



**NAMIBIA UNIVERSITY
OF SCIENCE AND TECHNOLOGY**

FACULTY OF COMPUTING AND INFORMATICS

DEPARTMENT OF JOURNALISM AND MEDIA TECHNOLOGY

**AN EXAMINATION OF THE SAFETY AND WELFARE STRATEGIES OF PRINT JOURNALISTS REPORTING ON
COVID-19 IN NAMIBIA**

BY

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JOURNALISM AND MEDIA TECHNOLOGY AT NAMIBIA UNIVERSITY OF SCIENCE AND TECHNOLOGY**

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JANUARY 2025

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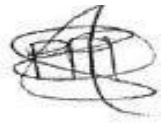
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ABSTRACT

The role of the media during a crisis cannot be over emphasised. During the outbreak of the Covid-19 pandemic, the media assumed a central position in sharing health information during this unprecedented time. In recognition of the significance of journalism, the Namibian government classified journalists as essential workers, allowing them to collaborate freely with healthcare workers during lockdowns. However, being frontline workers raised pertinent issues about the safety and welfare of journalists as they faced challenges, including job losses, mental health problems arising from poor psychosocial care and challenges of working in far-flung regions with meagre resources. Using a qualitative approach and the Protection Motivation Theory, this study examined the safety and welfare strategies employed by selected print journalists in Namibia while reporting on Covid-19. The study assessed selected Namibian print journalists' perception of their vulnerability to Covid-19, the safety and welfare strategies employed during the COVID-19 pandemic and the effectiveness of the safety and welfare strategies employed when reporting during the COVID-19 pandemic. *The Namibian*, *New Era* and *Namibian Sun* newspapers participated in the study. The study found that journalists felt vulnerable, and experienced emotional and psychological challenges while reporting on Covid-19. The study further observed that various safety and welfare strategies were used by journalists. These included, among others, self-talk and introspection, innovation, escapism, institutional support and adapting and adhering to established health protocols. The study found that while basic support for journalists was provided, mental health support was notably absent despite its crucial role in ensuring that journalists work in a conducive environment. The study concluded that the lack of proper and adequate institutional support for journalists, particularly covering COVID-19 pandemic, compromised both their physical and emotional safety. This undermined their ability to perform their professional duties effectively.

Keywords: Print Journalists, Newspapers, Safety, Welfare, Health, Protection, Covid-19.

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DEDICATION

This thesis is dedicated to journalists in the country, who endured hardship while on duty. I equally dedicate this to my late parents, Karipama Isaskar Karumendu and Edla Siririka as well as my cousin, Otniel Karitjindire Katuuu. They believed in education and instilled the same value in me.

These pillars, who once stood on this earth, had one thing in common: for as long as you have the means, never stop studying. This thesis is dedicated to them, for I still live by their guidance even in their absence.

CHAPTER ONE

INTRODUCTION

1.1 Introduction

This chapter presents a comprehensive introduction to the study. It provides the context for the research. The chapter describes the background of the study, outlines the problem statement and the primary research objectives. Furthermore, the chapter explores the significance and the delimitation of the study. The definitions of key terms are also provided in this chapter. Finally, the chapter details the outline for the thesis.

1.2 Background to the study

In early December 2019, an outbreak of coronavirus illness 2019 (COVID-19), caused by the novel severe acute respiratory syndrome, coronavirus 2 (SARS-CoV-2), was discovered in Wuhan City, Hubei Province, China (Harapan et al., 2020). By March 2020, the World Health Organisation declared the outbreak a public health emergency of international concern. The WHO (2024) reported over 774 million confirmed cases and more than 7 million deaths globally by March 2022. The pandemic caused extraordinary healthcare challenges worldwide (Osman et al., 2021).

To curb the spread of Covid-19, control measures were implemented by governments' worldwide (Harapan et al., 2020). Many countries declared a 'state of emergency', shut down borders and closed businesses. In Namibia, the late President Hage Geingob declared a State of Emergency on 17 March 2020 after COVID-19 was declared a pandemic. Thirty days after this action was adopted, all parades for uniformed troops, schools, religious groups, customs, marriages, funerals and big public gatherings (of no more than fifty people) were prohibited (United Nations, 2020). Furthermore, deaths and funerals related to COVID-19 were handled by the government, with psychosocial support provided to affected families (United Nations, 2020). In addition, the government required owners of public transport to provide hand sanitisers and masks to all their clients or passengers and ensure enforcement of laws on overloading in public transport (United Nations, 2020). Trade fairs, sports, events and demonstrations were postponed (United Nations, 2020) to ensure adherence to COVID-19 health protocols.

Namibia Fact Check (2020) noted that the first case of COVID-19 in Namibia was registered on 13 March 2020. The Romanian couple – a 35-year-old male and a 25-year-old female – arrived from Madrid, Spain, via Doha, Qatar. Though they were screened upon entry following set protocols, no suspected symptoms were identified at that time. Subsequently, the man developed a fever and a cough, and the woman developed a fever. Both later tested positive for the virus.

Whenever society encounters a crisis, the media has always been an important player because it can disseminate key information to the masses. This was not different in the case of the COVID-19 pandemic. Leask et al. (2010) state that the media hold a dynamically strong impact on public responses to health issues. People are starved for news – authentic news – during a crisis. The role of the media amid a crisis is to ease public communication by providing timely and correct information (Kennedy et al., 2022). The media, in general, has great potential to influence health-related behaviours through provision of relevant health information.

To highlight the role of the media in a crisis, the ministries of Health and Social Services as well as Information, Communication and Technology in Namibia coordinated COVID-19 daily briefs within the government information centre to discuss the impact of the health crisis as well as measures and regulations by the government on the pandemic. It was done to create awareness and foster resilience in the country. In this regard, the media served as a platform where these debates were conveyed to the Namibian public. The media succeeded in facilitating debates between society and the government. These debates were broadcast live on television and social media by various media houses.

The role of media during the COVID-19 pandemic demanded that the media and journalists be viewed as essential services (United Nations, 2020). Where press conferences were held, journalists were called to become part of the media conferences, attending in person to gather news or conduct interviews. Journalists were compelled to continue reporting, putting themselves at risk of contracting the disease or infecting those with whom they interacted. Journalists were not only at risk of contracting the disease, but the industry was affected by the pandemic. Arao (2022) demonstrates that print media was hit with low subscriptions and minimal advertising revenues due to the pandemic. In addition, Arao (2020) asserts that journalists had to master the art of staying current by embracing digital technology, consequently helping them to stay in touch with others on the internet and social media.

Quandt and Wahl-Jorgensen (2022) agree that the pandemic profoundly impacted all spheres of society, including journalism. Journalists lost their income or lost job opportunities, with some suffering from

stress and anxiety. According to Matsilele et al. (2022), journalists experienced stressful events like losing their jobs, getting sick from COVID-19 and dying. The same study emphasised that when traditional revenue streams dried up, newsrooms had to make the most of digital affordances for news gathering and distribution (Matsilele et al., 2022). Print media scaled back in its operations as a means of containing the spread of the virus (Matsilele et al., 2022).

Furthermore, the International Federation of Journalists conducted a global survey on the impact of the COVID-19 pandemic on field journalists. The report revealed that three out of four journalists faced restrictions in their work by official bodies, disruption of their movement or intimidation because they covered the COVID-19 pandemic (Matsilele et al., 2022). A case by Mare (2024) that ties in with the study is of two journalists, Jemima Beukes from Namibian Sun and Charmaine Ngatjiheue, who were dealt with harshly by security guards at the State House when they tried to enter a newly constructed COVID-19 facility. Recurring instances of public authorities trying to stop media outlets from reporting on significant events and matters of national importance eroded trust (between officials and journalists). Journalists protested attempts to injure them physically while they were doing their jobs and the use of COVID-19 regulations to violate their right to obtain information (Rasmeni, 2020).



Figure 1: Namibian Sun journalist Jemima Beukes being roughly handled by a State House law enforcer at an inauguration of a newly built COVID-19 facility in Windhoek, Namibia. Source: Namibian Sun

Since the start of the pandemic, occupational safety has been a major focus of unions, regional and global professional organisations' efforts. According to Dhyatmika (2021), individual and trade union

responsibilities for the safety of journalists and media workers have been discussed at different levels. To avert the epidemic, media workers and journalists created and disseminated occupational safety policies (Dhyatmika, 2021). In addition to health and psychological safety when covering pandemic news, the policies cover subjects like safe movement, safety at media institutions and safety during field coverage (Dhyatmika, 2021).

Despite the challenges discussed above regarding how journalism or journalists were affected by the pandemic, journalists continued reporting on the pandemic. They worked in ways akin to first responders, exposed and vulnerable to various challenges. While research has been conducted on how the media reported about COVID-19 (Mach et al., 2021) and the challenges that were encountered by the media during the pandemic, there is a paucity of research focused on the safety and welfare strategies of journalists who worked during the pandemic, especially within the Namibian context. It is on this basis that this study sought to examine the safety and welfare strategies of print journalists who reported on COVID-19 in Namibia. Specifically, the study sought to explore insights on journalist's perception and response to pandemic threats and the specific individual strategies they used. The study focused on three Namibia newspapers, namely *New Era*, *The Namibian* and *Namibian Sun* newspapers.

1.3 Namibian newspapers

This study focused only on three daily newspapers in the country: *New Era*, *The Namibian* and *Namibian Sun* newspapers. Print media in Namibia is divided between privately owned media houses, such as the *Namibian Sun* newspaper and *The Namibian*, as well as state-owned media houses, such as the New Era Publication Corporation, which publishes the *New Era* newspaper (Kashuupulwa, 2018). Despite their affiliations, all journalists have a single common task, which is to inform the public. However, there is arguably a difference in how news from state-owned media houses and privately owned media houses is reported. Moehler and Singh (2011) observed that due to their inability to rely on government advertising and tax subsidies, private media are more receptive to the public. They must generate revenue by being entertaining or relevant. For these reasons, the expectation from the onset is that there is more trust in the private media, compared to the public media (Kashuupulwa, 2018).

New Era is a state-sponsored newspaper in Namibia, which could be anticipated to be pro-government (Engelbrecht, 2014). The New Era Publication Corporation was established by the New Era Publication Corporation Act, Act No. 1 of 1992 to publish information services through the *New Era* newspaper in Namibia and conducting the Corporation's business according to generally acceptable business

principles (New Era, 2021). The *New Era* usually circulates 9 000 copies daily, increasing to about 11 000 on Fridays (New Era, 2021). The newspaper is printed in English, with sections in five local languages: Otjiherero, Oshiwambo, Damara>Nama, Silozi and Rukwangali (New Era, 2021).

The Namibian government saw the need to establish a newspaper that could establish credibility as opposed to *The Namibian*, which criticises government policies (Kivikuru, 2013). Having begun as a weekly newspaper, *New Era* later turned into a biweekly before it became a daily in 2004 (Rothe, 2011). Rothe (2011) adds that there has been direct interference by some government ministers in the newspaper, with ministers phoning the editorial desk over stories that are critical of them. Due to this, the newspaper is perceived as Swapo-friendly and is regularly accused of being pro-government. Sasman (2007) notes that it was on 11 July 1991 that the New Era Publications Corporation was introduced with much fanfare to mark a new beginning in the way news in the country would be covered and distributed.

As a government-funded publication, the daily has the responsibility of spreading the government's messages on various issues, including the COVID-19 pandemic situation, to the communities it caters to (New Era, 2021). The daily publishes in-depth, thoroughly researched news and feature stories on topics of national, regional and global relevance, including politics, socioeconomics, culture, government and development (New Era, 2021).

The Namibian is the most widely read newspaper in Namibia, and it has been a successful and self-sustaining newspaper (Larsen, 2007). Due to Trust ownership and management, all the profit is ploughed back into societal initiatives, such as the newspaper-sponsored yearly soccer tournaments and the weekly children's supplement published in *The Namibian* paper. To build its printing press, Free Press Printers, the newspaper, acting on behalf of the Free Press of Namibia (Pty) Ltd, signed a business contract with Trustco Group International in 2006. Since other media programmes (such those in South Africa) only allow comments on specific items, *The Namibian* newspaper was the first to provide an open discussion forum by SMS (Mushayavanhu, 2022). This was done with the intention of "opening" and challenging the previously extremely constrained and oppressive media environment in Namibia (formerly South West Africa). The newspaper was first supported by international donor agencies and European Union funding, including funds from IBIS (a Danish NGO) and SIDA (the Swedish International Development Agency). When Namibia attained complete independence in 1991, the aid from foreign donors ceased. *The Namibian* was forced to become self-sufficient as a result.

The *Namibian Sun* is a daily newspaper, read among 18 to 40-year-olds. It is well-known for having high-quality photos and stories as well as decent headlines. According to the publication's website, the paper started as a tabloid in 2007 and later became a daily paper in 2010, with a circulation of 30 000 prints. Being a privately-owned paper, the *Namibian Sun* had a significant role to play in sharing information regarding the COVID-19 pandemic (Mushayavanhu, 2022). The *Namibian Sun* is part of the Namibia Media Holdings group, together with *Die Republikein* and *Allgemeine Zeitung*. Together, the newspapers have a broad base in Namibia to reach out to readers who speak Afrikaans, German and English. Most of the content is translated from English to these languages to ensure extensive coverage.

During the COVID-19 pandemic, the *Namibian Sun* went out of its way to roll out all content in these local languages to expand its reach and ensure inclusivity. Financed in 2007, the *Namibian Sun* quickly became the third-largest daily newspaper in Namibia (NAB, 2020). Initially, it was published only on Tuesdays and Thursdays. However, it became a daily newspaper in 2010. Whereas *Allgemeine Zeitung* has a German-speaking audience and *Die Republikein* has an Afrikaans-speaking audience, *Namibian Sun* has an English-speaking audience. The newspaper has the same appearance and content as the South African Daily Sun, with the similar features and format in a bid to appeal to a large audience with comprehensible news and stories (Shihepo, 2021).

During the COVID-19 pandemic, print media was a significant channel through which pandemic information was shared in Namibia (Mushayavanhu, 2022). Even though there are various newspapers in Namibia, the three newspapers listed above are considered dominant due to their national reach and, what one can arguably refer to as, authoritative status (Mushayavanhu, 2022).

1.4 Problem Statement

During the pandemic, reporters put everything on the line to provide coverage of the pandemic, battle against disinformation, and report public health data and entertainment news in equal measure to help people get through the impact of the virus. Olushola (2020), during an interview with The Guardian, noted that journalism is always a dangerous venture in any society. Amidst difficulties, such as poor remuneration and little social security, reporters struggle with unprecedented adversity in seeking the truth.

