4th International Academic Conference on Research in SOCIAL SCIENCES
10-12 December,2021 Barcelona, Spain

International Communications about Cholera in 2017 and 2018: The case of Médecins Sans Frontières (MSF)

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Abstract:

This research project focused on international communications on the cholera crisis in Yemen from 2017 to 2018. More specifically, we examined the impact of Médecins Sans Frontières (MSF) communications during the humanitarian crisis in Yemen by comparing the key messages of MSF communication products, such as press releases and statements, with the different narratives regarding the crisis produced by the nine selected international media: New York Times, BBC, Asharq Al-Awsat, Al Arabiya, Al Jazeera, TRT, PressTV, Sputnik, and Russia Today (RT). We also observed if MSF was mentioned positively, neutrally, or negatively in international media, to further understand if the messages of MSF communications regarding the cholera crisis in Yemen were (a) accurately picked up by the international media (b) and if there were cases of message distortion such as misinterpretations and misquotes. Our research also explored the role of communications for epidemic preparedness and management, the structure of MSF, the communication strategy, and the procedure for conducting press releases generally and in emergency situations. Moreover, MSF was associated with medical-related information and the reference of MSF remained limited in comparison with other IGOs in our identified media. Finally, we hope that this research will lead to a future reflection among the MSF staff in the Communications Department on current roadblocks in MSF communications in comparison with their capabilities.

Keywords: Cholera, Communication Strategy, Doctors without Borders, Médecins Sans Frontières (MSF), Yemen.

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I. Purpose/Objective

The first cholera cases in Yemen appeared during April and May of 2017, and since then, every rainy season in Yemen has resulted in a surge of patients. Political and environmental factors also have a determinant effect in Yemen. Despite this, the cholera outbreak was still a surprising event since cholera was thought to be eradicated.

The role of communications is a determinant factor for emergency preparedness and management, which includes information sharing and social mobilization. In the case of the cholera outbreak in Yemen, apart from infectious disease prevention, the control of the existing situation demanded to be fast, flexible, and effective. Thus, cases of miscommunication and misinterpretation between the population affected, response staff, volunteers, public health officials, and policymakers could have a significant impact on their health and livelihoods (Dickmann et al., 2015, 233-34).

More specifically, by evaluating the impact of MSF communications during 2017-2018 in Yemen, the goal of this research is oriented towards two directions. First, we intend to understand whether Médecins Sans Frontières (MSF) communications' key messages regarding the cholera crisis in Yemen were picked up and relayed adequately by the international media and confirm if there are cases of message distortion such as a misinterpretation or misquote. Second, we aim to examine the influence of MSF communication's products on media agenda-setting. The above will provide the needed evidence to understand the level of influence that MSF communications had on shaping media narratives on the cholera outbreak in Yemen during 2017-2018.

II. Methodology/Approach

To begin our research, we searched for every news report by using key words: “cholera, Yemen” and the timeframe 2017 and 2018 on the websites of our nine identified media and their websites targeting English speaking population: BBC, New York Times, Al Arabiya and ASharq Al-Awsat from the side of Saudi-led coalition; Russia Today (RT), Sputnik, TRT, Press TV from Russia, Turkey and Iran; and Al Jazeera English from Qatar. More specifically, our research includes 373 news reports in total.

As a second step, we read through all the collected news reports to gain a general idea of how each international media was describing the Yemen crisis. This helped us to compare MSF's visibility vis-a-vis other organizations that were active in Yemen at the same time. Based on our research goal, we created several categories of coding words based on some shared focus points by the nine media (War- oriented, People Mentioned, Health- Oriented and Calls for action) and generated a database sheet for each media. We have also defined and measured the positive, neutral, or negative mentions of MSF in cases when one of the nine international media reproduced some of MSF’s communications messages, statements or press releases.

Through the creation of an analytical database for each of the nine media, we intended to review 1) the penetrating points of each international media on the cholera outbreak in Yemen; 2) the relative frequency and percentage of MSF mentions by the nine media vis-a-vis those of other organizations; 3) the general attitude of each of the nine media towards MSF’s communications messages and MSF as a humanitarian organisation. In summary, all data needed will be collected from official websites of identified media or from any information provided by the MSF communication department. A part of our research also involved grey

literature, for example, internal files and archives provided by the MSF communication department. Together with publications on the MSF website, that information can be used to compare with news reports on the same events published by the previously identified international media.

