Creating Health-Related Digital Media Abroad

Helaina Thompson

University of Iowa

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CREATING HEALTH-RELATED DIGITAL MEDIA ABROAD

by

Helaina Thompson

A thesis submitted in partial fulfillment of the requirements for graduation with Honors in the Engaged Social Innovation

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Joseph Cilek
Thesis Mentor

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All requirements for graduation with Honors in the Engaged Social Innovation have been completed.

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Andrew Tinkham
Engaged Social Innovation Honors Advisor

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Engaged Social Innovation: Creating Health-Related Digital Media Abroad
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Capstone Overview

A number of global health initiatives, many well-meaning, elevate stereotypes of poverty in their use of media and marketing. Photographs that portray sadness and desperation in poor communities—often used to boost fundraising—have been dubbed “poverty porn” by experts. Many of these photos fail to accurately tell the complex story of poverty. Many fail to honor the work of native volunteers and social entrepreneurs, instead aggrandizing the volunteer efforts of white tourists passing through. This can create a perceived dependency on foreign aid, diminishing the potential of local change-makers.

From mid-November through mid-January I returned to Pondicherry, India (my first visit was through the India Winterim program last year). When I arrived, I met with a rural palliative care organization, Sanjeevan, that I partnered with one year prior as a student on the India Winterim program. The organization expressed a need for an updated digital multimedia presence, and this need aligned with the skills and equipment I’ve acquired as a journalism student, as well as my interest in creating accurate portrayals of global health initiatives.

During my two-month stay in Pondicherry, I re-designed Sanjeevan’s website and regularly updated its social media platforms. We created a promotional YouTube video featuring one volunteer’s inspirational journey to becoming a nurse and subtitled the film to be viewed in both Tamil (the regional language in Pondicherry) and English. I captured, printed, and delivered photos of patients to their families. With permission from the patients, I also displayed the photograph collection in a gallery at the Blank Honors Center in Iowa City, and I wrote a front page article about this service learning experience for The Daily Iowan.

A camera, especially in the hands of a Westerner visiting a so-called “developing” country, has the power to exploit the dignity of vulnerable individuals. It is not difficult to imagine examples of such images. With guidance from the director of Sanjeevan and permission from its patients, I worked to present digital imagery that might alter the way people perceive stigmatized topics such as poverty, “development,” and terminal illness.

Next fall I will begin a graduate program in health promotion. When studying public health, one has the opportunity to specialize in global health, so I chose this project to better understand what working in global health might entail. Living in Pondicherry allowed me to experience challenges unique to working on a global scale, such as learning Tamil, catching an auto rickshaw, and confronting my white identity in a so-called “developing” country. I will take the lessons I’ve learned during my capstone project with me to graduate school.
Project Abstract

Over the course of the Fall 2016 semester and through the winter, I prepared for and then embarked on a trip to India to carry out my Engaged Social Innovation capstone project.

My ESI capstone objectives were:
- Follow ethical guidelines of volunteer work abroad
- Create something lasting
- Take captivating photos
- Prepare for graduate work in public health

I began my project in Iowa City, meeting with two UI experts in volunteer tourism. In order to learn about volunteering abroad ethically I met with Christine Brunner, a UI Global Health Studies lecturer, and Greg Yungtum, a medical student and photographer. I also read a number of studies and articles about ethical tourism and the effects of “voluntourism.” My story in The Daily Iowan references my discussions with Christine and Greg, as well as a selection of those write-ups.

In mid-November, I arrived in Pondicherry, a city located on the southern east coast of India. I partnered with a palliative care organization, Sanjeevan, to complete this multimedia project. Approximately three days a week, I accompanied nurses and doctors in cramped vans as they traveled to their patients, many elderly and critically ill, who lived in nearby villages. During those visits, I captured photos and video footage. Other days I spent working on my laptop, updating Sanjeevan’s social media platforms and creating a promotional Youtube video about palliative care. I achieved my goal to create something lasting by assembling a multimedia package—including photos, video, website updates, and sample Facebook posts—for the palliative care organization to use over the next few years. Portraits of patients were printed and delivered to those photographed as a small, lasting gift of thanks.

Below this letter are the photographs on display in the BHC third-floor gallery, preceded by my artist statement. I’ve also included a link to the YouTube video, as well as the front page story I wrote about this experience for The Daily Iowan. I hope that my story guides readers seeking volunteer and study abroad opportunities in developing countries.

This project has defined my focus as I pursue graduate work in public health. This fall, I will begin a graduate program in health promotion with an interest in culturally sensitive health campaigns and communication. Creating multimedia for the palliative care organization helped me realize how I could combine my background in journalism with my interest in public health. Working as a westerner in India, and later writing about that experience for The Daily Iowan, allowed me to reflect on how (and how not) to approach global health promotion.
**Next Steps**

This fall I begin a master’s program in health promotion through the Health and Human Physiology Department at the University of Iowa. I will focus on health communication and social marketing campaigns. My Engaged Social Innovation capstone project helped guide this decision as it allowed me to grasp a better understanding of how I can combine the skills I have developed as a journalism student with my interest in public health initiatives and global citizenry.

Today, encouraging healthy behaviors requires marketing those behaviors across various platforms, from billboards to commercials to Facebook statuses. Multimedia marketing involves photography, videography, storytelling, and social media—all of which I engaged with during my capstone project.

The primary reason I chose to carry out my capstone project in a foreign country was to better grasp what working in global health might feel like one day. Ultimately, I learned that my intention to “help” was greatly curtailed by my inabilities to live independently in India. During my two-month stay in Pondicherry, I struggled to navigate many social norms. I couldn’t read bus schedules written in Tamil or speak to patients in their mother tongue. I often couldn’t eat the food my peers ate, and I needed help activating my phone, grocery shopping, and paying for my laundry. Much of my energy was spent learning how to simply live in India. In truth, that same amount of energy could have achieved much more social good in Iowa City.

This was a positive and guiding conclusion, however, and will influence my research and work as a graduate student. I now envision working primarily in the domestic sphere, exploring topics in American rural health as a graduate student in health promotion, and later in a career, which is why I believe Iowa is an ideal state in which to continue my education. Meanwhile, I hope to continue learning about social marketing campaigns and health communication techniques from UI experts, such as Dr. Shelly Campo of the College of Public Health’s Department of Community and Behavioral Health, in order to pursue a career designing, testing, and conducting such campaigns.

Working in rural health requires both an appreciation of rural America, as well as an understanding of the cultural complexities of agriculture and migrant labor. Becoming a better global citizen in India, confronting my white identity, and beginning to comprehend what it means to be the “other,” has allowed me to be a more concerned global citizen in my home state, where I am capable of drawing upon my skills and networks with little constraint. Filming and photographing grassroots volunteers and healthcare professionals in Pondicherry has ultimately inspired me to embrace that role in my own community.
Capstone Documentation

A cover story in *The Daily Iowan*

A YouTube video

A photo display in the BHC third-floor gallery (photos included below)