While covering the pandemic, journalists (from a global perspective) experienced various challenges and threats. Price and Antonova (2024) have argued that journalists reporting on Covid-19 faced threats and challenges that ranged from, among others, pressure from governments to limit scope of reporting to

punitive legislation that risked their physical and psychological safety. Posetti et al. (2020) found that, in a study involving 1 400 journalists, 70% of journalists experienced psychological and emotional challenges as a result of covering the pandemic (cited in Price and Antonova (2024)). In addition to the already stated challenges, UNESCO (2020) observed that journalists reporting on Covid-19 faced abuses, detention and even death. This is supported by Philp (2020), who notes that, by the end of 2020, about 500 journalists had died. Bustamante-Granda et al. (2021) state that over 1 000 journalists were killed while covering COVID-19 in 73 different nations.

Figures provided by the Alliance of Independent Journalists (AJI), for instance, stated that some journalists in Indonesia contracted the virus while carrying out their duties. Another challenge experienced by journalists is the lack of protective equipment while in the field as well as limited support from their organisations. The challenges and threats mentioned above were also experienced by journalists in Namibia, some of whom experienced psychological and emotional problems while others were harassed by those in authority.

There was a pressing need for journalists, especially those in print media, to attend events to cover all the required details of their stories, thereby compromising their health. Welfare, health and well-being are inextricably linked. The WHO defines health as a state of full physical, mental and social well-being – and not mere absence of infirmity and disease but recognising the fact that the health status of the individual is correlated with their well-being (WHO, 2023). While the magnitude of the pandemic and its impact on journalists have been documented globally, limited research, if any, has been conducted to understand journalists' coping, safety and welfare strategies in the Namibian context given the challenges and threats faced by journalists. It is on this basis that this study sought to examine the safety and welfare strategies of print journalists who have been reporting on the pandemic. To explore this issue, the study focused on selected Namibian print media, namely *New Era*, *The Namibian* and *Namibian Sun* newspapers.

1.5 Objectives of the study

The main objective of the study was to examine the safety and welfare strategies of print media journalists covering COVID-19 in Namibia, with specific objectives as outlined below:

1.5.1 To assess selected Namibian journalists' perception of their vulnerability to Covid-19.

1.5.2 To explore the safety and welfare strategies employed by selected Namibian journalists when reporting during the COVID-19 pandemic.

1.5.3 To establish the effectiveness of the safety and welfare strategies employed by selected Namibian journalists when reporting during the COVID-19 pandemic.

1.6 Significance of the study

The study provides insights for media houses, editors and other stakeholders such as the government on how to handle or protect their employees who cover health crises. It is highly beneficial to the media, as it reveals how journalists and media organisations can be assisted in their efforts to work under difficult conditions. It adds to the existing knowledge base on the safety of journalists during a time of crisis. Furthermore, the study serves as a guide for future empirical research for students and academics interested in journalists' safety and welfare during crises.

1.7 Delimitations

The study was interested in the safety and welfare strategies of print journalists who have been reporting on COVID-19 in Namibia. The journalists were sampled from three major daily newspapers, namely *The Namibian*, *Namibian Sun* and *New Era* newspapers. This limits the study to sampled media outlets and practitioners who were specifically tasked with reporting COVID-19 news.

1.8 Definition of key terms

COVID-19 is caused by the SARS-CoV-2 virus, which is an infectious disease. COVID-19 can be spread from an infected person's mouth or nose in small liquid droplets when coughing, sneezing, talking, singing or breathing (WHO, 2023).

Print media refers to the delivery of news and events in terms of newspapers, also indicating how the media informed individuals of the Covid-19 pandemic. Print media involves the world of newspapers and magazines.

Welfare strategies include work well-being and health, which is a desirable situation for all employees and employers, enabling all to reach and maintain their full potential through the provision of mental, physical, emotional and psychological well-being (Drumm, 2014).

Safety workplace safety is defined in this study as a feature of work systems that reflects the (low) likelihood of physical harm to people, property or the environment while performing work – whether immediate or delayed (Slavtcheva-Petkova et al., 2023).

1.9 Thesis structure

The thesis consists of five chapters. A brief discussion of the contents of each chapter is presented below.

Chapter 1: This chapter provides the overall overview of the study. This includes the background of the study, problem statement, research objectives and scope of the study (delimitation). In addition, the chapter defines key terms that were used in this study.

Chapter 2: This chapter reviews literature on the subject under study. This includes an overview of epidemics and pandemics in the world and Africa, the role of communication during health crises, the role of journalists and the media during health crises, challenges in reporting health, the role of print media during health crises as well as challenges facing journalists during times of crisis. The chapter further discusses the Protection Motivation Theory as the theoretical framework of this study.

Chapter 3: This chapter discusses the research methodology that was employed in the study. The chapter describes the research paradigm, research design, research approach, population and sampling technique, data collection method and procedures, data analysis and trustworthiness. The chapter also discussed ethical considerations adhered to in this study.

Chapter 4: This chapter discusses and analyses the results of this study. The findings of the study are presented in line with the research objectives. The issues addressed in this chapter are Namibian journalists' perceptions of their vulnerability to COVID-19, the safety and well-being strategies employed while covering the COVID-19 pandemic and the effectiveness of the safety and well-being strategies employed while covering the COVID-19 pandemic.

Chapter 5: This chapter provides the conclusions and recommendations based on the findings of this study. The discussion concludes by providing recommendations on some parts of the topic that were not covered well enough by the study, owing to its scope, but which may be studied in depth by future scholars.

1.10 Conclusion

This chapter discussed how the COVID-19 pandemic impacted journalists in terms of safety and well-being during the pandemic. It provided a clear context to the study, highlighting the research problem, research objectives and the significance of the study. Chapter 2 presents literature reviewed on the topic under investigation.

CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1 Introduction

This chapter reviews literature on the history of epidemics and pandemics in Africa as well as the role of the media and journalists during health crises. The chapter also discusses the role of the print media during health crises as well as challenges facing journalists when reporting on health crises. A discussion on the theoretical framework guiding this study is also provided in this chapter.

2.2 History of epidemics and pandemics in Africa

Brabaw (2024) defines an epidemic as the outbreak of a disease in a specific geographical area. A pandemic, on the other hand, occurs when the disease affects multiple regions or the entire globe. Historically, there have been numerous pandemics, with COVID-19 pandemic being the most recent. Robinson (2022) defines a pandemic as an outbreak of a disease that spreads across countries or continents. It affects and kills more people than an epidemic. Madhav (2017) states that more than 100 outbreaks of all types of diseases occur throughout the world daily, extending throughout the world within 36 hours due to increased global travelling. Kohnert (2021) confirms that, in the past, infectious diseases have killed more people than anything else. Even as pandemic death rates declined globally by about 0.8 % per year throughout the 20th century, the rate of new infectious diseases, such as SARS, HIV and COVID-19, increased nearly a four-fold compared to the previous century (Kohnert, 2021).

Akinmolayan et al. (2024) state that the African continent has long suffered the horrific effects and impacts of pandemics as well as other infectious diseases and illnesses, such as yellow fever, malaria, cholera, smallpox, tuberculosis, chickenpox, HIV/AIDS, Ebola and COVID-19. These epidemics and pandemics posed gigantic challenges to the educational, healthcare, economic, social, political and many other systems of society. MacFarlane and Rocha (2020) assert that Africa's medical history is an important yet underappreciated subject. Unfortunately, historians have all too rarely devoted more than casual attention to issues of human health. In the majority of pre-colonial "trade and politics" histories, there is a certain mention of the disease, but the comment is usually directed toward the effect of tropical disease on Europeans rather than the effect of local and induced diseases on African populations (Nwashindu et al., 2023).

Amid Zika, COVID-19, Ebola and other public health catastrophes, WHO (2024) succinctly summarised the need for effective public health messaging to control disease outbreaks, preserve public confidence and guarantee adherence to health precautions. Public health communication is essential for the African continent, which is dealing with several public health emergencies and infectious disease outbreaks (WHO, 2024). Clear, succinct, easy-to-understand and widely disseminated information is essential regarding the epidemic, preventative strategies and health recommendations. Dubé et al. (2022) states that communication is essential during a pandemic to ensure that preventative behaviours are adopted and to stop the spread of illness.

During public health crises, such as the 2014 West African Ebola virus disease outbreak, the most critical role in saving the lives of those infected is left to the management and dissemination of scientific and medical information (Allgaier & Svalastog, 2015). Adera et al. (2022) concur that risk communication is among the key factors of outbreak management, entrenching the reality that the role of health communications also encompasses disease prevention, health protection, promotion, health care strategy, emergency response and quality as well as the health improvement of individuals in the community. In outbreak management, health communication interventions are a crucial factor in the management of any infectious disease. WHO (2024) has been consistent with its stern message about health communication, indicating that because of a shortage of information during public health emergencies, speculations and seeking information from less trustworthy sources culminate in misinformation and rumours. Therefore, having appropriate communication established solves this problem to some degree. Dealing with misinformation and rumours requires the strengthening of risk communication systems.

WHO (2023) reported that the Risk Communication and Community Engagement (RCCE) Pillar in Namibia aims to build on its experience during the COVID-19 pandemic as well as capacity on the core competencies of RCCE and content development for risk communication in any public health emergency. As a response to the COVID-19 pandemic, Namibia established this pillar under the incident management system and developed more than 1 million communication materials that were translated into local languages and Braille (WHO, 2023; Kaunatjike, 2023). More than 3 000 community health workers and volunteers were trained, with more than 80% of Namibia's population reached through mass media communication (Kaunatjike, 2023). This was a demonstration of the necessity of health communication during the period.

The United Nations (2020) affirms that health promotion and risk communication specialists of 48 African Union (AU) member states emphasised that early mobilisation of the community is at the heart of community ownership of public health intervention in the event of an outbreak of a disease. Therefore, strategies, let alone financial resources for emergency response, must be decentralised. Shikwambi (2023) carried out a study in which she examined the problems of communicating global pandemics as a national security threat with specific reference to the COVID-19 pandemic in Namibia. The study was prompted by the framing of the pandemic as a national security threat by the Namibian government's declaration of a state of emergency. Shikwambi (2023) noted that the COVID-19 pandemic worldwide was more than a public health emergency that found the world unprepared, and it indeed posed unprecedented threats to national and international security.

McClelland (2024) highlights that time is of the essence and critical during an outbreak. The global health financing mechanisms need to come up with solutions on how nations react quickly to health threats. McClelland (2024) reiterates that during the Democratic Republic of Congo's 2018 Ebola outbreak, there were no suspected cases reported, no alerts were issued for two months, and the disease spread so rapidly throughout the country. In contrast, the WHO (2022) in August 2022, stated that public health officials responded and investigated the outbreak within three days. Six weeks later, the outbreak had subsided, with just one confirmed case. This was due to the good response team effort supported by rapid release of emergency funds (Strasse, 2020).

2.3 The role of media and journalists during a health crisis

Maniou (2022), in a comparative review, outlined that the media and press have been examined to a notable degree to unravel their pivotal responsibility in the wake of health emergencies. Their significance goes beyond transmitting information. The media focuses on moulding public perception, influencing behaviour and holding policymakers accountable. The media assumes a critical role during a health emergency. During the health crisis, traditional platforms such as television and radio as well as the newer digital channels play a pivotal role in shaping public opinion and attitude. Hong et al. (2020) observe that mass media had an important role in disseminating health risk information during pandemics, such as HIV/AIDS, SARS and COVID-19. However, the way the public reacted to the media messages varied greatly in periods of crises. David and Sommerlad (2021) believes that in the case of the COVID-19 pandemic, media coverage was instrumental in determining public responses but also attracted critiques of sensationalism and disinformation. WHO (2024) asserts that the media can be a

central agent of public health in providing information that improves outcomes. Successful media support entails some of the following activities: presenting genuine and engaging stories of health impacts, providing platforms for public debate on health issues and ethical reporting during health emergencies as stated in study by Abbas and Chikwari (2023). The media should also be made accountable and leverage the internet to ensure maximum access by the public as highlighted by Scott (2024).

WHO (2024) emphasises the importance of civic journalism, where individuals report news from their communities, thereby increasing information flow at the local level. MacFarlane and Rocha (2020) opine that contextualised and precise information is vital to reducing health risks, particularly where zoonotic pathogens are concerned. They cite evidence of media providing information that not only informs but also educates individuals, which is crucial to the progress of health and biodiversity conservation (MacFarlane & Rocha, 2020). Akinmolayan et al. (2024) concurs with this view, highlighting the media's role in educating the public, particularly during an outbreak. Local radios are particularly useful in passing timely and useful information to rural areas. Prompt dissemination of information is very important in empowering people to take preventative measures and curb the spread of diseases. The role of media extends beyond that of disseminating information to pressuring governments to react timely to health emergencies. Beavers and Godek (2024) explored the Tanzanian media's coverage of outbreaks and found that cholera received much coverage by the media. Such extensive coverage not only educated the public but also pressured health authorities to react quickly to the outbreak (Beavers & Godek, 2024).

The capacity of the media to draw attention to pressing health problems can initiate state and institutional reactions, proving that the media holds power when it comes to health policy and crisis resolution (Bou-Karroum et al., 2017). Media campaigns are a vital instrument for shifting public health behaviour. Boss et al. (2015) report that mass media has been used to send specific health-risk messages. Boer and Seydel (1996) argue that the primary objective of media campaigns during disease outbreaks is to instil behaviours that lead to disease prevention and control. For example, during outbreaks, hand hygiene and vaccination campaigns seek to change public behaviour in a manner that reduces disease transmission (Boer & Seydel, 1996).

Successful media campaigns require concise and clear messages. Drumm (2014) argues that media pre-disaster education is central to effective warning systems. The same input was given by Mandala (2024),

who said the media assists the public at large in preparing to encounter potential disasters and quickly respond through accurate information as well as connecting individuals to emergency managers. Grant and Osanloo (2014) examined the media's imperative role before, during and after health calamities. They found that the manner in which the media delivers warnings and information can have lasting influences on public opinion and response. However, Scanlon (2023) notes that there is a need for monitoring media reports to avoid misinformation and misperceptions, which can exaggerate public fear and disrupt effective crisis management.

In Namibia, the media's function in reporting epidemics and pandemics has been criticised, particularly in the wake of COVID-19. Mushayavanhu (2022) critically analysed reporting of the pandemic by Namibian newspapers, contending that their practice can be improved to better serve public health. Mushayavanhu (2022) emphasises that, as much as media reporting on health crises is important, the Namibian media's reporting of the COVID-19 virus tended to increase instead of decreasing public fear. The study condemns some of the media outlets' exaggerations regarding the severity of the virus and its negative effects since these, though relevant, could have contributed to heightened public fears and disinformation (Mushayavanhu, 2022)

The above-mentioned study highlighted the need for media reporting that promotes not only public health but also economic resilience and social cohesion. The study further argues that the media can do better during crises (Mushayavanhu, 2022). It appeals to Namibian newspapers and other media to provide comprehensive coverage that is supportive of public health interventions and encourages community resilience (Jimene & Heller, 2025). This includes reporting on successful public health interventions, sharing information on coping strategies, and spreading messages that encourage individuals to take proactive steps to manage their health. Furthermore, Mushayavanhu (2022) asserts that there is a need for increased media literacy among the public and journalists. For journalists, this includes being sensitive to how their work affects public perception and avoiding sensationalism. For the public, media literacy means critically analysing information and understanding the significance of truthful, balanced reporting during crises (Mrisho & Dornic, 2023).