Furthermore, to better understand the MSF communication strategy, semi-structured interviews were conducted with MSF staff in various positions. Through open-ended questions and in-depth discussions with our interviewees, we have generated an understanding of MSF organizational structure, MSF internal communication mechanism and strategy and MSF field operations. Moreover, our interviewees shared with us their personal experience, opinions and feelings on MSF generally on communications and operations and especially about the mission in Yemen during the cholera crisis in 2017-2018.

As for the limitations, due to the language barrier, news reports in our database were all in English. However, those international media may show different attitudes when targeting readers speaking another language. Thus, our research results are based only on English publications and cannot represent extensively the overall strategy and attitude of a certain media. A comparison study on news reports about a topic as such in different languages from one media will be adequate for future research.

III. Findings/ Results

During the period of research, there were four MSF sections acting in Yemen. Each MSF operation team has the same composition, and each parable MSF team has a Head of Mission based in the capital Sanaa to manage all the mission's details and then report directly to their HQ. The research team constructs a figure to further elaborate the MSF's Communication Structure in Yemen (See Figure 1). The figure and the interviews highlighted the complications of the organizational structure and the internal validation process for publications caused by it.

a. Communication's Strategy in Yemen

At the timeframe of research (2017-2018), MSF staff applied three pillars of the general communication strategy with some adaptations to the Yemen conflict context; communication strategy between consists of three main pillars: visibility, acceptance, and leverage. First, in terms of visibility, MSF tried to provide information worldwide about what they have witnessed. Unlike international media, which can be highly restricted when conducting field reports, humanitarian actors and NGOs have the ability and the responsibility to communicate about Yemen's fragile situation and call for action. Second, the pillar of acceptance is essential for MSF in order to target the local populations. According to Etienne L'Hermitte, Press Officer, Geneva, Switzerland, local populations have been suspicious of humanitarian organizations' intentions and question their neutrality in past missions. Combined with the visibility, MSF prioritized the local audience based on its practical needs instead of focusing on attracting international media attention. Lastly, on "leverage," as a medical organization, MSF worked

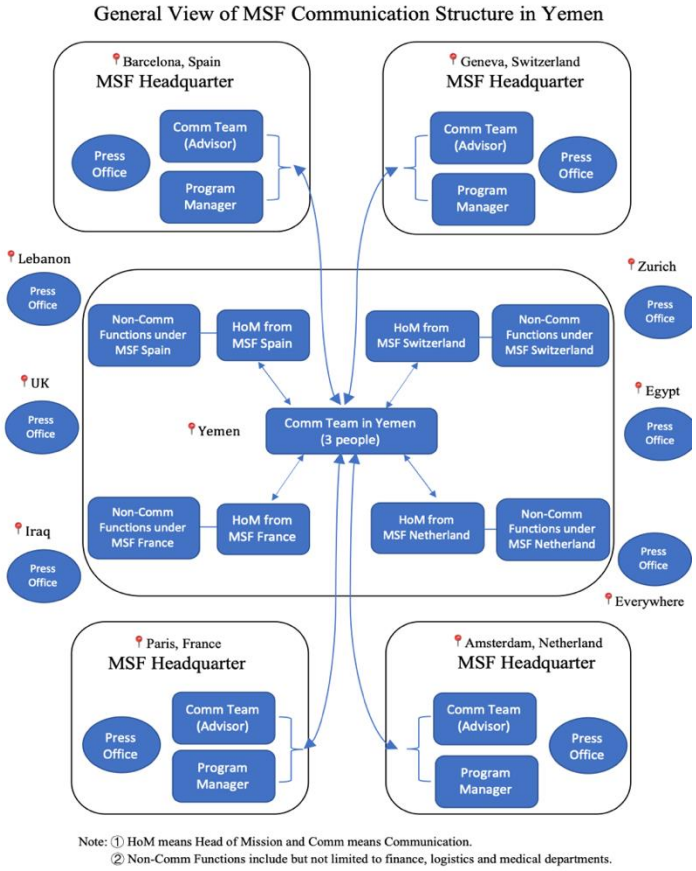


Figure 1: The Organizational Structure of MSF (Authors' compilation based on interviews

directly with the locals, which gives it the ability to deliver messages on what they were witnessing in the field and lobby on behalf of its patients. However, due to the Yemen conflict's complicated nature, MSF was cautious about communication word choices, considering possible impacts on the field mission. For example, accessibility has been a primary concern for the field team, which means working without significant obstacles, be it a visa or freedom of movement.

