of a one-sample t-test examining whether training for health journalism should be conducted.in regional languages. The one-sample statistics indicate that the mean response is 1.03, with a standard deviation of 0.165 and a standard error of 0.009.

The one-sample test results show a t-value of 112.401, with 323 degrees of freedom (D.F.) and a highly significant p-value (0.000). The 95% confidence interval for the mean difference ranges from 1.01 to 1.05, confirming the strong consensus in favour of regional language training.

The effect size analysis shows a Cohen's d value of 6.244 and a Hedges' correction of 6.230, both of which indicate an exceptionally strong effect size, suggesting a near-universal agreement on the need for training in regional languages.

The overwhelmingly significant results and large effect size suggest that training programs should prioritize linguistic inclusivity to ensure better comprehension and accessibility for journalists working in diverse linguistic settings.

Discussion and Conclusion

Data suggests that there is a positive relation between the training of health reporters and with knowledge enhancement of journalists, and improvement in the quality of reporting.

Using accurate and authentic information in the news reports is the most critical part of news reporting. This is possible only if the source of information is credible. Journalists depend on the health officials, experts, press releases and government websites, and research papers for health-related information. Since health is a technical subject and involves the lives of people, journalists must use the information obtained from authentic sources, the news reports are not sensationalized, and any doubtful information is verified before use.

Training will broadly help the media personnel in identifying authentic sources of information, understanding scientific research, and analysing data that make a news story credible, informative, and educational.

However, since all research is in English and all scientists generally speak in English, the training may not benefit the vernacular media, as not all of them understand English. Data has also shown an overwhelming support for training in regional languages for better comprehension and accessibility for journalists working in diverse linguistic settings.

Training in regional languages is important because India has a very robust regional media, particularly Hindi media, with the highest readership among the language publications as well as those in English. To cater to this readership, the information must be simple to understand.

Training journalists for public health reporting also has the potential to support the government in health communication. A knowledgeable cohort of health reporters will not only convey the messaging accurately but also educate the masses—thus supporting the government—which would help in checking misinformation and disinformation. This would be particularly helpful to the government during public health crises when the media has a role to play in disseminating information to the masses. On the other hand, it can also hold the authorities accountable for lapses. An effective interaction would also help in developing trust in the political leadership.

The World Health Organization's (WHO) Strategic Risk Communication guidelines spell out that infodemic management should enable good health practices by listening to the community, making people understand the risk and listen to health expert advice, and empowering them to reject misinformation (WHO, 2018).

Media organizations and policymakers should make efforts to indirectly support journalists by providing better training, access to authentic sources of information, and support systems for health journalists. This can be done by engaging with the higher educational institutions, non-government organizations, public health institutions, and subject experts.

The government cannot be seen as directly getting involved in training since that could be misconstrued as an infringement on the freedom of the Press. However, training and skilling media in public health reporting is the need of the hour, and this cannot be done only during the public health crisis. It has to be a sustained process that should also throw up some dedicated health reporters who can develop specialization in this field.

A well-informed media, a receptive government, and a media-literate community can together fight the scourge of misinformation and disinformation.

7. Recommendations

7.1 Well-defined educational programmes on public health reporting should be organized by the media organizations and journalism training institutions to improve the quality of reporting.

7.2 Training programmes should be designed for improving the scientific comprehension of journalists, understanding data, and information sourcing.

7.3 The governments can play a key role in supporting these trainings indirectly to ensure that this is not perceived as an infringement on the freedom of the Press.

7.4 Training should be imparted in English, Hindi, and other regional languages for the benefit of the regional media.

7.5 Governments should engage universities, non-governmental organizations, subject experts, and other stakeholders for these trainings.

8. Limitations of the Study

The study is limited to Hindi journalists of Uttar Pradesh who work in print media or digital platforms. It does not include the journalists working with English or other regional language publications such as Urdu, Bengali, Sanskrit, Arabic, and Odia. The study also does not include journalists working with electronic and social media. The geography of the study is confined to journalists working in Uttar Pradesh (UP) and the correspondents of newspapers posted in New Delhi/National Capital Region.

9. Scope for Future Research

The subject has immense scope for future research, as the present study is confined to Hindi journalism with a focus on print and digital formats only. Uttar Pradesh has the largest number of new registrations and the highest readership of various publications in the country. Publications, including newspapers and their digital formats, are brought out in several languages, including English, Urdu, Bengali, Odia, Arabic, and Awadhi, among others. Studies can be conducted for journalists of all these languages.

All forms of traditional media and new media, including social media, bloggers, and citizen journalists, can also be brought under the scope of future research.

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