Mushayavanhu's (2022) criticism illustrates the need for change in Namibian media practices. Namibian media can help public health efforts and create a more resilient society by emphasising balanced, positive reporting and coverage of both the health and financial sides of emergencies. A study by Lee and Li (2021), focusing on the role of communication transparency and organisational trust among

publics, revealed that not only has public understanding and compliance increased, but the psychological and social impacts of pandemics and other disasters are minimised.

Joubert et al. (2022) discuss the ways media interactions empower scientists to influence the policy and public arenas. During periods of health crises, experts are critical in deciphering complex scientific information into concise messages (Joubert et al., 2022). They contribute to fighting disinformation and providing legitimate counsel to citizens. The roles of scientists in the media transcend crisis communication to ongoing public education and policy action. Researchers can shape public awareness and contribute to informed decision-making by interacting with the media as well as ensuring evidence-based health communication (Joubert et al., 2022).

The internet has transformed health communication by enabling faster information-sharing and an enhanced public engagement. Rompel and Scholz (2001) note that while traditional information sources such as newspapers are valuable, the internet provides unmatched speed and reach. Sitto et al. (2022) observe that digital media is especially convenient in times of crisis because it can quickly disseminate information and provide assistance. Heuva (2022) said the COVID-19 pandemic has accelerated Namibian media's digitalisation. Digitalisation has improved the media's reaction to health crises and mobilised the public more effectively. The convergence of online platforms and instruments has produced more dynamic and adaptive health communication programmes, reflecting the changing nature of media in a health crisis.

2.4 The place of print media during a health crisis

Print media has long served as the basis of public information and cultural propagation, with a unique position of shaping public response to health crises (Ausat, 2023). Eilders (2023) defines print media as a traditional type of mass media that does not rely on advanced technological infrastructure, compared to its electronic counterparts. Happer and Philo (2013) add that, because of its availability, print media has traditionally been the fundamental source of information and news that influences the public belief system and behaviour. According to Belair-Gagnon and Steinke (2020), print media has contributed significantly to the formation of democratic societies because it has served as a forum for educated public discourse. Kanchan and Gaidhane (2023) point out that print media's historical performance in disseminating vital health information dates to historic public health campaigns against polio, tuberculosis and AIDS. Kanchan and Gaidhane (2024) further highlight the effectiveness of print media in such situations, observing that, even with the advent of digital media, print media continues to be a

valuable means of healthcare communication. The physicality of newspapers and magazines allows for mass distribution and availability, particularly in regions with poor digital infrastructure.

Despite its long-term utility, print media has been severely tested during health emergencies. As Zhao et al. (2020) contend, print media's coverage of the COVID-19 pandemic was sensationalised. While dramatic language and metaphors are engaging, they can distort the gravity of health information, causing public confusion and anxiety (Zhao et al., 2020). Sensationalism may engage individuals, but it undermines the accuracy and consistency of health communication, which can lead to misinformation. These challenges to print media in times of health crises are further compounded by budget limitations. Mavhunga and Miheso (2021) illustrate how COVID-19 accentuated budget constraints for print media entities in Southern Africa, making many operate with limited budgets to keep them afloat. This strain underscores the vulnerably fragile spot that print media holds in a swiftly digitalising reality, where advertisement cash flow continues moving into online areas. The financial cost has an impact on the quantity and quality of reporting on health, as resources decline (Kumari & Choubey, 2024).

Despite the challenges mentioned above, print media continues to play an important role in the conveyance of health information. Waithaka (2013) contends that Kenya's print media is still dedicated to health journalism, with health news coverage in dailies and magazines. This consistent coverage ensures that health data reaches large groups of people, further validating the influence of print media in public health education. Murhekar et al. (2021) provides further evidence of the efficacy of print media by illustrating that most people perceive newspapers as a reliable source of COVID-19 data.

Good quality information and ethics are imperative in health coverage. To Arani et al. (2023), a significant proportion of news stories on the topic of health presented by the Iranian press were unsuitable for public scrutiny due to inferior quality. Their findings highlight the importance of rigorous editorial controls and journalist training as a component of the process for increasing the validity and accuracy of health reporting (Melnyk et al., 2023). This is consistent with the wider literature on the added value of quality in health reporting since this literature specifies that poor-quality information and poorly managed news coverage can have negative consequences for public health responses (Bernardi et al., 2023).

Synthesising these findings suggests that print media have a complex and dynamic role to play in health crises. Even though it is still a relevant tool for health information dissemination, it is faced with the hurdles of sensationalism, economic constraints and quality. Ikems (2020) believes that print media

success in health communication is gauged based on how well it overcomes challenges, maintaining accuracy and ethics in reporting. Future research should investigate ways to improve print media health reporting quality while respecting economic constraints. Besides, studies on the impact of digital media on the role of print media in health communication can provide valuable information on how the old and new media can cooperate in health emergencies.

2.5 Challenges faced by journalists during crises

Osmann and Feinstein (2021) reveal that journalists, who often work with medical experts, occupy a unique and emotional space when health crises emerge. Their work in these moments is not merely to report on swiftly changing events, but to overcome a series of barriers that diminish their ability to provide accurate and timely information (Kumar, 2024; Osmann & Feinstein, 2021). One of the most difficult challenges journalists face during health crises is dealing with political and governmental censorship (International Centre for Journalists, 2020). Access to reliable information can be severely restricted. Additionally, journalists encounter difficulties in reaching affected areas or limited cooperation from authorities (Mabillard & Sofia, 2019). This can hinder their ability to report comprehensively on unfolding events. De Arellano et al. (2017) discovered that during the Ebola outbreak, a significant number of journalists reported difficulties due to the government's reluctance to share information. This reluctance frequently leads to a lack of transparency, which can impede effective communication and public understanding. In South Africa, the implementation of regulations criminalising disinformation about COVID-19 created a restrictive environment for journalists (CPJ, 2020). Allsop et al. (2023) describe the experience of Paul Nthoba, a South African editor, who fled to Lesotho after being subjected to police violence while covering lockdown enforcement. Such political tensions not only limit journalistic freedom but also complicate the dissemination of critical health information.

Geographical and logistical barriers complicate reporting during health crises. De Arellano et al. (2017) highlight how remote and difficult-to-access areas present significant challenges for journalists, including limited access to critical resources and difficulty obtaining reliable information. Cullen (2014) highlights that the logistical issues encountered during the Ebola outbreak were compounded by the geographic isolation of affected areas, making reporting difficult and dangerous.

Cultural factors also influence how health crises are covered. Journalists must navigate a variety of cultural contexts, which can affect their ability to report accurately and sensitively. According to de Arellano et al. (2017), a lack of cultural understanding can result in misreporting or insensitivity, potentially exacerbating public perceptions of the crisis. This was detailed in Amevor (2020)'s study, which showed how journalists struggled to accurately portray the cultural practices of affected communities. Economic constraints also present another significant challenge for journalists covering health crises. Limited funding and resources can have a significant impact on the quality of reporting. De Arellano et al. (2017) emphasise that financial constraints limit journalists' ability to cover health crises in depth, adding that this problem is especially acute in low-resource settings, where economic constraints can limit access to essential tools and support. In addition, technological barriers, such as limited access to the Internet and digital resources, limit journalists' ability to report accurately. De Arellano et al. (2017) discuss how technological flaws can delay reporting and impede the dissemination of accurate information. Leask et al. (2010) amplify that a lack of technological infrastructure can further isolate journalists, limiting their ability to cover health crises in a timely fashion.

The personal toll on journalists during health crises is significant. The COVID-19 pandemic has highlighted the physical and psychological risks journalists face. According to the RSF (2024), journalists have played a critical role in debunking misinformation and providing life-saving coverage, despite facing significant health risks. Philp (2020) said that by 15 November 2020, at least 462 journalists from 56 countries died from COVID-19. This tragic loss highlights the devastating effects of health crises on media professionals. In addition to physical risks, journalists' mental health is a growing concern. Radcliffe (2021) notes that the pandemic has disrupted journalists' working practices and daily lives, emphasising the importance of mental health support. The report highlights the importance of prioritising journalists' mental health, as they face increased stress and trauma while dealing with health crises (Radcliffe, 2021)

Regional case studies provide additional insights into the various challenges journalists face during a crisis. In Brazil, political tensions have created hostile environments for journalists. Allsop et al. (2023) describe an incident where Brazilian president Jair Bolsonaro publicly chastised a reporter for questioning his pandemic response, highlighting broader issues of government hostility towards the media. This hostility complicates journalists' efforts to provide fair and accurate reporting.

Addressing these challenges necessitates a multifaceted strategy. Keshvari et al. (2018) advocate for comprehensive training programmes for health journalists, increased collaboration between health authorities and media organisations as well as increased funding and technological support. These measures are critical for increasing the effectiveness of health journalism and ensuring that the public receives accurate, timely information. The role of journalists during health crises is fraught with difficulties that affect both their professional practice and personal well-being. Understanding these challenges and implementing appropriate strategies will help media organisations better support journalists in their critical role of informing the public and effectively managing health crises.

2.6 Journalists' awareness of vulnerability when covering health crises

Vulnerability, according to Goodin (1985), arises when an individual's capacity to assist themselves has been depleted and the circumstance is out of their control. This idea draws attention to the real state that denotes fragility. Kalaloi et al. (2023) states that vulnerability is a broad concept that can apply to any problem, not simply the subject matter of a journalist. In this context, conversations about journalists' vulnerability must be connected to the economic and livelihood aspects of a journalist affected by the COVID-19 outbreak in 2020, as this condition reflects a person's inability to maintain his ideal condition as a human being, caused by factors that are beyond his reach (Kalaloi et al., 2023).

Based on Backholm and Idås (2024)'s study, a journalist covering a pandemic may experience potentially traumatic events if they witness upsetting scenes at a hospital or participate in upsetting details when questioning afflicted individuals. Mehra et al. (2020) state that reporters have been working nonstop before and during the lockdown, recording positive instances, migrant workers' hardships and the government's poor management of the health crisis. On the front lines, media professionals face pressure without adequate employer support or safety equipment.

Van Loenhout et al. (2018) note that media workers are subjected to unusual and difficult working conditions during disasters, frequently experiencing trauma as both victims and responders, just as medical and rescue personnel. They endure both personal and professional burdens as a result of working under emotional pressure or with safety concerns (Van Loenhout et al., 2018). Osmann et al.'s (2021) study on the psychological health of journalists during the pandemic revealed that many journalists reported feeling that the epidemic had made their professions more stressful, citing greater demand for stories (59%) and longer hours (58%) as reasons. Notably, most journalists (88%) had not had a virus test at the time of data collection. It is well recognised that ambiguity around a possible

infection can intensify preexisting emotions of anxiety and uneasiness (Osmann et al., 2021). Henke (2022) noted that war correspondents, photojournalists and daily press journalists have also reported experiencing flashbacks, insomnia and other signs of post-traumatic stress disorder (PTSD).

Osmann et al. (2021) state that journalists reporting the COVID-19 pandemic are working similarly to first responders, and the pandemic has created previously unheard-of healthcare issues. Osmann et al. (2021) further note that a sizable portion of journalists covering COVID-19 showed symptoms of despair and anxiety. The responsibilities of covering the epidemic can be too much for even seasoned reporters employed by big, well-funded media outlets (Osmann et al., 2021). In June 2020, when COVID-19 had an impact on every nation, a study conducted by the University of Toronto and the Reuters Institute for the Study of Journalism asked reporters various questions about their jobs, mental health and worries. According to responses, 26% of respondents have clinically significant anxiety compatible with the diagnosis of a generalised anxiety disorder, which includes symptoms like worry, feeling on edge, insomnia, poor concentration and fatigue (Selva & Feinstein, 2020). Most respondents (roughly 70%) experienced some degree of psychological distress (Selva & Feinstein, 2020).

Recurrent intrusive thoughts and memories of a traumatic COVID-19-related event, a desire to avoid recollections of the event and emotions of guilt, dread, wrath, terror and shame are among the significant symptoms of post-traumatic stress disorder that almost 11% of respondents expressed (Selva & Feinstein, 2020). Additionally, Tyson and Wild (2021) investigated possible safeguards against PTSD in journalists who frequently cover stories about human suffering. They discovered that rates of probable PTSD were particularly high in journalists who focused on or used numbing techniques in reaction to unpleasant trauma-related recollections (Tyson & Wild, 2021).

According to the International Federation of Journalists (IFJ) (2020), many journalists covering the COVID-19 epidemic had mental health issues daily, including stress, anxiety, depression, sleep and eating disorders as well as burnout. The coronavirus epidemic put media workers under unprecedented stress, putting their psychosocial well-being and the capacity of editors and unions to recognise and assist those with mental health issues to the test (IFJ, 2020). Posetti (2018) stated that, during the initial wave of COVID-19, many journalists found it difficult to manage the effect of the crisis on their mental, physical, personal and professional lives. The vulnerability of journalists in doing their jobs was threatened by the pandemic in various forms. Mare (2024) found that the Namibian newspaper, for instance, carried out massive retrenchments, and went on a drive to renegotiate the benefits of

employees in a bid to contain costs and streamline the business. Mare (2024) highlights that COVID-19 cut through reserves and revenue, forcing the newspaper to live on overdrafts. With voluntary retirement as an added survival strategy, the newspaper laid off up to 50% of its staff (Mare, 2024). Furthermore, Rimmert and O'Rourke (2024) note that the COVID-19 pandemic and its related national health restrictions (lockdowns, curfews, movement restrictions and business operational limits) resulted in a host of negative consequences for media houses, particularly in terms of revenue generation. They added that, notwithstanding the situations of individual print press outlets before the pandemic, the COVID-19 emergency undoubtedly accounted for a large proportion of lost print circulation (Rimmert & O'Rourke, 2024).

Mare (2024) suggests that *New Era's* weekday print run was cut from 24 000 to 11 000 copies, revealing that sales continued to worsen as the pandemic progressed (Rimmert & O'Rourke, 2024). Despite this flaw or obstacle in operations, the media continues to play a critical role in disseminating information in ways that are geared towards motivating people to make informed decisions. Parvin et al. (2020) highlight that Sue Llewellyn, a renowned British Broadcasting Corporation journalist, advised all media that "[a]t times of crisis, we turn to experts – but news outlets and social media must be careful about the information they share, particularly informally". Her statement highlights the important role played by the media in shaping news during this kind of health crisis.