IV. Key Messages from MSF

a. *Temoignage*/ What MSF has seen and done

As a medical emergency organization, MSF has insisted on delivering messages based on what it has witnessed during its operation. Moreover, the communication department has adopted a multidimensional approach to elaborate on the far-ranging impacts primarily caused by the ongoing Yemeni non-international armed conflict and the blockade. For example, on 10 July 2017, the MSF posted an article with the title, *"Some families have to choose between taking a child to hospital or feeding the others"* (MSF, 2017 a), to reflect the dilemma difficulties local people have been suffering.

Besides, MSF website news reports on cholera in Yemen reported the developing tendency of the epidemic. In May and June 2017, MSF warned about the rapid spread and seriousness of cholera within a short period. Another part of MSF's communications focused on airstrikes since consistent Saudi coalition-led airstrikes have destroyed Yemen's vital infrastructures, including hospitals, public water systems, and many other civilian targets. The coalition has also enforced a blockade of critical resources, which resulted in shortages in medical supplies, fuel, and chlorine. Since the Saudi government has been controlling visas, humanitarian workers face obstacles in entering the country. MSF medical facilities were attacked several times by airstrikes, which led to casualties in its staff and patients. One airstrike also happened within our research period on MSF Abs Cholera Treatment Center (CTC). MSF has always been criticizing airstrikes against International Humanitarian Law (IHL).

Along with the above, the second category of MSF website publications introduces their efforts to tackle the cholera outbreak in their media. In response to the outbreak in 2017, MSF has endeavoured to control the negative impacts through setting up and expanding the capacity of the CTCs, treating units, and stabilization units to treat more patients across an increasing number of governorates. Moreover, MSF also provided support to health authorities through training staff and donations, particularly to the Ministry of Public Health and Population (MSF, 2017 e). Later in 2017, along with the decrease of cholera cases, MSF decided to reduce their cholera response by closing most of its CTCs and reducing their capacity. Meanwhile, as suspected diphtheria cases emerged, MSF opened a treatment unit in Nasser Hospital in Ibb city. Some other efforts included setting up an ambulance referral system to support patients' transfer, providing other medical support like health promotion activities and transportation for samples waiting for laboratory tests (MSF, 2017 d).

b. Calls

In general, the key messages that MSF intends to pass through its press release include several axes. First, MSF communications called for 'access,' which means the ability to work without significant obstacles, be it a visa or freedom of movement inside the country. We have found calls for smooth collaboration among authorities and healthcare workers, smooth transport of humanitarian supplies, opening operations in hard-to-reach areas, and ensuring medical workers' access to patients and vice versa.

Due to the conflict's complicated nature, 'safety and security' became another vital element of MSF's messages. MSF made great efforts in calling for the protection of non-military facilities and civilians that are not part of the conflict based on International Humanitarian Law (IHL). This kind of call also includes protecting hospitals, bridges, roads, residential areas, watering, and water treatment plants because they are essential for people's daily activities. However, MSF may adjust details of contents when delivering their messages based on the changing field reality and possible impacts on field missions.

During the cholera outbreak in 2017, MSF kept calling for higher awareness regarding the need to strengthen Yemen's health systems, educate people on preventing cholera transmission, and boost water sanitation efforts to halt the disease's spread. MSF field teams have also provided practical suggestions in its publications, including the disinfection of houses, the provision of clean water, and water sources' chlorination. However, to ensure the full and

steady implementation of those measures, calls for 'safety and security' should be fulfilled in the first place.

