

**Ebola, Public Health, and the WHO Website: Imperializing Language in Public Health  
Emergencies**

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## ABSTRACT

This study reviewed a portion of the WHO Ebola webpage content across three languages: English, French, and Spanish. In each webpage excerpt, technical information was organized according to a particular audience: health professionals, WHO partners, and the general public. Within each designated audience, I inventoried the available links in each language, coding them according to emergent themes relevant to each audience. From February 9 to March 16, 2015, I also monitored and catalogued news stories that appeared at the top of the webpage, noting type and frequency of change. While this study draws on the work by Varvas and McKenna (2012) and Frost (2012), in that it examines risk communication in (web) situ during a public health emergency, the goals of the study are more closely aligned with Ding (2009; 2013). That is, this study aims not only to describe the communication practices in each language, but to interrogate these practices within a framework of international public health and globalization.

## INTRODUCTION

In 2014, the Ebola Virus outbreak in West Africa exploded into American mainstream media. As news stations, publications, websites, etc. reported on the devastating disease, the presence of the World Health Organization (WHO) became a consistent thread throughout the disease event. Such a presence from the most visible public health organization in the world is not and should not be surprising. After all, the WHO was present during the SARS and H1N1 outbreaks, as well, either physically, economically, or by proxy in news articles. In the case of Ebola, the WHO has relied on their website to create and disseminate information about the disease to international audiences. Indeed, the organization has even created Ebola-specific web pages within the overall WHO website that organize particular technical information according to audience need. However, the design of this technical information, and the amount of information available, has not been standardized across languages, leaving English as the lingua franca of the WHO.

To investigate what kind of information the WHO publishes across languages, this paper provides a descriptive, in-depth content analysis of the organization's website in three languages: English, Spanish, and French. Ebola is used as a case study to investigate the amount and type of information available for audiences in each language. In particular, this study answers the following research questions: How does each version of the WHO website present the Ebola outbreak? How does the information design surrounding Ebola content change across languages? And, finally, what purpose(s) does each version of the Ebola webpage serve?

## **The Rhetorical Power of the WHO: News Media**

Type in the word “Ebola” in Google, and one of the first results will be from the WHO. Type in “Ebola” in Google News, and a significant amount of articles will reference the organization. For example, a May 5, 2015 article published in *The Economist* uses the WHO’s rhetorical authority frequently. All four of the graphics used in the article are sourced from the WHO. The article also uses the organization’s authority when reporting on outbreak management: “The World Health Organisation reports that each country now has enough treatment beds to be able to isolate and treat patients with Ebola...” (The Data Team, 2015, par. 2). In their update on Ebola, *International Business Times* also uses the WHO authority trope, stating, “The World Health Organization has announced that, if there are no new cases of Ebola in the country by Saturday, the outbreak, in Liberia at least will be officially over” (Caulderwood, 2015, par. 2). Catherine Phillips of *Newsweek* uses the organization for rhetorical authority, citing “official” figures the WHO released about Ebola infections and deaths in 2014.

Where exactly do these WHO snippets and statistics come from? The short answer: the WHO website. In particular, much of the information cited in the above articles comes from the Situation Reports that the WHO publishes on a weekly basis. These reports are made available on the Ebola-specific webpage, accessible to the public at large. There is, however, one problem with these reports: they are only available in English.

The WHO provides a statement on Multilingualism regarding their website. In this statement, the organization explains that all “essential” content is translated into each of the six official languages--Arabic, Mandarin, English, French, Spanish, and

Russian--but certain technical content is only translated based on audience need ("Statement," n.d.). The organization does not further clarify as to what content qualifies as "essential" nor do they clarify how, exactly, they determine audience need. Given the global presence of the WHO and its use in English-language media, it is not illogical to assume other news agencies speaking one of the other five official languages would also look to the organization for outbreak-specific information. In fact, Stegman (2015), writing for a Spanish publication, reported the end of the Liberian outbreak on May 5, but that information is not public in Spanish on the WHO website, and it is also not available in French. In order to report the end of the Liberian outbreak in a timely manner, Stegman would have to read English.

A delay in translation and news is not uncommon on the WHO website. For instance, the organization began a series of first-person accounts of the Ebola experience, titled "The Ebola Diaries." In March 2015, one such diary was published, called "All in a Day's Work." At that time, the diary was only available in English and French. As of May 2015, this entry has been translated into Spanish; however, the date the website assigns to the diary is not the date of Spanish-publication; rather, the website uses the original English publication date of March. Had they used the date the article was published in Spanish, there would have been a nearly three month gap in updated information available in that language. Comparatively, the English version of the Ebola webpage is updated weekly, usually more than once.