Njanike and Mpofu (2024) skilfully compiled a range of African viewpoints on how citizens, government communicators, journalists and other stakeholders mediated the most recent global pandemics in *Global Pandemics in the Media: An African Perspective*. Their publication emphasises the political nature of (mis)representing, (mis)framing and illuminating events in a pandemic context, using the COVID-19 epidemic as a pivotal moment. According to a different study on the same subject by Matsilele et al. (2022), COVID-19 has directly impacted short- and long-term individual career experiences, possibilities and trajectories in addition to the news media ecosystem. The trio's investigation found that beyond the health pressures, journalists have had to deal with economic stress, which arose because of reduced earnings, job losses, unionisation and skeletal staff (Matsilele et al., 2022). Helpful resilience appraisals appeared to protect against re-experiencing symptoms following coverage of traumatic stories. They may be a useful target for future interventions to protect the mental health of journalists. These studies indicate that the safety and welfare strategies of journalists reporting on health crises or emergencies need to be carefully evaluated, as they experience various ordeals while on duty.

Since they mostly control what consumers hear, read and believe about food and health, Singh et al. (2011) contend that the media, medical practitioners and educators are the gatekeepers of today's health information. Providing the facts, putting them in context and assisting individuals in determining how the findings can impact their conduct and lives are all part of that role (Singh et al., 2011).

Schwitzer et al. (2005) object to the role of journalists as advocates although they affirm that journalists have a responsibility to investigate and report on citizens' needs as they struggle to understand and navigate the healthcare system. People need help in understanding how scientists and policymakers reach conclusions. In addition, health reporting involves "telling a story", but it also requires writers to take on additional responsibilities through the story cycle – finding the story, collecting information and writing it. When a public health situation or crisis surfaces, health writers and media can play a significant role in delivering important messages to the public. Health journalists can communicate to inform and educate people about ways to enhance healthy living in all sorts of countries – developed, developing or undeveloped. They are powerful enough to encourage a people-friendly health policy and/or health communication strategy through many measures, such as increasing the level of knowledge and awareness of a health issue among a certain audience influence and/or changing behaviour and attitudes towards a health issue (Schwitzer et al., 2005).

Phillip (2017) states that reporters covering the health emergencies faced various threats, including intimidation, censorship, detention, infection and unwitting transmission to family or sources. This means that amid the COVID-19 pandemic, journalists had the challenging task of gathering and distributing accurate information. It is for the above reason that Phillip (2017) strongly believes that media houses and owners should support journalists during the pandemic. Moreover, governments should recognise the importance of media, especially in fighting COVID-19 by sensitising the masses as well as aiding media and journalists to do their work. The well-being of journalists is a pressing issue. It enabled the publication of 'The Safety Guide for Journalists' by Reporters Without Borders to provide guidelines and practical advice for all health journalists.

The relationship between journalism and public health has mostly been explained based on journalistic roles and news framing. During the 2009 H1N1, for instance, Klemm et al. (2019) found that journalists shifted from being 'watchdogs' to 'cooperative' roles. This, by default, means that journalists were not spared from the wrath of COVID-19 (Mui, 2021), as journalists died. While the pandemic has had an outsized impact across the economic and health sectors, the effects on journalism have been profound.

Labelled “presstitutes” and “unpatriotic”, Chitra (2021) reported that journalists were dying with little to no support from their newsrooms or their government. Keshvari et al. (2021) backed those figures for journalists covering the coronavirus health crisis in India, with many of them succumbing to the disease, which they contracted while documenting what was occurring in the east-Asian nation. Biswas (2021) reported that, during the ongoing devastating second wave of the virus in April, an average of three journalists died every day due to COVID-19. That figure increased to four per day in May. Biswas (2021) further note that the second wave claimed the lives of several senior journalists and local reporters who worked in districts, towns and villages across different Indian states. Although Namibia has not reported a death of a journalist from the pandemic, it claimed the lives of nearly 2 000 journalists in 94 countries since March 2020, but the figure is “a low overall estimate” (Namibia Media Trust, 2020).

Based on the above literature, several themes were explored. Previous studies have thoroughly addressed and looked at the role of the media in covering pandemics, highlighting the importance of the media and how it is positioned when covering health crises. Literature has also addressed challenges faced by media professionals in covering a crisis and their vulnerability to these diseases. What has not received adequate attention is the comprehensive analysis on the overall safety and welfare strategies of print journalists reporting on health crises, particularly in the Namibian context. This study, therefore, aims to examine welfare strategies that were employed by print journalists to ensure they do not contract the virus.

2.7 Theoretical framework

A theoretical framework is the foundation of any study, providing a structure for understanding and analysing the research problem. It encapsulates the concepts and theories required for interpreting research data and reaching meaningful conclusions. This study is centred on the Protection Motivation Theory (PMT) to investigate the coping mechanisms and safety of journalists reporting on COVID-19 in Namibia. Journalists are not only responsible for providing accurate information but also ensuring their safety and that of the communities they serve. This theory assists in understanding the safety and welfare strategies employed by journalists during the pandemic.

2.7.1 Protection Motivation Theory

Ronald W. Rogers first created the Protection Motivation Theory (PMT) in 1975 to explain how fear appeals affect behaviours related to health, such as quitting smoking. The PMT is the risk assessment

model of an individual (Hedayati et al., 2023). This model explains how people cognitively perceive or evaluate any risk that could endanger their lives and how they adopt protective behaviours or measures.

According to several scholars, The PMT framework involves threat appraisal and coping appraisal as the multidimensional determinants of motivation and the overall behaviour of people. Sus (2023) further states that PMT suggests that individuals base their choices on two main considerations: threat appraisal, which is an assessment of the severity of a threat, one's own susceptibility to the threat, and how vulnerable they feel. The coping appraisal is one's assessment of their own ability to take action that will avert or overcome the perceived threat. Lahiri et al. (2021) state that threat appraisal is the combination of perceived severity (perceptions regarding the degree of harm) and perceived vulnerability (perception regarding the likelihood of experiencing harm) regarding the situation, excluding the perceived rewards (positive aspects) of the situation. White (2024) states that threat appraisal is a complex process that involves psychological and biological processes which determine an individual's physiological and psychological responses to a perceived threat.

On the other hand, Hedayati et al. (2023) state that coping appraisal evaluates if the belief that a recommended response, such as staying at home, wearing a mask or social distancing, can prevent the threat of infection. The belief is that coping appraisal assesses the ability to cope with a threatened risk and respond to it. The same authors believe that, to safeguard health and avert the threats and repercussions of COVID-19, the coping appraisal evaluates behavioural choices and responses focused on coping response efficacy as well as its performance to prevent threats. Response efficacy denotes some ideas on whether the recommended coping response will affect the reduction of threat for an individual.

Rad et al. (2021) state that the theory stipulates that self-motivation for self-defence is what drives people to adopt protective behaviours against threats. By elucidating the cognitive processes involved in danger and coping evaluations, fear is evaluated to forecast and promote protective behaviours. Like the purpose constructed in other social cognition theories, the protection motivation that emerges from these cognitive processes is thought to be the most direct predictor of engaging in health-protective behaviours (Balla et al., 2024). It states that people are more inclined to defend themselves and start, continue or stop self-protective behaviours when they believe that a threat would impact them (Fischer-Pressler et al., 2021).

Hedayati et al. (2023) strongly believe that people change their behaviour when they are motivated to do so by internal or external forces. Hence, the PMT is a useful theoretical framework to explain the pathways that lead people to change their behaviour. In the situations where behavioural change is required, this framework may be useful in describing how people take on preventive behaviours to follow public health recommendations in the COVID-19 crisis. The trio continue to state that, based on this theory, two cognitive processes (threat appraisal and coping appraisal) are triggered when a person encounters threatening health information.

2.7.2 Application of the PMT in research

Al-Rasheed (2020) studied protective behaviours against COVID-19 among people in Kuwait. The study found that the country had the lowest statistical mortality rate caused by COVID-19, with 2.534 dead cases by 25 February 2022. The PMT suggests that people of Kuwait perceived the COVID-19 morbidity risk at higher levels, intending to adjust their behaviour to prevent the spread of COVID-19.

Kautondokwa (2021) explored the effect of environmental uncertainty and phobia caused by the COVID-19 pandemic on rising cyber-attacks derived from PMT among students in a higher university of South Africa. Kautondokwa (2021) found that self-efficacy denotes individual belief in one's ability for coping with threat. If not managed, it could be hazardous for an organisation in terms of security because the individual is personally over-confident to reduce the threat. This may create a false sense of security in that person. PMT has been used to predict individuals' responses to disease prevention strategies, such as vaccination uptake by Milne (2000), who employed the theory to analyse how perceived severity, vulnerability and coping appraisals influenced adherence to health recommendations. Boss (2015) applied PMT to understand users' adoption of cybersecurity measures, examining how individuals' belief in the efficacy of cybersecurity protocols and their self-efficacy influenced compliance with digital safety practices.

Martin's (2007) study on natural disaster preparedness used the PMT to investigate public preparedness for natural disasters, such as hurricanes. The study focused on how threat and coping appraisals predicted the adoption of safety measures like evacuation plans. PMT has been widely used in a variety of contexts to understand and predict people's reactions to health threats. Case in point, the PMT has been used to study behaviours such as smoking cessation, cancer prevention and HIV/AIDS prevention (Rogers & Prentice-Dunn, 1997). In these contexts, researchers discovered that people who perceive a high level of threat and believe that they can take effective protective measures are more likely to

engage in preventive behaviour. For this study, PMT was used to investigate how journalists perceived and responded to threats posed by the Covid-19 pandemic. Journalists face unique challenges because they must report on the pandemic while also ensuring their safety. This study sought to identify the factors that influence journalists' coping mechanisms and overall sense of safety by analysing PMT components. These applications demonstrate PMT's versatility by explaining how people assess and respond to various types of threats.

2.7.3 Relevance of PMT to the study

The PMT is relevant to this study, as it provides a robust framework for understanding how journalists perceive and respond to the threats posed by the COVID-19 pandemic. This study uses PMT to assess journalists' threat appraisal, including the perceived severity and likelihood of contracting the virus while reporting. The study furthermore analyses coping appraisal, focusing on their confidence (self-efficacy) in adhering to safety protocols and the perceived effectiveness of protective measures, such as personal protective equipment (PPE). The PMT further highlights the factors that influence journalists' motivation to adopt safety behaviours while maintaining their professional responsibilities. PMT guides the identification of journalists' fears and coping strategies, contributing to interventions that enhance journalists' mental health and well-being by addressing their perceived risks and informing the development of safety protocols (Yellowbrick, 2023), tailored to journalists' unique challenges during crises.

2.7.4 Limitations of the theory

Like any other theory, the PMT has limitations: it overemphasises rational decision-making, as it assumes that individuals make decisions based solely on cognitive appraisals, potentially overlooking emotional and social factors. The PMT has a limited scope of the threat appraisal, as it may not fully capture complex, multifaceted threats, such as those experienced by journalists during a pandemic. In terms of cultural and contextual variability, the theory may not account for differences in risk perception and coping mechanisms across diverse cultural or professional contexts. Additionally, the theory neglects long-term behaviours, as it focuses primarily on immediate protective behaviours, rather than sustained actions over time (Raithel et al., 2021).

By integrating PMT, this study sheds light on the external threats and internal motivations influencing journalists' safety behaviours. While the PMT has limitations, its application here provides a foundation for creating evidence-based strategies that enhance journalists' resilience and safeguard their well-being during public health crises. The integration of the PMT provides a comprehensive framework for understanding journalists' coping mechanisms and safety during the COVID-19 pandemic. PMT provides insights into how journalists perceive and respond to pandemic threats.

2.8 Conclusion

This chapter reviewed literature on epidemics and pandemics in Africa. It also focused on the role of media and journalists during a health crisis, highlighting the role of print media during a health crisis as well as safety and welfare strategies in journalism. The Protection Motivation Theory, developed by Ronald W. Rogers in 1975, was discussed to show relevance to the study, looking at the lived experiences of print journalists reporting on Covid-19. Chapter three discusses the research methodology of this study.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter discusses the research methodology employed in this study. The chapter explains the research paradigm, design and approach. It further discusses the population for the study, sampling strategies as well as the approach to data collection and analysis. The chapter further deliberates on how trustworthiness was achieved as well as the ethical considerations.

3.2 Research paradigm, design and approach

A paradigm is a set of beliefs and assumptions that guide a researcher's approach to understanding and investigating phenomena. It influences method selection, data collection and interpretation (Kivunja & Kuyini, 2017). The major research paradigms are positivism, realism, critical theory and interpretivism. The positivist paradigm is based on the belief that reality is objective and can be measured with quantifiable data (Creswell & Creswell, 2018). Researchers working within this paradigm seek to test hypotheses, predict outcomes and establish generalisable findings using statistical analysis (Creswell & Creswell, 2018).

Positivism emphasises the distinction between the researcher and the subject of the study, ensuring that the research is objective and free of bias (Creswell & Creswell, 2018). In addition, realism, particularly critical realism, combines a belief in an objective reality with an acknowledgment that people's perception of that reality is influenced by social and cultural contexts (Bhaskar, 2013). Unlike positivism, realism recognises that the researcher's perspective and the study's context influence data interpretation.

The critical theory paradigm is concerned with comprehending and contesting power structures and social inequalities (Kincheloe & McLaren, 2005). It emphasises the role of ideology and culture in shaping the perception of reality, advocating for research that not only interprets but also aims to transform society (Kincheloe & McLaren, 2005). This paradigm frequently employs a more participatory approach where the researcher and participants work together to identify and challenge oppressive structures.

The paradigm that guides this study is interpretivism, which focuses on individuals' subjective meanings and experiences. This approach is based on the belief that reality is socially constructed, and understanding it necessitates interpreting the perspectives and experiences of those involved (Schwandt, 2007). Interpretivism allows for close interaction between the researcher and participants, resulting in a better understanding of journalists' perceptions on their safety and welfare strategies during the COVID-19 pandemic. Using interpretivism, this study sought to elucidate the nuances of journalists' experiences, capturing the complexities of their responses to pandemic challenges. The choice of interpretivism is consistent with the study's goal of delving into journalists' subjective experiences during the COVID-19 pandemic, thereby providing insights into their perceptions and coping strategies. Research philosophy influences the research design adopted for any study.

Kothari (2004) defines research design as the plan for conducting research, including the methods and procedures used to collect and analyse data. It is an essential component of any study because it ensures that the research questions are effectively addressed, and that the research objectives are achieved systematically and coherently (Kothari, 2004). A well-thought-out research design not only provides a clear path for the research process but also improves the reliability and validity of the findings. The study used a phenomenological research design to investigate and describe participants' lived experiences. Phenomenology seeks to understand how people make sense of their experiences and the essence of those experiences (Bliss, 2016; Ewajesu et al., 2021). This design is particularly effective at capturing detailed and nuanced insights into participants' perspectives, making it an excellent choice for investigating the subjective experiences of print journalists during the COVID-19 pandemic. The design provides a framework for delving deeply into the participants' lived experiences, resulting in a comprehensive understanding of how they dealt with challenges during the pandemic. The phenomenology research design supports the use of a qualitative research approach.