Facing the cholera outbreak, MSF wanted to use the media's power to push the issue higher on the global agenda with the hope of sharing with the world what they have witnessed and calling for more global assistance. Moreover, MSF also aimed to emphasize the importance of impartial application of humanitarian work. As one of our interviewees shared with us: "It's not only about increasing money but also about making sure the system is efficient, and the humanitarian system is efficient."

c. The Disagreement between MSF and Other Organizations

Based on our interviews with MSF staff and news reports from the nine media, we have noticed that there are some differences in defining key issues and judgment of the general situation between MSF and other organizations operating in Yemen. For example, in 2017, MSF had a counter-narrative with the UN on using the word "famine." Back then, the UN had identified Yemen as one of the four countries at high risk of famine and where famine could have been declared. However, MSF and their specialists who worked on the indicators believed that it was not accurate to say that there was a famine risk in Yemen. There were clear indicators that allowed them to announce that Yemen was facing "acute malnutrition," but not "famine," which, according to the MSF, is a strong word. MSF communication staff also emphasized that "having a risk of famine is not the same as being in a situation of famine." MSF recognized the limitation that they did lack access to some remaining untouched areas. However, MSF was careful of using the word "famine," especially for communication professionals. However, as the media always prefer "catchy lines," titles of articles were mostly about famine, which could mislead people without scientific expertise on the topic.

MSF advocated that it was crucial to avoid the confusion of diseases, which was likely to happen under that situation. In December 2017, the UN and ICRC issued a press release and communication, claiming that they were estimating the number of cholera cases at around 1 million based on a scientific approach. However, according to MSF, the number of cholera cases was around a few hundred thousand, but very far away from 1 million. MSF also provided a further nuanced description of their statement that along with diphtheria's recurrence, organizations should be careful about how to treat cholera when other diseases could lead to similar symptoms.

V. International Media Coverage of MSF and Other Organizations

Based on our database, we have created several figures to examine MSF’s influence on international media and its impacts vis-a-vis other organizations statistically in 2017-2018 regarding the cholera crisis.

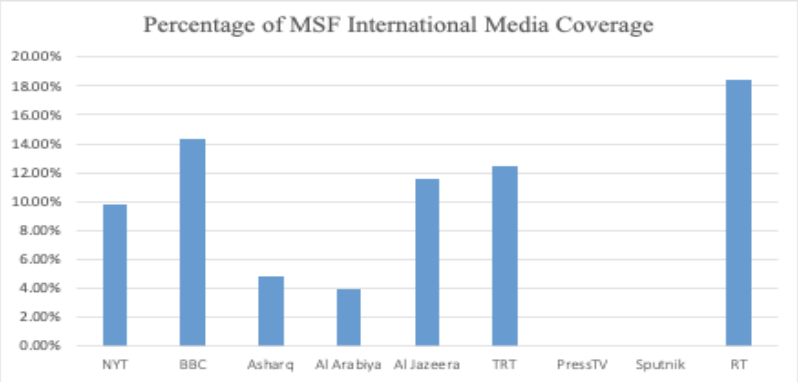
MSF, UN, WHO, ICRC Mentioned Times in International Media

	NYT	BBC	Asharq Al-Awsat	Al Arabiya	Al Jazeera	TRT	PressTV	Sputnik	RT	Total
MSF	4	4	4	1	6	3	0	0	7	29
UN	35	14	63	22	31	13	24	32	20	254
WHO	10	8	47	21	17	14	17	19	6	159
ICRC	5	4	10	6	10	7	8	8	10	68

MSF Mentioned Times in International Media

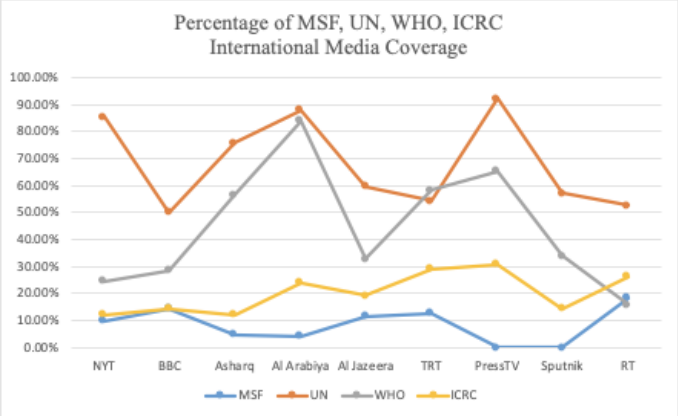
NYT	BBC	Asharq Al-Awsat	Al Arabiya	Al Jazeera	TRT	PressTV	Sputnik	RT	Total
4	4	4	1	6	3	0	0	7	29