Given the WHO's media presence and rhetorical authority, their website serves as an ideal case study for studying technical and risk communication during a public health emergency. The timeliness of the Ebola outbreak allows the study to occur in situ. What

follows in this essay is an overview of the available literature on public health crises and technical communication, as well as the case study itself.

### **Technical Communication, Public Health Crises, and Multilingualism**

Issues relating to culture and international communication have been present in scholarly discussions for a significant period of time (Thrush, 1993; Bosley, 2001; Ulijn & St Amant, 2000; Boiarsky, 1995; Cardon, 2008; Hunslinger, 2006). Scholars also have begun interrogating ideas of intercultural communication as it applies to risk communication, public health emergencies, and disaster emergencies (Reynolds & Seeger, 2005; Glik, 2007; Smith, 2006). However, no studies that I am aware of have investigated issues relating to translation and risk communication during an international disease outbreak nor have studies focused primarily on an independent international organization's website as the primary source of delivery regarding risk communication. Despite the lack of research focusing on translation and international risk communication, significant research has been conducted into technical communication practices and disaster relief.

Frost (2012) investigates transcultural risk communication during the deepwater horizon disaster on Dauphin Island, arguing that the communication present during the disaster illustrates a particular, ironic interaction between localized and globalized communication. Using her case study, Frost contends that transcultural messages "slip and slide from local to global spaces and back again" (p. 64). As well, she urges technical communicators to study "risk communication in both time- and place-sensitive ways" in order to see the impact on risk communication (p. 64).

Varvas and McKenna (2013) also interrogate international communication practices during disaster relief. The authors explore the types of communication during three stages of disaster relief: pre-disaster preparation, response communication, and post-disaster evaluation. The authors then use these communication cycles to investigate the disaster relief for the Port-au-Prince disaster. The authors argue that part of the purpose of risk communication during a natural disaster is managing public relations, noting that “effective public relations communication efforts, via the Internet, assist to build community support and assists disaster decisions on emergency response efforts” (p. 46). While both Varvas and McKenna (2012) and Frost (2012) provide useful work for studying risk communication practices, their work is limited by language. While each disaster area would likely include information in multiple languages, these multilingual risk communication practices are not analyzed.

Ding (2009, 2013, & 2014), however, begins bridging issues of international communication, translation, and disease outbreak. Ding (2014) investigates quarantine practices in three countries--China, the U.S., and Canada. In particular, Ding (2014) examines public participation in communication practices surrounding quarantine. She concludes, “...health officials and medical workers should not only acknowledge the legitimacy of public participation in health crises but also provide careful support and guidance for such endeavors to better incorporate them into local or national public health campaigns” (p. 207). In other words, Ding argues that the public should not simply be a passive audience during public health crises; instead, they should be active participants in the shaping of information. Ding (2009) illustrates the active participation of the public in risk communication during the SARS epidemic in China. Here, the author contrasts the guerilla media communication practices with those of the

official Chinese government. From this contrast, Ding concludes, “as a rhetorical space less regulated by the dominant power, alternative media function as a physical and rhetorical space for the production and circulation of unauthorized, extra-institutional risk messages first by professionals with access to inside information and then by the larger public” (p. 347). Ding (2013) continues investigating disease outbreaks and risk communication; however, instead of focusing on risk communication practices, the author interrogates current theoretical frameworks surrounding these practices. She proposes a transnational risk communication framework, “which pays close attention to little-considered issues such as transnational connectivities, flexible citizens, grassroots interventions, cultural contexts and differences, and transcultural virtual communities for the study of global risk politics” (p. 145).

In what follows, I explore the online risk communication practices of the WHO website during the Ebola outbreak. In particular, I examine the kinds of information published on the website, the organization of that information, the implications of the information. While this study draws on the work by Varvas and McKenna (2012) and Frost (2012) in that it examines risk communication in (web) situ during a public health emergency, the goals of the study are more closely aligned with Ding’s work. That is, this study aims not only to describe the communication practices in each language, but to interrogate these practices within a framework of intercultural communication theory.