Hassan (2024) explains that a research approach is the overall strategy and methods used to collect and analyse data, which guides the entire research process. For this study, a qualitative approach was adopted to provide a comprehensive understanding of the strategies employed by journalists. This qualitative method is especially effective for delving into the depth and complexity of participants' experiences and understanding social phenomena through their perspectives (Busetto et al., 2020). Qualitative research is ideal for capturing the nuances of how people perceive and interpret their experiences. It employs methods such as in-depth interviews, focus groups and thematic analysis to provide a thorough and detailed examination of complex issues (Lim, 2024). This method is especially

useful in situations where the goal is to investigate the subjective experiences and meanings that people assign to their lives and actions.

Using the qualitative research approach, this study seeks to gain a better understanding of print journalists' safety and welfare strategies during the COVID-19 pandemic, providing insights into their personal experiences as well as the larger social context in which they operate. The qualitative method helps to gather information that can be analysed to understand the safety and welfare strategies of print journalists during the COVID-19 pandemic.

3.3 Population, sampling technique and procedure

Shukla (2020) defines a population as the entire group of individuals or elements that a researcher is interested in studying. It encompasses all potential subjects who meet specific criteria defined for the study. The population for this study was all journalists from three selected media outlets (*The Namibian*, *New Era* and *Namibian Sun* newspapers) who were reporting on COVID-19 during the pandemic. It is not always feasible to involve all elements of a population, thus sampling must be done. Sampling, according to Kabir (2016), is the process of selecting a representative sample from a population. Kenton (2024) notes that a sample is a smaller, manageable version of a larger group. It is a subset containing the characteristics of a larger population. To select a sample for this study, purposive sampling was used.

In purposive sampling, researchers try to have a sample representative, depending on their judgment or purpose, making the representation subjective (Nyimbili & Nyimbili, 2024). This study adopted the purposive sampling method to ensure a diverse representation of the three daily media houses and experience levels. As a result, 11 print journalists, who were directly involved in covering the COVID-19 pandemic, were selected, ensuring that the sample provided rich and relevant data. Given that 11 journalists from the three media outlets reporting on COVID-19 fully met the criteria (directly involved in covering the pandemic), they constituted the sample size of this study.

Table 1. Journalists' Profile

| Journalist ID | Age | Gender | Media organisation | Level of seniority | Experience covering health/Covid |
|----------------------|------------|---------------|---------------------------|---------------------------|--|
| J1 | 39 | Female | New Era | Senior journalist | Extensive (10 years, 2 for Covid-19) |
| J2 | 25 | Female | The Namibian | Junior journalist | Mid-level (3 years, 1 for Covid-19) |
| J3 | 28 | Female | The Namibian | Junior journalist | Limited (4 years, 2 for Covid-19) |
| J4 | 24 | Female | The Namibian | Junior journalist | Mid-level (4 years, 2 for Covid-19) |
| J5 | 35 | Female | Namibian Sun | Senior journalist | Limited (4 years, 1 year for Covid-19) |
| J6 | 37 | Male | New Era | Senior journalist | Extensive (10 years, 3 for Covid-19) |
| J7 | 23 | Female | The Namibian | Junior journalist | Mid-level (3 years, 1 for Covid-19) |
| J8 | 29 | Female | Namibian Sun | Junior journalist | Moderate (7 years, 3 years for Covid-19) |
| J9 | 37 | Male | Namibian Sun | Senior journalist | Mid-level (3 years, 1 year for Covid-19) |
| J10 | 38 | Female | New Era | Senior journalist | Extensive (12 years, 3 years for Covid-19) |
| J11 | 27 | Male | The Namibian | Junior | Mid-level (5 years, 2 |

| | | | | | |
|--|--|--|--|------------|---------------------|
| | | | | journalist | years for Covid-19) |
|--|--|--|--|------------|---------------------|

3.4 Data collection technique and procedure

The primary method of data collection for this study was an open-ended questionnaire. This method was chosen for its effectiveness in gathering rich, qualitative data, which provided a detailed understanding of the safety and welfare strategies employed by print journalists reporting on the COVID-19 pandemic. An open-ended questionnaire allowed participants to express their experiences, perceptions and strategies in their own words, offering deeper insights than closed-ended questions. This is supported by Purandare and Patil (2023:21), who argue that “open ended questionnaires help respondents to express their feelings, emotions, experiences and in-depth knowledge related to specific subjects...” Sutton (as cited in Purandare & Patil (2023:17) believes that “open-ended questions work as a basis for qualitative research”. Given (2008) extends that open-ended questions provide participants of research interviews or written surveys with the opportunity to choose the terms with which to construct their descriptions and highlight the topics that are meaningful to them.

The data collection procedure began with designing the open-ended questionnaire, with a section addressing demographic information of participants. The questionnaire was crafted to ensure clarity and relevance, with questions tailored to explore various aspects of journalists’ experiences during the pandemic. The questionnaire was distributed to the selected journalists via email and WhatsApp. Distribution was managed to ensure that all participants received the questionnaire promptly and had sufficient time to respond thoroughly. Participants were given clear instructions on how to complete and return the questionnaire. After the completion and return of the questionnaire, data were prepared for analysis. This preparation involved transcribing handwritten responses into a digital format to facilitate organisation and examination. The collected data were reviewed for completeness and accuracy before moving on to the analysis phase.

3.5 Data analysis technique and procedure

The study adopted an inductive thematic analysis to capture the complex and multifaceted nature of journalists’ experiences, providing valuable insights into their safety and welfare strategies, as well as their perceptions of vulnerability. The comprehensive analysis allowed the researcher to better understand the challenges journalists faced as well as the strategies they used to navigate the

pandemic. Naeem et al. (2023) outline that inductive thematic analysis generates themes directly from data, without imposing preconceived categories or theories. This approach is especially appropriate for exploratory research, where the goal is to let the data speak for itself, allowing themes to emerge naturally from participants' responses (Braun & Clarke, 2006). Thematic analysis in this study took several stages, such as familiarising oneself with the data, generating initial codes, searching for themes, reviewing themes as well as defining and naming themes. The stages are as follows:

Stage 1: Familiarising oneself with the data: It starts with the desire of researchers to become acquainted with their data. They can determine the kind (and quantity) of themes that could surface from the data with the aid of this step.

Stage 2: Generate initial codes: firstly, the transcripts were carefully re-read, and all the data were coded. Coding was done manually, which is efficient, by selecting phrases or sentences/paragraphs that were of interest.

Stage 3: Search for themes: Braun and Clarke (2006) suggest that this stage began with a long list of the codes that were identified across the data set. The main purpose of this phase was to find out the patterns and relationships between and across the entire data set (Chamberlain et al., 2015).

It was necessary to evaluate the codes, taking into account the ways in which they could be merged to create a broad subject (Braun & Clarke, 2006). This step's main emphasis was on the examination of themes at a higher level than codes. A theme reflects some degree of predictable response or meaning within the data set and highlights a significant aspect of the data about a research issue (Braun & Clarke, 2006). To provide possible themes for the study questions, it was crucial to think of those codes as the building blocks and combine related or different codes (Braun & Clarke, 2006).

Stage 4: Review themes: All the topics – master themes, primary themes and sub-themes – were purposefully gathered at this point to polish and present them in a methodical manner. Themes should be examined for exterior heterogeneity (differences between themes) and internal homogeneity (coherence and consistency) (Braun & Clarke, 2006).

Stage 5: Defining and naming themes: Identifying the essence of what each theme is about (as well as the themes overall) and determining what aspect of the data each theme captures" is the goal of this phase, which started with the intention of further defining and refining the themes (Braun & Clarke, 2006).

According to Braun and Clarke (2006), a subject should not be overly complex and varied. To arrange all of the themes into a logical and consistent account, the researcher referred to the collected data extracts for each theme. To make sure that there was no excessive overlap between the themes, much care was taken to determine the "story" that each theme told, how it related to the larger "story" that the researcher wanted to discuss and the research questions. The final stage of data analysis was to write up the findings, which included presenting the themes and supporting them with quotes from the participants. The purpose of the write-up is to provide a comprehensive overview of the data, highlighting key insights and patterns relevant to the research objectives (Creswell, 2014). Throughout the analysis, the researcher took a reflective approach, considering potential biases and ensuring data were interpreted from the participants' perspectives (Braun & Clarke, 2006). This method helped in the creation of a nuanced and accurate portrayal of journalists' experiences during the COVID-19 pandemic (Gibbs, 2007).

3.6 Trustworthiness

In qualitative research, the concepts of validity and reliability are frequently embedded within the larger construct of trustworthiness, which includes credibility, transferability, dependability and confirmability (Lincoln & Guba, 1985).

Credibility refers to the belief in the accuracy of the findings. In this study, credibility was established using methods such as member checking, which involved cross-checking findings with participants to ensure accuracy and relevance. This process helps to ensure that the researcher's interpretations accurately reflect the participants' experiences and perspectives (Shenton, 2004).

Transferability refers to the degree that the findings can be applied to other contexts. To improve transferability, detailed descriptions of the research context and participants were provided, allowing readers to assess the findings' applicability to other situations. While qualitative research does not aim for generalisability, detailed descriptions allow others to draw parallels with similar situations (Lincoln & Guba, 1985).

Dependability entails maintaining the consistency of the research process over time. To ensure dependability, the research design and procedures were meticulously documented, providing an audit trail that others can use to understand how the study was carried out. This thorough documentation improves the transparency and replicability of the study (Shenton, 2004).

3.7 Ethical considerations

Ethical considerations are an important part of the research process because they ensure that the study follows established ethical standards while protecting participants' rights and well-being. Ethical research practices contribute to the integrity of the study and foster trust between the researcher and participants (Israel & Hay, 2006). Informed consent is a fundamental ethical requirement for human research. It ensures that participants understand the purpose, procedures, risks and benefits of the study before agreeing to participate. Participants in this study were given detailed information about the objectives of the study as well as procedures and potential outcomes. They were allowed to ask questions and had to give their explicit consent before participating. This approach is consistent with ethical guidelines that emphasise the importance of obtaining voluntary and informed consent to respect participants' autonomy (Beauchamp & Childress, 2019).

Confidentiality is essential for protecting the privacy of research participants. It entails securely storing data and ensuring that any information gathered is used only for the purpose of the study and not disclosed to unauthorised parties. Data in this study were anonymised and securely stored to prevent unauthorised access. This practice is consistent with ethical research standards, which emphasise the importance of protecting participants' privacy and maintaining the confidentiality of personal information (Kaiser, 2009).

Anonymity improves participant privacy by preventing individuals from being identified based on the information provided. Participants in this study were given the option of remaining anonymous, which was especially important, given the sensitive nature of the topics covered. Anonymity promotes candid responses, further reducing the risk of harm or discomfort for participants (Wiles et al., 2008). In this study, participants were assigned a code (J1- J11) for identification.

3.8 Conclusion

This chapter discussed the interpretivist paradigm, which seeks to understand the subjective experiences and perspectives of the participants. The study employed the phenomenological research design, focusing on the lived experiences of print journalists during the COVID-19 pandemic. By using an open-ended questionnaire, the researcher gathered in-depth insights into the safety and welfare strategies employed by journalists in response to the challenges posed by the pandemic. The qualitative nature of this study allowed for a detailed exploration of how journalists perceived and managed their personal and professional safety, enabling the researcher to capture the complexities and nuances of

their experiences. A purposive sampling technique was employed to select a sample of 11 print journalists from three major media outlets: *The Namibian*, *New Era* and *Namibian Sun*. These journalists were directly involved in covering the COVID-19 pandemic, ensuring that the sample is both relevant and diverse. Data collected through this method were analysed thematically to identify key patterns, themes and insights that contribute to understanding how journalists navigated the complexities of reporting during a global health crisis. The ethical considerations were also highlighted in the chapter. The next chapter presents, analyses and discusses the research findings.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSIONS

4.1 Introduction

This chapter presents, analyses and discusses the findings of this study. The focus of the study was to examine the safety and welfare strategies of print journalists reporting on COVID-19 in Namibia. Three daily publications were selected, namely: *The Namibian*, *Namibian Sun* and *New Era* newspapers. The findings are presented according to themes that were generated from the objectives of the study, which were to: assess selected Namibian journalists' perception of their vulnerability to COVID-19; explore the safety and welfare strategies employed by selected Namibian journalists when reporting during the COVID-19 pandemic; and establish the effectiveness of the safety and welfare strategies employed by selected Namibian journalists when reporting during the COVID-19 pandemic. This chapter provides a deeper understanding of the personal and professional challenges faced by journalists during the pandemic, as well as the mechanisms they used to navigate their work under such unprecedented conditions. To maintain anonymity, interviewees are assigned codes, starting from J1 to J11.

4.2 Participant information

From the three print media houses selected for this study, a total of 11 participants were selected on the basis that they were tasked with covering COVID-19 for their publications. In terms of gender, three of the participants were male and eight were females. Four of these journalists were senior journalists, while seven were junior journalists. The age of the participants ranged from 22-39 years. The study determined that most of the participants were community or general reporters and had no experience in reporting on health matters. Others, by virtue of working in regions, had no choice but to cover health-related matters since the stories occurred in their areas of duty.

4.3 Findings and discussions

4.3.1 Namibian journalists' perceptions on their vulnerability to COVID-19

The study sought to understand journalists' perceptions on their vulnerability to COVID-19 when performing their duties. Rogers (1975) contends that the individuals' motivation to protect themselves from threats is determined by their cognitive appraisal of the threat and their perceived ability to deal

with it. It was imperative to first understand journalists' perceptions on their vulnerability during the pandemic before delving into safety and welfare strategies they employ. In this study, vulnerability focused on whether journalists could perceive the threat and how vulnerability manifests itself. Findings of this study reveal that journalists experienced fear as well as emotional and psychological stress while reporting on COVID-19.

4.3.2 Fear of the virus

Journalists reporting on Covid-19 experienced fear, which could have stemmed from a deep, multifaceted anxiety caused by the virus' rapid spread and high mortality rates. The narratives of the participants below support this notion:

"Yes, I was fearful because this disease killed a lot of people in a very short time" (J2).

"We were reporting on healthy people who died all of a sudden of Covid, and had that same fear that what if I am the next person to contract Covid and die?" (J5).

Other participants concurred, adding that being a frontline worker put them at risk:

"Definitely, I was fearful of the virus. At the time, the country experienced a death almost every day. Having to be in the media, we were one of the groups who were highly exposed by the pandemic, as we were out there." (J7).

"During the pandemic, there was no toolkit or guidelines on how to report and be on the frontline to produce journalist content. There was uncertainty, lack of information and long hours of work. Journalists were barely at home because updates were daily, newsrooms were working with a skeleton structure, and layoffs along with pay cuts were taking place all around. There was no job security or health safety. Mental health was another factor... journalists experienced a lack of oxygen as they walked through the hallways of hospitals. All of this was part of journalists being categorised as essential workers. That was the toughest thing to realise." (J4).