Table1



Column Graph 1

Table 2



Line Graph 1

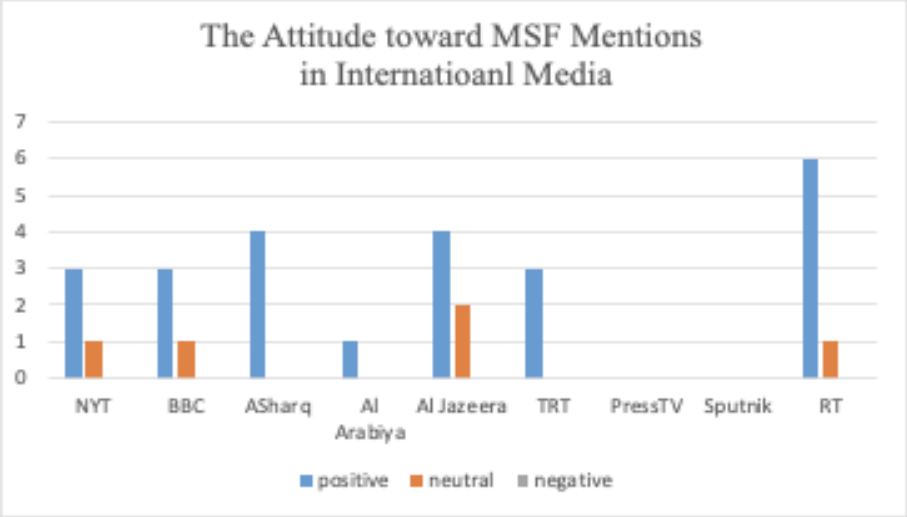
Table 1 shows the frequency of MSF appearance in news reports from the nine international media. Based on table 1, we generate Column Graph 1 to show MSF media coverage percentage in each media, which is a direct way to evaluate MSF communications products' visibility. Based on our observations from Table 1 and Column Graph 1, MSF was mentioned the most by Russia Today with the highest covering percentage of 18.42%. In contrast, MSF was not mentioned at all in Press TV and Sputnik's public communications, based on the information available on their website. However, we did not observe any other significant characteristics from the other international media, potentially because of the limited coverage of Yemen's cholera crisis from 2017 to 2018.

Based on Table 2 and Line Graph 1 (above), the nine media quoted the most from the UN and its agencies during 2017-2018 on Yemen's cholera crisis, except for TRT, which referred more to information provided by the World Health Organisation. Among the rest three organizations, MSF was mentioned the least. Moreover, it is crucial to observe that New York Times and the BBC mentioned MSF at a level almost equal to ICRC. Besides, Russia Today is the only of the nine international media referred to MSF more than WHO. Finally, Press TV and Sputnik do not mention MSF, and Al Arabiya mentions MSF to a minimal extent.

The Attitude towards MSF Mentions

Attitudes	Positive	Neutral	Negative	Total
Frequency	24	5	0	29

Table 3



Column Graph2

Among all the news reports that mentioned MSF, we divide them into three categories, positive, neutral, and negative, with the following definitions.

- **Positive mention**: International media picked MSF messages correctly, which means in news reports, there are statements referred to or cited from MSF – with no change in the wording, such as a quote from MSF websites, MSF staff members, or MSF press conferences. We also counted the inclusion of an MSF social media post in the article as a significant mention.
- **Neutral mention**: International Media mentioned MSF field presence and acknowledged its role as one among many other organizations. Neutral mentioning is usually a description of MSF actions and activities by international media, while a positive mentioning includes direct quotation MSF, be it calls or data.
- **Negative mention**: International media has intentionally misinterpreted or misquoted MSF messages. This category does not include unintentional mistakes.

Table 3 shows the frequency of the three kinds of MSF mentions in total. Column Graph 2 illustrates the frequency of positive, neutral, and negative mentions within each of the nine media. Based on these two figures, we could conclude that 24 positive mentions out of 29 reports mentioned MSF, and there is no single negative mention. Within all the media that have mentioned MSF, the positive mentions are more than the neutral mentions.