## **METHODS**

### *Observation Data*

To collect data, I used a similar approach to that of Lillqvist & Louhiala-Salminen (2014). In their study, the authors observed and collected data from the Facebook and



Website accounts of two Finnish food companies. Because these authors were chronicling user interaction on these spaced, I adopted their approach for observing and monitoring the online presence of the WHO. I chose the WHO as a web-based research site for two particular reasons: the public health authority of the WHO and the timeliness of the Ebola outbreak. I chose to document the English, French, and Spanish versions of the webpage because I have reading proficiency in these three languages. During a two week pilot study, I collected data from each version of the webpage and monitored frequency and type of changes to the pages. I then used this pilot study to modify the actual, six-week long observation of the Ebola webpages, which took place from February 9, 2015 to March 16, 2015.

During these six weeks, I established certain research parameters in order to maintain a feasible yet credible study. I used the data from the pilot study to narrow my observation field from the entire webpage in each language to three webpage elements that were common across languages:

1. The newstories published at the top of each webpage
2. The technical and general information organized according to audience, located underneath the newsstories
3. "The Ebola Diaries," first-person accounts of the Ebola experience.

During the study, I noted the frequency with which each version of the webpage changed, particularly in regard to the news published on the pages. I also used the time to inventory the available content designated by audience.

### *Data Analysis*

Once the observation period ended and the content inventory was complete, I began coding the links designated by audience. I used two separate, coding analyses during this stage of the research. In the first round of coding, I coded links according to their position on the page and their availability across languages. For instance, I looked for links in French and Spanish that translated to the “FAQ” link in English. I also noted the location of the English FAQ link in comparison with its French and/or Spanish counterpart.

After completing this first round of coding based on position and audience, I moved toward a round of inductive, thematic coding. I adopted principles of discourse analysis (Gee, 2005) into a textual analysis of the site. Because the research site did not engage in two-way communication, a pure approach to discourse analysis was ill-suited for analyzing the site content. However, the units of analysis within the method did prove useful in terms of setting consistent, maintainable boundaries on the webpage content. I used a thematic approach to code each available link published under a particular audience. A thematic approach allowed me to be specific with coding by using the links themselves to construct inductive categories instead of relying on a holistic analysis of each designated audience. This approach, as well, further allowed the analysis to remain general enough to keep each link as a concept that allowed for more crossover in translation.

During this stage of the research process, I coded the links available in each language for each audience according to purpose. I began with English, grouping links together according to thematic similarity. For example, links designating tips for hand washing and burials were grouped together; later, these links were categorized as

“safety” because of their focus on maintaining health. Once I coded English units according to similarities in themes, I moved to French, repeating the process. I then repeated the process once more for the links available in Spanish. During this coding process, I kept the data in its original language. For the purposes of this paper and its associated audience, I’ve provided the original language followed by an English translation.

### **An Unequal Repository: Multilingualism and Content Availability**

One of the key findings from this research was the difference in webpage design. In particular, two English versions of the Ebola webpage were found. English Version 1 (EV1) is an interactive, Americanized approach to design, while English Version 2 (EV2) retains the same web design as its multilingual counterpart. That is, apart from EV1, all language versions of the WHO Ebola webpage are designed the same, apart from the demands of their written text (i.e. Arabic and Mandarin require different placement in order to be read). The results of the website analysis will focus primarily on the standardized web design and the content (or lack thereof) available in English, French, and Spanish.

In the standard version of the Ebola webpage, the website begins with a slideshow of news stories. Following the running slide show, the webpage is divided into three columns of information, designated for three particular audiences: Health professionals, WHO partners, and the public. Each column contains particular headings with links to WHO documents that fit the designated audience. However, these links are not standardized across languages. In fact, no single link is provided in the same section across the Spanish, French, and EV2 Ebola webpages. On the contrary, frequently a link

would be present for the same audience in only two of the three languages. For instance, the link “Infection prevention and control” in the health professionals column was only found in the same column on the Spanish version (“Prevención y control de infecciones”). Most frequently, links designated for one audience in Spanish, would be placed in different audience columns in French and/or EV2. For instance, the link “Strategy and Coordination” underneath the health professionals column in EV2 was present in the “Partners” column in Spanish (“Liderazgo y coordinación”) and was not present in French.