Another participant (J11) said:

"...I was very fearful of the pandemic to the point where I calculated my movements at home even around my mother and father..." (J11).

Participant J1 attributed fear of the virus to medical reasons and being far away from loved ones:

“For me, I was fearful mostly because of the fact that I had an underlying condition. And what aggravated the situation was the fact that I was far from my family. I was scared because of the fear of being alone and not going out and not seeing the outside world.” (J1).

Schwarz (2022) discusses how the rapid, often fatal spread of COVID-19, created a constant state of fear among journalists. The speed with which COVID-19 claimed lives contributed to a heightened sense of urgency and vulnerability among journalists. This fear was exacerbated by a lack of detailed information about the transmission of the virus and its long-term consequences. For some participants, fear among the participants was attributed to the environment and chaos that was visible during the Covid-19. J4 stated:

“At the start of March 2020, because my doctor treated the first two patients the same day, I had an appointment with him. The scare around the virus at the time got to me during the quarantine period, which later resulted in two negative tests. I overcame the fear part after the results, and this drove articles that dealt with dis- and misinformation related to the virus and pandemic.” (J4).

Seely (2019) argues that fear during health crises is often caused by the unknown and perceived severity of the threat. The scarcity of reliable information, combined with the unpredictable nature of the pandemic, heightened journalists' anxiety, creating a sense of insecurity that permeated both their professional and personal lives.

J3 said:

“I don't know if I was (fearful) but I actually wanted to report on COVID-19. ... I think I was more scared to die because I had a child. I tried to be careful, but I did also get COVID eventually. At least the illness wasn't as bad. I think even then I try to be as cautious as possible. But I don't think I did as much as I should.” (J3).

Göktaş (2023) highlights that the weight of reporting traumatic events can significantly amplify feelings of fear and distress. This is evident in the narratives above. Findings also revealed the emotional and psychological toll of reporting on Covid-19 among journalists as discussed in the next section.

4.3.3 Emotional impact and psychological toll

During the COVID-19 pandemic, journalists experienced significant emotional and psychological stress. Interviews revealed the considerable stress and trauma associated with reporting, which mirrors patterns observed in scholarly literature on the psychological effects of trauma reporting. The intense personal impact of reporting on severe suffering is evident in the participants' accounts:

“Having to hear the people's stories or just seeing people in the intensive care unit (ICU) because we went to visit the COVID facilities for stories as well. We saw the situation there and how people were struggling to breathe. You are a journalist, but then you are still human at the end of the day. I think one of the things at that time I saw was a three-year-old child in the ICU with all these machines on her. I literally just started crying, you know. So, I think just seeing that... people were really struggling and fighting for their lives. That was a tough thing to report on...” (J3).

This reaction highlights the acute emotional strain journalists experience when confronted with distressing situations. Göktaş (2023) states that direct emotional impact frequently causes immediate psychological distress, affecting journalists' overall well-being. Journalists witnessing extreme suffering may experience profound emotional disturbances (Göktaş, 2023). This view is also supported by Seely (2019), who emphasises that journalists covering conflict and disaster scenarios often encounter situations that elicit strong personal emotions, which aligns with J3's experience. J3's reaction is not an isolated incident, but part of a larger pattern observed in trauma reports. Secondary trauma, which occurs when journalists are exposed to the trauma of others, was particularly common among the participants. J2 described the difficulty in revisiting trauma through interviews:

“Death... having to get families to relive the trauma of losing their loved ones.” (J2).

“I was fortunate enough to have not lost any close person, but I heard the cries of families in the ICU corridors, who were broken from the news of losing their loved ones.” (J4).

This finding is consistent with Seely's (2019) discussion of vicarious trauma, which posits that repeated exposure to traumatic narratives can lead to similar psychological effects as direct trauma. Secondary trauma is crucial for understanding the full range of emotional effects on journalists. Seely (2019) suggests that secondary trauma can be as debilitating as direct trauma, with journalists internalising the

suffering they cover. Seely (2019) further notes that journalists covering traumatic events may experience secondary trauma, resulting in increased anxiety, stress and emotional fatigue.

This was experienced by J9:

“During the third wave, I remember a colleague of mine and I stumbled upon a corpse being taken from hospital into an ambulance for burial, and then it dawned on us that death was really around us. That was a hard pill to swallow.” (J9).

Another participant said:

“Having to attend to funeral undertakers who were overwhelmed by the rising number of burials. My colleague and I witnessed different families who were lined up to get coffins, which were running out fast.” (J7).

J11 echoed similar sentiments:

“The toughest thing that I experienced as a journalist was the different impact that I was witnessing. I reported on a bunch of businesses closing, and that further trickled down to people's livelihoods. I reported on people who couldn't feed their families. That did not only break my heart as a journalist but as a Namibian because I noticed and saw the suffering in people's eyes. The way they communicated and the types of conversation they had with me showed the severity that the pandemic has brought into their lives. As a journalist, I am used to announcing death but having to do it constantly became tough.” (J11).

The psychological burden of covering pandemic-related stories added an extra layer of stress. Journalists did not only deal with their own fears but also witnessed the distressing experiences of others. The emotional toll of reporting on death, illness and suffering has been extensively documented in literature. For frontline journalists, constant exposure to other people's suffering, including the impact on healthcare systems and personal stories of affected individuals, intensified their emotional strain. Findings also reflect the long-term mental health consequences of trauma reporting. J5 discussed the delayed effects of depression:

“It caught up with me when I was later diagnosed with depression in 2012, but when I got the diagnosis, it sorts of woke me up to take better care of myself.” (J5).

This delayed onset of depression is consistent with Göktaş' (2023) findings, which show that the psychological effects of trauma can manifest long after the initial exposure. Göktaş (2023) notes that accumulated stress and trauma often lead to chronic mental health issues, such as depression and burnout.

4.3.4 Personal safety and health concerns

Findings revealed that several aspects of health concerns among journalists, including risks associated with pre-existing health conditions, difficulties of balancing work as well as personal health and the unique challenges faced by vulnerable journalists. J1's concern about managing asthma during the pandemic reflects the heightened vulnerability of journalists with pre-existing health conditions:

“First of all, because I have an underlying condition, I have asthma, so one of the key issues for me was how to boost my immune system.” (J1).

J5's experience of being pregnant while managing a COVID-19 infection sheds light on the unique challenges faced by journalists in vulnerable situations:

“Yes, it was in 2021 when I tested positive. I was six months pregnant at the time... But with rest, medication and isolation, I was good to go.” (J5).

This concern highlights the increased risk faced by people with chronic health conditions. Quandt and Wahl-Jorgensen (2021) emphasise that journalists with pre-existing conditions were especially vulnerable during the pandemic, as their conditions made them more susceptible to serious outcomes if infected. Another concern raised by journalists is the need to balance personal and professional life. This challenge of balancing professional responsibilities with personal life is vividly illustrated by J3's experience:

“I was more scared to die because I have a child... I tried to be careful, but I did get COVID eventually.” (J3).

J3's fear of leaving a child behind adds personal stress to the already-difficult task of managing health risks while performing professional duties. Schwarz (2022) highlights how professional risks intersect with personal life, adding to the emotional strain experienced by journalists. J3's experience exemplifies the dual pressures of maintaining professional performance while protecting personal health. The examination of personal safety and health concerns during the COVID-19 pandemic reveals a nuanced understanding of the difficulties faced by journalists. The fear of COVID-19 among Namibian journalists

reflects a complex interplay of personal health concerns and emotional burdens from reporting traumatic events. This underscores the pandemic's profound impact on journalists, aligning with the larger literature on fear and psychological distress during health crises (Seely, 2019; Göktaş, 2023). These findings highlight the multifaceted nature of journalists' fears as well as the significant emotional and psychological costs of covering such a global crisis, thus revealing the vulnerability of journalists during a crisis.

4.4 Safety and welfare strategies employed during the COVID-19 pandemic

This section explores the safety and welfare strategies that Namibian journalists adopted to cope with the challenges of reporting during the COVID-19 pandemic. The findings are presented in themes identified from the interviews, supported by scholarly research on similar or contrasting strategies employed by journalists in other contexts.

4.4.1 Coping mechanisms during the pandemic

Journalists demonstrated a range of coping mechanisms during the pandemic – from personal reflection and professional innovation to destructive behaviours, such as alcohol consumption. The variation in coping strategies highlights the profound emotional toll that the pandemic had on these individuals and the need for diverse support systems. Personal reflection was used by some participants as a means of coping and surviving while reporting on the pandemic. This is evidenced in J1's narrative:

“To be honest with you, I would probably sound like a mad person to you, but I spoke a lot to myself... It was a whole emotional roller coaster.” (J1).

This form of self-talk and introspection reflects what several researchers, including Seely (2019), have identified as common coping strategies among journalists covering traumatic events. Seely (2019) suggests that internal dialogue allows journalists to process their experiences and emotions, though it is not always sufficient to mitigate long-term psychological effects. Other journalists sought professional resilience and innovation while reporting on the pandemic. One of the participants said:

“My biggest lesson was to stay on my toes and think outside of the box... My coping mechanism was working throughout the pandemic and producing 30-second videos of motivation and factual information.” (J4).

This proactive and creative approach reflects a coping strategy that focuses on productivity and professional contribution, a method that has been encouraged by many scholars to maintain

psychological well-being during crises. Göktaş (2023) emphasises the role of meaning-making activities, where individuals focus on producing work they perceive as socially valuable to help manage the emotional strain of crises. J4's focus on creating motivational videos illustrates how some journalists used their platforms to contribute positively to society during the pandemic. While other participants used self-reflection and innovation, some participants opted for escapism as a coping and surviving strategy. J3 2024 narrated:

"I drank a lot of alcohol, and I honestly believe COVID made me a drunkard... I learned that life is short... media houses need to be aware of that so they can properly take care of their journalists." (J3).

Resorting to alcohol as a coping mechanism aligns with findings by Smith et al. (2021), who reported increased substance use among journalists during crises. Their study on the emotional responses of journalists during the Ebola outbreak revealed that some journalists turned to alcohol or other substances to numb the psychological impact of constantly reporting on death and disease. However, Smith et al. (2021) note that these behaviours often exacerbate long-term mental health problems, suggesting the need for better mental health support systems in media organisations. Other journalists used a multi-pronged approach to help to deal with the pandemic and what it came with. Participants explained:

"My coping mechanisms included self-care, adaptability, seeking support from peers, staying informed, and, in some cases, seeking professional help." (J7).

"I have asthma, so one of the key issues for me was to boost my immune system, first and foremost. The second most important thing that I did is I sent my daughter home so that I could be all by myself at home, and I only interacted with a close friend. She was also alone with her daughter at home. So, basically, this is one of the measures I took. I also only went out to stories only when it's really, really needed and it was really critical. And obviously, I had my mask on completely and my sanitiser. It was a bit difficult to walk around with our own sanitiser because most of the shops that you enter didn't want you to use your own but due to sensitivity of asthma and allergies, it was really tough for me. People really didn't want me to use any sanitiser... those chemicals were harsh." (J1).

J1's approach is supported by Yu et al. (2020), who suggested that active coping and seeking social support are correlated with lower psychological distress. Akbar and Aisyawati (2021) state that problem-focused coping predicted lower psychological distress. Parveen (2021) highlights that how one copes with a crisis has important implications on well-being. Effective coping leads an individual to attain better life satisfaction.

4.4.2 Professional resilience and adaptation

The pandemic forced journalists to transform their reporting methods due to restrictions on movement and access to information. This adaptation was both a challenge and opportunity for professional growth.

J5 reflected on this by stating that:

"... but you soldiered on. Because you had a job to do... You shouldn't believe everything at face value, and people are still capable of compassion and kindness." (J5).

J5's perspective illustrates how journalists maintained a strong sense of duty during the pandemic even in the face of unprecedented challenges. This finding is supported by Quandt and Wahl-Jorgensen (2021), who found that journalists during the COVID-19 crisis demonstrated high levels of professional resilience, often motivated by their role as key information providers during a global health emergency. The emphasis on compassion and kindness aligns with research by Henke (2022), who found that moments of solidarity and public appreciation often provided emotional sustenance for frontline workers, including journalists. To further pinpoint the aspect of adaptation, J6 reflects on challenges posed by movement restrictions and how journalists had to opt for other ways to continue with their work:

"It was difficult getting my sources, and I had to be careful because we were literally under house arrest... But people needed information, and we had to go out and get it." (J6).

Another participant added:

"For the first time, we went against journalism norms and were told to stay away from our sources and establish other forms of communication." (J11).

The impact of these restrictions on journalistic practice is well documented by Schwarz (2022), who found that reporters in Germany faced similar difficulties in accessing sources and locations during lockdowns. These constraints forced many journalists to rely on virtual interviews and digital tools, which, while useful, could not fully replace on-the-ground reporting. The reliance on remote reporting methods also limited journalists' ability to observe events firsthand, which is a critical component of their work. Berkowitz (2000) notes that crisis journalism provides a place for discourses regarding changing the journalistic paradigm. J6's experience aligns with these findings, emphasising the practical and ethical challenges journalists faced when trying to deliver accurate, timely information under restrictive conditions. Journalists had to adapt to the prevailing situation and relied on health protocols established by health organisations:

"We had to always wear our masks. I did that, sanitised and constantly washed my hands and tried to keep a safe distance. But I think that's the basics that we knew mostly, like, just wear gloves, if necessary. I think sanitising and masks were my biggest measures, but I would constantly wash my hands. I just kept basically to the basics." (J3).

"I was advised not to be out in the public so much, so my movement was restricted for my own safety." (J6).

"I applied the standard rules that were communicated at that time. That included the mandatory wearing of masks, sanitisation of hands, reporting yourself whenever you start presenting COVID-19 symptoms and staying away from crowded places. That guided me in protecting myself from contracting the virus and how I was able to protect myself individually, my family and colleagues. I limited interactions as well." (J9).

"I stuck to the main rules, which were, keeping a distance, wearing a mask and sanitising. When I came home from covering a story, like in 2020, there was an incident where hundreds of people applied for a cleaning job, and the destruction of Twaloloka. When I came home, I would take off all the clothes and shoes, and head straight for the shower." (J5).

The approaches and lived experiences of journalists are supported by Perreault (2021), who stated that journalists, like any individual, must adapt to crises and disasters. The COVID-19 communication ecology

provided an environment where new norms and practices can be established, tried out and perhaps innovated (Perreault, 2021).

4.4.3 Personal resilience and perception of risk

Personal resilience and varying perceptions of risk emerged as key themes among journalists navigating the COVID-19 pandemic. These themes show how individual differences in coping mechanisms and risk assessment shaped journalists' experiences during the crisis.