Based on the content analysis and the comparative study of the 24 news reports that mentioned MSF positively, we have identified that these reports' main topics are epidemic outbreak, the decline of cholera cases, and conflict and airstrikes. There were 11 reports out of the 24 reports that mentioned MSF under the cholera outbreak topic from May to August in 2017. We have also noticed that in May, six media published a cluster of eight news reports. In the rest of the reports, six focused on the Yemen civil war and airstrikes, however, only by Al Jazeera and RT; four discussed the decline of cholera cases around November in 2017. Two

reports were introducing the outbreak of diphtheria and one specific report about antibiotics and drug resistance.

Regarding the format of positively mention, 15 reports directly quote from MSF staff, including Heads of Mission in Yemen, MSF local coordinator, MSF medical coordinator, emergency coordinators, and communication officers. Five reports referred to MSF press releases or provided a website link to the MSF webpages. Nevertheless, RT, TRT, and Al Jazeera English also quoted from MSF Twitter accounts (MSF International and MSF Yemen) in 5 reports, and most of them put screenshots of the original tweets. To be more specific, RT is the one media in our research that referred to MSF the most, and most positively, which is unexpected but somehow understandable. As mentioned before, RT sometimes may be the only path left for some press officers to pass MSF calls. For example, RT is the only international media in our research reported keenly on airstrikes against MSF CTC in Yemen with direct quotes from MSF field staff and MSF twitter about the airstrike. Though we cannot rule out the political factor behind RT's behaviour, it remains intriguing that an allegedly "propaganda machine" became the only media that picked up and sent out MSF's call in this case.

There was no single negative mention of MSF in all the 29 reports we collected. However, key messages of "not a famine" and "overestimation of one million cases" that we gained from the interviews were missing in positive mentions. Even though the key messages were not fully conveyed in the international media, as MSF staff has pointed out, some media referred to MSF's actions in some cases as a contradiction to information provided by other international organizations. For example, one report titled "UN Agency Accused of Spreading False Information" from Asharq Al-Awsat introduced the contradiction of information between MSF and the WHO. MSF started to close CTCs when they spotted a decline in case numbers while the WHO insisted that cholera was still widespread (Asharq Al-Awsat, 2017). Another interesting point is, this media added a title that appears to be very strong, which gave a false impression that MSF is accusing the WHO even though MSF was only providing their findings without any intention to criticize. It serves as an example of the media trying to sneak in information though MSF's message and quote are entirely correct.

In total, the reference of Médecins sans Frontieres remains limited in comparison to the reference of other international organizations in the news reports from the nine international media. Those media see MSF as a medical organization. Thus, the organization's name is associated primarily with preventive measures towards cholera, the outbreak of diphtheria, and other concerns regarding Yemen's healthcare system's situation.

VI. Potential Reasons

a. MSF Conscious Choice

MSF needs to make sure that its publications serve its principle and field operations. MSF never chases after coverage unless there is a real operational reason why this coverage would be helpful. One of the press officers we interviewed, Rosie Slater (Press Officer MSF, London, UK), told us that MSF did try to get more coverage on the blockade in Yemen because MSF supplies could not get in.

Gemma Gillie, Head of Media for MSF London Office, further explained the rationale behind choosing among different media requests. She said that MSF accepts a media request because it asks for issues that MSF is willing to and feels safe and secure to discuss. Moreover,

she highlighted the need for MSF to feel that it has the authority to comment rather than just using the coverage as an opportunity to get its name out in the media.

State influence on the media is another concern. MSF is aware of possible misinterpretation that "authoritarian" type media can make by sneaking in extra information or magnifying some phrases and expressions. In the case of Yemen, MSF is working in an incredibly sensitive context. The country is controlled by various stakeholders, making MSF very careful in handling its messaging. Though MSF does work with major media outlets, MSF still wants to control communications for issues as sensitive as Yemen. Gemma also said: "Ultimately, we need to consider the risk paid potentially to our patients and our staff there." Based on her experience, it can be tricky to deal with Russia Today, "a state propaganda machine," in her words, on the Yemen crisis. "It is not even a veiled attempt at hiding their [political] objectives that they are trying to get across. So, we try to avoid them." Similar concerns also applied to Al Jazeera. Generally, within the context of Yemen's complicated situation, MSF has been cautious about working with any media, including certain Arabic media, just because of the dynamics of that region and who all the players are.