Another important finding regarding the links to WHO documents was the amount of information provided. In all three languages, EV2 contained the most amount of documentation links. French contained the second most, while Spanish contained the least amount. As well, information was restricted for each audience. For health professionals, EV2 contained the most information, while Spanish contained the second most, and French the least amount of information. For WHO partners, the French and Spanish webpages contained the same amount (but different content) of information links while EV2 contained more. The most interesting finding, however, was the amount of information provided for the public. In the case of EV2, French, and Spanish, the amount of content was nearly equal. The only difference between the languages was that the Spanish page contained one less information link than EV2 and French. In the following section, I present findings from an analysis of the links in each audience-specific area of the webpages.

*For healthcare professionals:*

Underneath this heading, the WHO states the purpose of the information for the section. In French this byline can be translated as “Essential Resources,” while in Spanish the byline translates to, “General and Technical Information.” While it is a minimal translation difference, there is already a separate purpose listed between the two languages. The purpose of the French-listed information is considered essential for health professionals; in other words, this is information that the audience **MUST** know. In Spanish, however, the information purpose is split between general and technical; that is, while the information is geared for the health professional audience, it is not “essential” information.

In terms of the content provided in this section, four categories were derived from the available links: safety, outbreak management, medical information, and virus information. Each category received a corresponding definition. Safety was defined as information directly pertaining to promoting or maintaining personal safety and included information like hand washing and safe burial practices. Outbreak management consisted of information about the Ebola outbreak event and included such links as “Strategy and Coordination,” and “Communication and Social Mobilization.” As a category, medical information was applied to medically-informed links. Examples of a medical information published under this audience are, “Infection prevention and control,” and “Ebola virus in the semen of men.” Lastly, a final category developed from the available data, and it applied to all information specifically about the Ebola Virus as a disease, not event. Included in this category was information like FAQ and Fact Sheet links. Figure 1 represents the frequency of links available for each category, in each language.

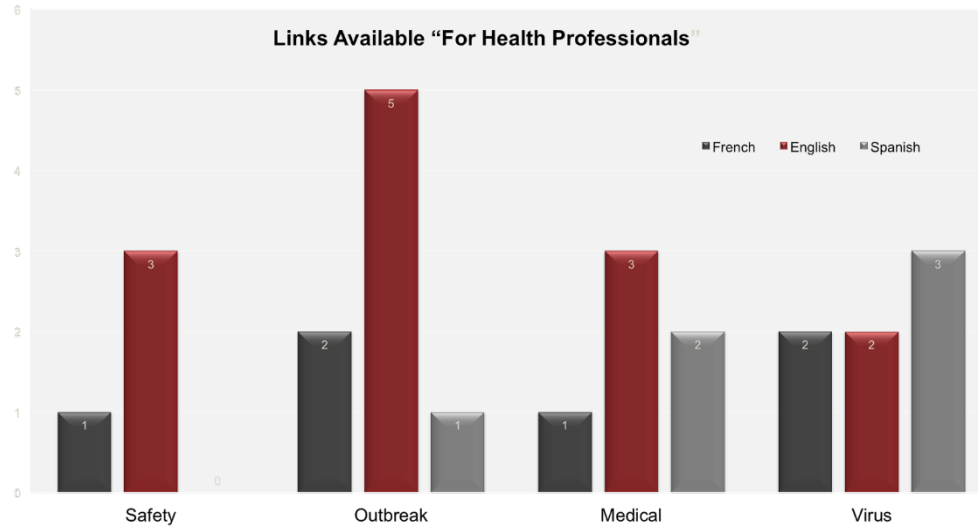


Figure 1: Links Available for Health Professionals

As the figure illustrates, EV2 contains more information for health professionals than its French and English counterparts. In terms of information available about the outbreak management, English contains nearly three times as many links as French and Spanish. The sole instance in which English has less information than either of its counterparts is information related to the virus itself; in this case, Spanish contains more information.

*For Partners:*

Similar to the webpage sectioned for health professionals, the For Partners column contains a statement of purpose for the information in each language. In Spanish, the purpose is presented as “Detener la transmisión del virus” (stopping the spread of the virus) while in French, the purpose is stated as “Endiguer la flambée d’Ebola” (stemming the Ebola outbreak). Here, the translations differ once more. In the case of Spanish, the name of the virus is not mentioned and the emphasis on the spreading of the disease, its continuation. In the case of the French translation, the

disease is mentioned by name and the purpose of the information is centered on the outbreak--the disease event.