J6's asserted:

"For me, I wasn't really scared. All I knew was that I needed to be careful. I felt that even if I contracted COVID-19, I was strong enough to overcome it." (J6).

This highlights a perspective rooted in personal resilience and self-efficacy. This confidence reflects a proactive approach to personal health management, with J6's resilience serving as a buffer against the fear and stress associated with the pandemic. This perspective aligns with Göktaş (2023), who emphasises that personal resilience has a significant impact on an individual's ability to manage stress and anxiety during crises. Belief in one's ability to overcome adversity can reduce feelings of helplessness and fear, influencing how journalists manage the demands of their jobs during a health crisis.

J8's experience highlights another aspect of personal risk perception:

"I did feel scared as to how I would get treatment if I contracted it... The second time, it was bad. I was admitted to Medipark." (J8).

J8 indicates a high level of fear and concern about accessing medical care. This fear was exacerbated by the severity of symptoms and the logistical challenges faced by the healthcare system during the pandemic. J8's experience reflects the uncertainty and anxiety that many people felt regarding the adequacy and accessibility of medical resources. This theme underscores how severe illness and the difficulties of navigating healthcare systems can amplify fears, especially in high-risk scenarios.

Journalists' personal resilience and perceptions of risk varied, reflecting a broader range of responses to the pandemic. Quandt and Wahl-Jorgensen (2021) note that individual differences in risk perception and resilience resulted in diverse coping strategies. Some journalists, like J6, dealt with their fear by relying

on their own strength and control, while others, like J8, experienced heightened anxiety due to health concerns and treatment uncertainties. This variability demonstrates how personal and situational factors influence journalists' risk perceptions and their ability to navigate the challenges of the pandemic.

Moreover, the varying experiences of journalists highlight the importance of external factors in shaping personal resilience and risk perception. For example, J8's concern about treatment availability reflects larger systemic issues in access to healthcare, which can significantly impact individuals' perceptions of risk and responses to health crises. This finding aligns with Quandt and Wahl-Jorgensen's (2021) discussion of how external factors, such as healthcare infrastructure, affect personal risk assessments and coping mechanisms. The themes of personal resilience and risk perception highlight the complex interplay between individual coping strategies and the external challenges posed by the pandemic. The findings illustrate how different levels of confidence and fear influenced journalists' experiences and responses, mirroring broader patterns seen in crisis situations (Göktaş, 2023; Quandt & Wahl-Jorgensen, 2021). These differences highlight the importance of tailored support strategies that account for individual resilience and risk perceptions to better address journalists' diverse needs during health crises.

4.4.4 Institutional support and safety measures

Journalists described their experiences regarding the kind of support they received from their employers during the pandemic:

“They got us body suits (personal protective equipment) but we didn’t get boots. We were constantly given gloves and hand sanitisers. Every time you go to HR, they always provide those necessities, so it was reasonable. They always made sure that hand sanitisers were available. I hate the fact that just because COVID-19 is under control, these types of health control measures are no longer in place at my office.” (J3).

“At the two institutions, they provided some personal protective equipment, namely masks, disposable suits, gloves and sanitisers at the office. Social distancing was informed but the offices did not have procedures in place for when a colleague tested positive for Covid-19.” (J4).

“To prevent the spread of the pandemic, The Namibian implemented a schedule of only a few people working from the office, while others worked from home. At some point, when the situation in the country worsened, we all worked from home. We all adhered to the regulations but also ensured to provide the news with concrete and factual news.” (J7).

“I remember my employer fumigating the building, but that was only once. They also occasionally provided face masks. We also received hand sanitisers, and I also remember that, at times, colleagues were not feeling well. The company would pay for tests to be done.” (J9).

“As a journalist, my employer had to decongest the newsroom to make sure that there weren’t a lot of people in a particular space. We were given hand sanitisers. Taking in immune boosters was also a thing. I think for the first time in my life, I made several trips to the pharmacy to boost my system.” (J10).

“They did what they could. I remember frustration from my colleagues and I about testing. Testing was covered by the employer but towards the maturing of the pandemic, all of a sudden, these costs were incurred by the employee. By adopting that, many people did not get tested.” (J11).

“What I could remember getting from my employer is sanitisers. That is basically it. What I can remember is the constant engagement with my editor and CEO. At least they constantly checked on me.” (J1).

The actions taken by media outlets to safeguard their journalists during the COVID-19 outbreak are not well documented in literature. Boateng and Buatsi (2022) point out that several news firms in Ghana implemented strict work policies during the height of the pandemic, which allowed them to remain financially viable. Most newsrooms implemented remote reporting, shift systems or workforce reductions. Similar circumstances occurred in the Philippines, where a statewide lockdown caused many journalists to operate from home (Bernadas & Ilagan, 2020). The innovative use of social media and mobile journalism apps for news reporting and collecting was an intriguing result of this distant work (Bollo, 2020; Tantuco, 2020). For live interviews, most Ghanaian media outlets and journalists turned to social media platforms like WhatsApp and Zoom.

4.4.5 Importance of mental health and well-being support

Many journalists emphasised the need for better mental health support from their employers. The emotional toll of covering the pandemic, coupled with inadequate institutional support, left some journalists feeling overwhelmed. J3 noted:

“Media houses need to be aware of that so they can properly take care of their journalists.”

J6 said:

“I don’t think my employer did enough to protect me. They were not in constant touch to find out how I am doing.”

J6 reflected the general view that employers must do more to protect journalists’ mental health.

Seely (2019) argued that psychological support is essential for journalists covering traumatic events, advocating for the integration of mental health services into newsroom policies. However, research by Henke (2022) shows that mental health resources are often underutilised or unavailable in many media organisations, especially in regions with less-developed mental health infrastructure. J3’s experience reinforces the need for a systemic change in how media houses address the psychological well-being of their employees.

4.5 Effectiveness of the safety and welfare strategies

By reflecting on the effectiveness of safety and welfare strategies used by journalists reporting on COVID-19, it is evident that narratives of the participants focused solely on mechanisms provided by their media organisations. Participants had mixed views on the effectiveness of safety mechanisms provided by their organisations. Some participants believed support was adequate:

“I believe they did what they could, and they tried to rely upon new information as it came through. The mere fact that a lockdown was declared in this country indicates that steps were immediately taken, including certain journalists being sent home to work from there” (J10).

“I think they provided what they thought was sufficient for a journalist on the forefront” (J4).

“At the height of the pandemic, we were given basic medical supplies just to protect ourselves... They took it a notch further by setting up a testing centre at work” (J9).

“I think my employer tried their best. They provided hand sanitisers, face masks and whatnot. I just wish these items were still available right now even after COVID” (J3).

While these participants believe the support was adequate, other participants believe that their organisations did not provide sufficient support. Participants said:

“No. Apart from the daily reminders on email, the employer did not send us protective gear for those of us operating in regions to protect ourselves from contracting the virus when we go out in the field. Journalists were part of the essential service providers, so although there was a national lockdown, we still had to go out and get the news and observe if people were complying with the directive put in place” (J8).

“Sending someone sanitisers and masks is not enough. With anthrax, I can say the same. They were not hands-on. They wanted me to go out there and take pictures and all.”

“Not really. At some point, most of our employees had contracted the virus, as we were still in the same workspace. It would have been better if they had prolonged the working-from-home strategy and provided all the necessary tools for all the journalists because some came to the office due to the lack of it” (J7).

“I would say yes and no because we were navigating in unknown waters. Secondly, I think, looking at what other companies did for the employees. I think they could have done more for us. I mean, I've seen companies helping the families or the employees with necessities like vitamins and immune boosters. Some families also received food parcels because it was a very stressful time, economically and socially. A lot of people lost their jobs. I mean, my three brothers lost their jobs and all of a sudden, I had to chip in at home as well. So financially, it also became a burden for me as well” (J1).

“... I hate the fact that after a case was reported in the office, they didn't ensure that the place was fumigated. Because we needed to hire a professional, they didn't do that. And I think that's also the reason why, like a bunch of people contracted COVID as well” (J3)

“As journalists, we were exposed to great sanitary risks when reporting on the health crisis and only a few ones receive safety guidelines or protective gear” (J8).

“... I remember frustration from my colleagues and I about testing. Testing was covered by the employer but towards the maturing of the pandemic, all of a sudden, these costs were incurred by the employee. With adopting that, many people did not get tested” (J11).

El-Nawawy and Elmasry (2024) note dissatisfaction among journalists in the Middle East and North Africa (MENA) region regarding the basic safety measures provided by their employers. This concern is echoed by Martinelli et al. (2021), who argue that such measures – like masks and sanitisers – were insufficient to address the broader risks journalists faced, such as mental health support, protection from hostile environments and access to healthcare. These findings suggest that superficial safety measures were inadequate for the complex dangers posed by the pandemic. This situation emphasises the tension between employer decisions and employee safety, especially when media houses prioritised content production over the well-being of their staff.

Further research by Quandt and Wahl-Jorgensen (2021) echoes these frustrations, specifically within digital newsrooms, where pressure to maintain high levels of content production often conflicted with recommendations for social distancing and remote working. However, this dissatisfaction highlights the contrast with more proactive approaches observed in other media organisations. For instance, Henke (2022) observed how some employers in the United States media sector took significant steps beyond minimal safety measures, providing regular testing, mental health counselling and even temporary housing for journalists at higher risk of exposure. This indicates that while some organisations prioritised productivity over employee welfare, others recognised the complexity of journalists’ needs and implemented more comprehensive support systems.

4.6 Discussion of findings

Based on the analysed data, the study revealed that journalists reporting on COVID-19 expressed significant concerns about the impact of the virus, with many feeling a heightened sense of fear. This fear came from a variety of factors like the uncertainty surrounding the virus, the rapid spread of the virus and the overwhelming nature of the crisis. Journalists further expressed feelings of vulnerability, as their roles, though deemed essential, did not guarantee adequate protection or support from the employers. Some participants highlighted that despite being recognised as critical workers, they did not

feel significantly safeguarded against the health risks associated with covering the pandemic. 'Fear' among journalists reflects their vulnerability to the pandemic while in the line of duty.

Vrhovec and Mihelic (2021) state that the PMT threat appraisal 'evaluates the perceived severity of a threat and the likelihood it takes on vulnerability'. Hedayati et al (2023:3-4) note that "perceived severity is defined as the level an individual believes that the COVID-19 threat may seriously influence his/her life, while perceived vulnerability may be defined as individual sensitivity to COVID-19 threat". It is evident from the findings that journalists were vulnerable and fully aware of the threats posed by the pandemic while in the line of duty.

The journalists' awareness of the threat arguably led to adopting various strategies to protect themselves. The PMT addresses coping appraisal, which, according to Hedayati et al. (2023:4), assesses the ability to cope with a threatened risk and respond to it. Within coping appraisal, the PMT stipulates 'response efficacy', 'self-efficacy' and 'response cost'. The strategies adopted reflect 'response efficacy' and 'self-efficacy'. Response efficacy, in this case, refers to the perceived effectiveness of self-protective behaviour against a threat and the belief that one's response can eliminate a threat (Sayed et al. as cited in Hedayati et al., 2023). Using self-talk (internal dialogue), professional innovation (such as creating videos to shift focus from the pandemic), seeking peer and professional support, and taking medication to improve one's immune system, reflect participant's belief that these methods could eliminate the Covid-19 threat. Self-efficacy, according to Grano et al. (as cited in Hedayati et al., 2023), describes a person's belief in his ability to successfully perform adaptive and prescribed behaviours to eliminate a threat. The use of recommended health protocols by journalists during the pandemic reflects self-efficacy. The participants believed that they had the ability to perform recommended behaviours, such as the wearing of masks, social distancing and sanitising of hands. While there is a general sense of participants being able to cope during the pandemic, some participants struggled. Using alcohol as a means of escaping reality and concerns regarding access to adequate health services may arguably reflect a lack of belief in some journalist's ability to cope with adversity.

Nazneen et al. (as cited in Hedayati et al., 2023:4) explains that "the response cost is related to spending more resources, such as money, time and energy to engage a person in protective behaviours and prevent him from a threat". They further argue that "any increase in the cost of using prescribed health behaviours reduces the behavioural motivation (Nazneen et al. (as cited in Hedayati et al., 2023:4). For some participants, the cost of sanitisers, masks and immune boosting medication did not deter them

from adopting protecting behaviours against the Covid-19 threat. Personal funds were used to perform these protective behaviours. However, institutional support offered to journalists appears to have been significantly limited. The withdrawal of testing facilities by some media organisations and letting journalists bear the cost of testing arguably reflects how cost can reduce the adoption of protective behaviour during a crisis. The general sentiment among participants is that institutional support was insufficient.

Evidently, findings reflect that journalists were aware of the threat of Covid-19 as they performed their duties. They experienced fear as well as emotional and psychological challenges while in the field, performing their duties. It is also evident that various strategies were used by journalists to cope with adversity. While others believed in their ability to self-protect, other journalists were concerned about access to adequate health if they are infected. The study also observed that institutional support was provided, albeit limited to the basic recommended health protocols. As such, this limitation was deemed as insufficient by most participants. The findings suggest that the media industry needs to take greater responsibility in addressing mental health concerns and providing the necessary resources for journalists to cope with the demands of unprecedented global events such as health pandemics.

4.7 Conclusion

This chapter explored journalists' perceptions of their vulnerability to COVID-19 while carrying out their duties. Journalists reporting on the pandemic experienced fear, which stemmed from a profound, multifaceted anxiety, driven by the virus' rapid spread and high mortality rates. The emotional and psychological toll on journalists was substantial, with some experiencing significant stress. Throughout the pandemic, journalists employed a variety of coping mechanisms to manage these challenges. In addition, journalists had mixed experiences regarding the level of support provided by their employers during the pandemic. The next chapter presents the conclusions of the study and outlines recommendations.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

The primary objective of this study was to examine the safety and welfare strategies employed by print journalists who reported on COVID-19 in Namibia, focusing on three daily print outlets: *The Namibian*, *New Era* and *Namibian Sun*. To achieve this overarching goal, three specific sub-objectives were addressed. These included: to assess selected Namibian journalists' perception on their vulnerability to COVID-19; to explore the safety and welfare strategies employed by selected Namibian journalists when reporting during the COVID-19 pandemic; and to establish the effectiveness of the safety and welfare strategies employed by selected Namibian journalists when reporting during the COVID-19 pandemic. This chapter presents the conclusion of the study and highlights recommendations on how media houses can better equip and take care of their journalists when covering health crises. It also provides suggestions for further research on aspects of media coverage of health emergencies.

5.2 Summary of findings

The findings of this study are presented in accordance with the study's objectives.