Moreover, according to a Communication Advisor of MSF, depending on the message that MSF planned to pass, sometimes MSF prefers to work more with local media than international ones. For example, during the cholera outbreak, it was a priority to communicate preventive measures through local media and raise awareness regarding the situation through medical messages and communications at a local level. The above comment is also related to the theory regarding communications in epidemic preparedness and management. After all, international organizations' role is to provide guidelines and up-to-date information and make their messages available and accessible.

Frederic Pelat, the former Head of Mission in Yemen, offered another explanation for why the reference of MSF remained limited in international media. According to him, MSF never joins press releases with the United Nations and its agencies or signs a statement with any other humanitarian organization, despite their close contact and the frequency of their meetings. The above are actions taken in order for MSF to keep the character of neutrality.

b. MSF Unintended Reasons

Other reasons that reflect the limited reference of MSF in international media might be unintended**.** One of the main reasons lies in structural challenges. Frederic Pelat mentioned MSF structural problems. As Mr. Pelat explained, cooperation depends on the personality of the heads of mission in the field, as he emphasizes, 'the best enemy of MSF is MSF itself.' Even though the competition is limited among different sections, especially in Yemen, the coordination remains tough, and different branches have to collaborate to show a common front.

At the same time, other unintended reasons might derive from the complexity of the press release procedure. The current Press Officer in London pointed out that too many publications from different HQs can cause difficulties in editing. "We always cut them down. Really get to the bare bones of things like the key asks and the key calls to action", Gemma told us in the interview. The bigger problem, however, is four separate sections are putting in calls to action. It becomes difficult to cut anything because press officers were not in the field and could not decide. Connected to the previous point**,** since MSF mission teams were in different locations,

they always have different messaging and opinions. Sometimes there were just so many points to say in one release that it failed to deliver points clear enough.

Moreover, a communication Advisor at MSF. explained that she is facing challenges' every minute of every day', due to the complexity of the internal complex processes and the intersectional dynamics and until each section reaches an agreement. A compromise is needed for simple cases such as a tweet, while editing and discussion are time demanding. In conclusion, the process is time-consuming. Meanwhile, according to Frederic Pelat, for an output to be strong and precise, the accessibility of reliable data also matters.

Another factor observed was the problem of visibility in the Middle East. The strategic role involves trying to speak out and focusing on "témoignage" to shred light to voices unheard. By explaining the three pillars of communication strategy: visibility, acceptance, and leverage communications, some interviewees highlighted that the visibility of MSF is relatively new in the Middle East. However, this does not pose a problem whenever the target audience is inside the community that MSF works. For example, patients in the MSF-supported hospital know about MSF's actions and trust the organization.

The comment of weak visibility in the Middle East is supplemented by an interviewee who pointed out that some Arab media such as Arabiya are not interested in English publications. Thus, she suggested that delivering more information in the Arabic language can facilitate more direct contact with the local populations and increase MSF visibility.

c. Media Preferences

According to our research, it is clear that most of the media show a particular political position, which explains the media are active on specific topics and silent on the others. For example, the Arabic and Russian media have shown a clear sign of picking sides within the Yemen civil war.

Most of our interviewees echoed that the media have their political agenda and may use it as a strategy. For example, one of them gave us an example that she would choose to contact the Russian media directly when airstrikes happened because they are more interested in the topic. However, Saudi media, such as the Al Arabiya, would mute the message. Moreover, according to Frederic Pelat, the Saudi media would scrutinize some of the media reports referring to their actions on the field because they were cautious about their image. The media theory could explain these examples regarding the relationship between the government and the press. Government influence on the media was strong in Arab and Russian media, whose communication would be more or less monitored by the government or the elites with censorship to shield people from what the government sees as harmful information and shape public opinion according to its will. (Sibert, Theodore, Wilbur, 1974)