Unlike the information presented for health professionals, the categories developed from the “for partners” information are not the same across languages. Three categories were developed for this section: WHO-specific response, Situation Management, and General Information. These three categories were present across English and French, but the WHO-specific response category did not appear in Spanish. Links that were classified within this category directly stated the WHO presence in response management. For instance, in English a WHO-specific response link was “WHO advisory group on EVD response,” while the French counterpart was titled, “Groupe consultatif de l’OMS sur l’action contre la maladie a virus Ebola.” Three of these links were present in English, with only one in French.

The second category developed from the links in the For Partners audience revolved around situation management. For instance, links like “One year inot the Ebola epidemic report,” or “Ebola response funding” were included within this category. Because these links were not specific to the WHO itself, they were give a new category. The number of links available in each language for this category were as follows: English-6, French-4, Spanish-5.

The category of general information emphasizes travel and is present across all three languages, with each language containing at least one link to a travel resource: “Travel advice?,” “Ebola: Recommendations pour les voyages (Ebola: travel recommendations),” and “Ebola y viajes (Ebola and travel).” As well, each language contains the same link: “How is the end of an Ebola outbreak decided and declared?”

One key difference exists across languages: French and Spanish contain a link for “maps” (in English) that is not present on EV2.

*For the public:*

Links posted under this audience were coded into two categories. Figure 2 displays the two categories (Public Safety and General Virus Information), along with their definitions, examples in English, and the number of links per category per language.

| Category                         | Definition  | Examples (in English)   | Number of Links                       |
|----------------------------------|---|---|---------------------------------------|
| <b>Public Safety</b>             | Information categorized as public safety frequently denotes action-oriented, safety, and/or audience-specific information.                              | How to protect yourself and your family<br>Advice for individuals in Ebola-affected countries | French: 4<br>English: 4<br>Spanish: 3 |
| <b>General virus information</b> | General virus information consists of scientific, technical, and/or general links about the Ebola virus itself, with no particular audience denotation. | Fact Sheet<br>Practical Ebola Messages  | French: 3<br>English: 3<br>Spanish: 3 |

Figure 2: Definition of categories for the public

Unlike the previous two audiences, links available for the public are relatively equal across languages, in terms of amount and type. Some differences, however, do exist.

A significant finding from the coding of the data available for the public was the reframing of links that were previously published underneath other audience titles. For example, the FAQ links available in each language for the public were also available for health professionals. In French, these links are reframed for the public by applying new descriptions;



## DISCUSSION

This study raises important questions regarding the WHO ethos and the organization's relationship to public health. Recalling the original WHO statement on multilingualism, all "essential" information should be translated across languages. Setting aside the issue of vague, undefined language, the Ebola webpage case study reveals that while the WHO has six official languages, only one of those languages is used as the primary method for delivering technical and safety information during a public health emergency. The results of this study raise doubts about the WHO's ethos as a multinational, multilingual organization. If six official languages are part of the organization, then why is only one language privileged? Further, if English is a primary method of delivery for public health information, what are the ethical implications for the most visible international public health organization and its role in gatekeeping safety information?

In addition to the ethos of the WHO, other, larger questions arise from this study. The most significant question comes from the WHO statement on multilingualism, in which the organization states that all "essential" content is translated. In the case of public health--and public health emergencies in particular--what exactly counts as essential information and who is responsible for making these decisions? If an organization is providing information for international health professionals, should not hand washing and burial practices be seen as essential information, especially for health workers whose first language may not be English? In the case of the general public, are the situation reports of a given outbreak or emergency be considered essential, particularly for news agencies reporting on the situation and healthcare administrators situ? And, while the WHO does publish information regarding their role in emergency

situations, isn't it essential for their ethos to be accessible to all of its official languages, especially in the case of funding and appropriation of funds?

One way to dismiss this study would be to say that English is a global language, so why does it matter if technical material is publicly available in other, less globalized languages? However logical, such a claim--and the results of this study--represent a significant problem in the way technical communicators discuss globalization. Yes, English remains a global language, largely because of previous colonization efforts by the United Kingdom and the United States. Although a significant portion of the world population does speak English, this study reveals a narrowed understanding of globalization. That is, "global" appears to equal the globalized presence of English. Such results and the accompanying mindset of "well, the world speaks English" represent lingering imperialist tethers, rarely explored in technical communication. If, however, technical communicators want to interrogate issues of globalization, ignoring the postcolonial realities of the English language will only serve to further a linguistic imperialism, in which the validity of other languages--and the cultures they are tied to--continue to be marginalized and "othered."

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