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communication would be more or less monitored by the government or the elites with censorship to shield people from what the government sees as harmful information and shape public opinion according to its will. (Sibert, Theodore, Wilbur, 1974)

d. Other Reasons

Other reasons include the challenging situation in Yemen. First, the communication supporting capacity of the field communication team in Yemen was limited. Based on our interviewees, it is sometimes hard for the field communication team to send visual resources for MSF press releases due to a lack of necessary communication facilities and equipment like access to the Internet. There might also be a time lag in passing information due to technical issues. Another critical point was the access of journalists for media visits. MSF supports media visits to its facilities in the field after MSF comes to an agreement with the media about their interests in covering the field situation and concerns about safety and neutrality. Thus, MSF's role is essential to provide access to journalists to observe and collect resources. After they return to their base, these journalists will reproduce the reportage based on their experience and describe the MSF mission, thus raising visibility on the organization's actions. During 2017-2018, many international media approached MSF and asked to visit CTCs or MSF supporting hospitals in Yemen. However, it was almost impossible due to journalists' inability to gain permits of access in areas governed either by the Houthis or the Saudi-led coalition.

VII. Final Remarks

This research paper aimed to examine the impact of MSF communications during the cholera outbreak in Yemen by comparing key messages illustrated in MSF communication products, such as press releases and statements, and those highlighted by the nine selected international media. Combined with in-depth interviews with MSF communication staff, the above tools served as the basis for our research on MSF's communication structure, strategy, and key messages in general and in Yemen.

In our research, we focused extensively on international media coverage of MSF compared to other international organizations present in the field. Among the 373 news reports we have collected, 29 mentioned MSF. RT is the one that refers to MSF the most, seven times during the period from 2017-2018. However, TRT and Sputnik did not mention MSF at all in their reports on Yemen's cholera crisis during this period. Among the 29 reports, 24 reports cited MSF positively, and we did not find any distortion of MSF information in reports from the nine media in our research. The majority of them quoted medical data on the cholera outbreak and MSF calls against the humanitarian crisis. However, in some cases, other organizations offered information and data that appeared to be more attractive to international media. Eventually, MSF's opinions may not be able to gain equal weight. Many interviewees have also mentioned this point. Thus, all these implied that MSF's ability in shaping media narratives on the cholera outbreak in Yemen was limited.

We have identified some reasons that affect MSF's visibility in international media, including MSF's conscious choices, unintended difficulties, agenda-setting of international media and their preferences on specific topics, and some other reasons due to Yemen's situation. Meanwhile, we have to clarify that these categories are not an exhaustive catalogue. Other issues also arose during our research that deserves further study in the future, such as MSF's

internal stereotypes and bias towards some international media, in our case, towards Al Jazeera English and RT. Political influence comes not only from state governments but also from sponsors and interest groups. Free western media, for example, BBC and NYT in our research, though ideally are not influenced by government and other stakeholders, will also have their own "censorship" that makes them fall silent on specific issues and neglect different opinions. We need to bear in mind that the above proves that the strategic and/or economic value of a state determines the amount of media coverage of a conflict. Home countries of those nine international media all have different levels of interests involved in Yemen, especially the US and the UK that have substantial economic interests in arm-trade with the coalition. Following this logic, we should also be cautious when reading news from Western media. As a critical comment made by Minear and Weiss (1996) on the weakness of international media that the majority of them are still national in focus and invariably reflects domestic perspectives and values.

The above observations provide limited but adequate justifications on why MSF's visibility remains limited in specific circumstances. In our research, their reference in news reports of international media. However, it is essential to note that there are several challenges within the Communication Department that our interviewees raised. These challenges relate to communications format, which might make the contents unclear for the target audience and thus minimize the impact of the message. Other issues that could be improved include the limited usage of social media platforms. However, despite the challenges, our interviewees remain optimistic and willing to bring their vast enthusiasm and promise of hard work to ameliorate the Communication Department's functioning among the different HQ. This research illustrated the critical role of communications, public statements, and press releases as the tool to share the experience that MSF staff gains through temoignage and to become the voice of the most vulnerable and neglected populations. We strongly believe that when people's sufferings remain in silence, the aims of providing humanitarian aid remain unfulfilled.

Finally, we hope that this research will lead to a future reflection among the MSF staff in the Communications Department on current roadblocks in MSF communications compared to their capabilities.

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