5.2.1 Namibian journalists' perception on their vulnerability to COVID-19

Several print journalists were worried about the COVID-19 pandemic, raising several issues that caused them to be afraid. These issues primarily resulted from the limited information available about the virus, combined with the uncertainty surrounding how it was spread and its long-term effects. Participants wondered whether they would contract the virus, especially with the presence of pre-existing health conditions that would worsen the infection of COVID-19. Their sense of vulnerability was further compounded by the lack of support from employers, with some participants noting that they did not feel adequately supported despite being considered essential workers. This sense of abandonment was particularly poignant, as most journalists felt that, like healthcare workers, they deserved greater safety measures and care to ensure their safety while reporting on the pandemic.

Journalists experienced secondary trauma that was triggered by re-living the sorrow of families they reported on. Seely's (2019) discusses vicarious trauma and explains that repeated exposure to traumatic narratives can lead to similar psychological effects as direct trauma. Furthermore, Seely (2019) suggests

that secondary trauma can be as debilitating as direct trauma, with journalists internalising the suffering they cover.

5.2.2 Safety and welfare strategies employed during the COVID-19 pandemic

The data assessed indicated that journalists, in response to the mounting stress, used a wide range of coping mechanisms, ranging from constructive strategies aimed at enhancing their well-being. Among the more constructive coping strategies employed, personal reflection emerged as a key mechanism for some journalists. Some participants in the study used introspection to process the overwhelming nature of the pandemic and cope with the emotional challenges associated with their reporting. Personal reflection allowed these journalists to evaluate their work practices, assess their emotional response and make the necessary adjustments to maintain their professional integrity and mental health. In addition to personal reflection, journalists also engaged in professional innovation as a means of adapting to the rapidly changing circumstances around the pandemic. The restrictions imposed by the crisis, such as social distancing and travelling required journalists to find new ways of conducting interviews, gathering information and producing stories. Many relied on digital tools and platforms to continue their work. This adaptability was reflective of a broader sense of personal resilience and self-efficacy.

Overall, apart from adherence to COVID-19 protocols, which mainly emphasised social distancing, hand sanitising and wearing of masks, self-awareness, flexibility and seeking help were some of the safety and welfare strategies journalists adopted while reporting on COVID-19. While others ensured their immune system was boosted, other journalists considered the pandemic as a source of professional growth because they adapted to new working conditions.

5.2.3 Effectiveness of the safety and welfare strategies

Participants mentioned several strategies that were greatly effective in handling challenges and enhancing their reporting on COVID-19. Among these were self-reflection, which allowed one to critically analyse one's mode of work and accordingly make adjustments. Professional innovation was mentioned as another approach, where flexibility and creativity were recognised by participants as essential in the performance of their work. Secondly, peer and professional support was an essential resource, providing participants with excellent insights, directions and external perspectives. Finally, adapting to new circumstances was noted as a key factor in maintaining resilience and achievement.

Participants recognised the importance of being adaptable in responding to new and unforeseen challenges.

However, some participants employed maladaptive coping strategies, such as alcoholism, as a coping mechanism for dealing with the enormous stress and psychological load of reporting on the virus. Furthermore, journalists were not adequately supported by their employers. This made their already-challenging working environment even more unfavourable. Lack of proper institutional support not only put journalists in more physical and psychological danger but also produced a more tenuous professional condition. The terrain on which they operated was filled with numerous risks because they were required to serve as lead informants of society to deliver crucial information about the unfolding health emergency.

According to Mahoney (2020), while working during times of health crises, journalists should be continuously protected to avoid injury to themselves, considering that their reporting is crucial in keeping the public well-informed about crises. Sanus (2022) states that, to help the public make informed decisions during the pandemic, journalists' safety was threatened because they were subjected to uncommon challenges in providing accurate, credible and trustworthy information about the COVID-19 pandemic. Thus, COVID-19 escalated the already-existent threats and safety issues for journalists and media workers. This dual mandate of providing personal protection as well as executing their journalistic duties placed journalists in an extremely difficult position between the demands of precise, timely reporting and risk of infection. Lacking adequate protective gear added to the emotional and psychological stresses of their profession. It became more difficult for journalists to perform their jobs well and with less tension. These findings highlight the urgent need for improved protection policies and institutional support mental health centres for journalists, particularly during global crises like the COVID-19 pandemic.

5.3 Conclusions

The conclusions drawn from the study indicate that journalists employed various personal safety and health strategies while reporting on the COVID-19. They expected support from their organisations, which many indicated was not very effective. While basic support was provided for journalists, it is evident that mental support was non-existent, yet it is a very crucial aspect of journalists' ability to thrive during a crisis. While some media houses made efforts to ensure basic protective gear and that health protocols were followed, there was a notable absence of proactive and sufficient support

systems to safeguard the physical well-being of journalists during their coverage of the pandemic. More critically, emotional and psychological well-being was largely neglected, with few institutions providing adequate resources or interventions to help journalists cope with the emotional strain of covering a crisis that was rapidly evolving, devastating and globally pervasive.

The COVID-19 pandemic, being an unprecedented global health crisis, introduced a novel set of challenges for journalists, who were thrust into the role of disseminating information on a disease that was not only new to the public but also to the journalists themselves. Despite the scale of the crisis, media houses did not prioritise equipping their staff with adequate training on both the physical safety measures necessary to report on the virus and the emotional resilience needed to report on such a traumatic event. Journalists, who are traditionally tasked with gathering and disseminating information in real time, found themselves unprepared for the unique challenges posed by this pandemic, which heightened their vulnerability to both viral exposure and psychological distress.

These findings highlight a significant gap in the institutional support systems available to journalists, especially in times of crisis. Failure to address the physical and emotional safety of journalists during the COVID-19 pandemic not only jeopardised their welfare but also undermined their ability to carry out their professional duties effectively. The study underscores the urgent need for media organisations to adopt more robust safety protocols, including adequate training, psychological support and preventive health measures to ensure the welfare of journalists in future global crises. Moreover, it calls for a systemic shift in how the media industry views and addresses the mental and physical well-being of journalists, acknowledging the critical role they play in society while ensuring their protection during times of unprecedented public health challenges.

5.3 Recommendations

Based on the findings discussed in the preceding chapter, the study makes the following recommendations

5.3.1 Well-being of journalists working on high-risk assignments

Media owners should be particularly concerned with the well-being of journalists working on high-risk assignments, such as pandemics. Journalists tend to risk their physical and mental well-being by working in such dangerous conditions. Media organisations should take measures for the health, safety and overall well-being of their employees. This can involve giving access to healthcare services, proper safety gear and economic support to those directly affected. Furthermore, media outlets need to have

systems for psychological and emotional support because reporting on high-risk stories is psychologically and emotionally demanding. In addition to improving their safety, the identification and mitigation of risks encountered by journalists during pandemics will enable effective work to be conducted without endangering their health.

5.3.2 Training of specialised journalists reporting on pandemics

There is a need to train journalists reporting on pandemics on a specialised basis to give them the necessary skills and information needed. Pandemics have distinct challenges in regard to the content and situation under which the reporting occurs. Journalists need to appreciate the subtleties of medical data, epidemiological language and public health requirements. They should also be able to contend with the ethical dilemmas involved in health crisis reporting. The pace at which pandemics develop necessitates journalists to be flexible, accurate and open in reporting. Extensive training programmes need to be developed to address these needs. For example, workshops on health reporting, crisis reporting and the application of digital media in health crises. This will make it possible for journalists to report on the pandemic with professionalism, responsibility and an understanding of the long-term implications of their reporting.

5.4 Limitations of the study

The scope of this study was specifically limited to print journalists, who have been actively involved in reporting the COVID-19 pandemic. This limited scope, while providing valuable insight into the lived experiences and challenges of journalists, does not give a general picture of the overall journalistic climate under the pandemic. Therefore, the findings of this study cannot be presumed to be wholly representative of all journalists who covered the pandemic, using various media channels. The exclusion of other journalism formats, such as broadcast and online media, constitutes a pertinent limitation to the findings because such groups of journalists may have encountered disparate challenges and employed disparate reporting mechanisms during the public health crisis.

Additionally, the sample of print journalists included in this study does not represent the whole variety of views among the media profession. Journalists working in other media may have had access to varied resources, faced different pressures and developed different strategies of engagement with the pandemic. While this study's observations provide understanding into the experiences of print media journalists during COVID-19, they cannot be extrapolated to the entire media industry, nor can they be assumed to reflect the perception of all media professionals who covered the pandemic coverage.

5.5 Recommendations for further research

More extensive research spanning a broader range of journalistic practices and media outlets would obtain a more generalised and overarching description of the media's role in the health crisis news coverage, such as the COVID-19 crisis. Camera operators were just one of the groups of media practitioners who, without a doubt, were present and on the ground, taking videos as the pandemic was wreaking havoc. They have a story to tell. A study on the role of camera operators in constructing visual narratives in health emergencies can be done. It would examine the ethical challenges of portraying health emergencies of sensitive content while keeping precision and sympathy intact in visualising vulnerable subjects.

5.6 Summary

This chapter presented the main findings of the study. Drawing from a thorough examination of the experience of print journalists who covered the COVID-19 pandemic, several key insights have emerged, most notably concerning the professional requirements, psychosocial care, overall safety and health risks of pandemic reporting. The study highlighted the need for extra training and constant advice for journalists working under pressure as well as the importance of acknowledging the total effect of their coverage on public opinion and response to the pandemic. The chapter made recommendations to improve the safety and welfare of print journalists who covered COVID-19. The recommendations emphasise adopting comprehensive safety practices, providing adequate personal protective equipment, and ensuring physical and psychological care for frontline journalists. By enhancing the health of media workers, media outlets can decrease the risk to employees while building a stronger and more ethically sound media world. The findings emphasise the merit of a comprehensive approach to journalist welfare and safety, consolidating professional training, institutional support and public health compliance.

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[Frontiers | Estimating the Serial Interval of the Novel Coronavirus Disease \(COVID-19\): A](#)

[Statistical Analysis Using the Public Data in Hong Kong From January 16 to February 15, 2020](#)

APPENDICES

Appendix 1: Ethical clearance



FACULTY RESEARCH ETHICS COMMITTEE (F-REC)

DECISION/FEEDBACK ON THE RESEARCH PROPOSAL

Dear Mr Paheja Siririka (217097197)

RESEARCH TOPIC: AN EXAMINATION OF THE SAFETY AND WELFARE STRATEGIES OF PRINT JOURNALISTS REPORTING ON COVID-19 IN NAMIBIA.

Supervisor (if applicable): Dr Nkosinohando Mpofu

Qualification registered for (if applicable): Master of Journalism and Media Technology

(Reference number of applications: **FACULTY RESEARCH ETHICS COMMITTEE REGISTRATION NUMBER: FREC - 45/23**)

Re: Ethical screening application No: **FREC - 45/23**

The Faculty of **Computing and Informatics** Ethics Screening Committee of the Namibia University of Science and Technology reviewed your application for the above-mentioned research. The research as set out in the application has been:

Approved X

(Indicate with an X, and N/A if not applicable and proceed)

We would like to point out that you, as a researcher, are obliged to maintain the ethical integrity of your research, adhere to the ethical guidelines of NUST, and remain within the scope of your research proposal and supporting evidence as submitted to the F-REC. Should any aspect of your research change from the information as presented to the F-REC, which could affect the possibility of harm to any research subject, you are under the obligation to report it immediately to your supervisor or F-REC as applicable in writing. Should there be any uncertainty in this regard, you must consult with the F-REC.

We wish you success with your research and trust that it will make a positive contribution to the quest for knowledge at NUST.

| Any ethical issues that need to be highlighted? | Why are these issues important? | What must/could be done to minimize the ethical risk? |
|---|---------------------------------|---|
| No | N/A | N/A |

Recommendation: The application is approved.

Sincerely,

Prof. Suama L. Hamunyela
Chairperson: Faculty Ethics Screening
Committee Tel: +264-61-207-2922
CC: Co-supervisor: None



Appendix 2: Consent form



Informed Consent Form for print journalists

This informed consent form is for print journalists from The Namibian, New Era and Namibian Sun newspapers who are invited to participate in the research titled, *AN EXAMINATION OF THE SAFETY AND WELFARE STRATEGIES OF PRINT JOURNALISTS REPORTING ON COVID-19 IN NAMIBIA.*

Name of Principle Investigator: Paheja Siririka

Name of Organisation: Namibia University of Science and Technology

Name of Project and Version: AN EXAMINATION OF THE SAFETY AND WELFARE STRATEGIES OF PRINT JOURNALISTS REPORTING ON COVID-19 IN NAMIBIA.

This Informed Consent Form has two parts:

- **Information Sheet (to share information about the study with you)**
- **Certificate of Consent (for signatures if you choose to participate)**

Part I: Information Sheet

Introduction

My name is Paheja Siririka, a student at the Namibia University of Science and Technology. I am doing research on the safety and welfare strategies of print journalists who have been reporting on Covid-19 since the beginning of the pandemic. I am going to give you information and invite you to be part of this research. You do not have to decide today whether or not you will participate in the research. Before you decide, you can talk to anyone you feel comfortable with about the research. This consent form may contain words that you do not understand. Please ask me to stop as we go through the information and I will take time to explain. If you have questions later, you can ask them of me or of another researcher

Purpose of the research

Covid-19 created havoc around the world and with many people dying. Journalists were seen as one of the most critical essential employees, meaning even during lockdowns, they could freely roam the streets at odd hours, gathering relevant information needed for their stories. While this was happening, many of them lost their jobs and there seemed to be no psychosocial support for their well-being. We want to find out from them if there are safety and welfare strategies in place to ensure their well-being. We would like to find out ways they feel, should be in place, to ensure their safety. There is a need to find out to what extent their mental health has been affected, considering that quite a number of journalists across the world have committed suicide while on duty.

Type of Research Intervention

This research will involve your participation in through a questionnaire with open ended questions that will be given to you.

Participant Selection

You are being invited to take part in this research because you have been reporting on the pandemic since it started and you would be in a better position to address the research topic thoroughly and at length.

Voluntary Participation

Please note that your participation in this research is entirely voluntary. It is your choice whether to participate or not. If you at any point after the research feel like that you do not want the information you provided to be used for the research, you are more than welcome to contact the research and state so. The choice that you make will have no bearing on your job or on any work-related evaluations or reports. You may change your mind later and stop participating even if you agreed earlier.

Procedures

A. Provide a brief introduction to the format of the research study.

We are requesting your participation in this research to provide us with information about your experience as a journalist who has reported on the Covid-19 pandemic in the country since it started. Among others, we are looking to explore the safety and welfare strategies in place at your publication and additionally try to unearth and assess the extent to which these safety and welfare strategies were implemented during the Covid-19 outbreak.

B. Explain the type of questions that the participants are likely to be asked in the focus group, the interviews, or the survey. If the research involves questions or discussion which may be sensitive or potentially cause embarrassment, inform the participant of this.

For the interviews, I will sit with you in a comfortable place, preferably in your working environment or any other quiet place where you can freely express yourself. You are more than welcome to suggest a place for the interview to be conducted. If you do not wish to answer any of the questions during the interview, you may say so and I will move on to the next question. No one else but the interviewer will be present unless you would like someone else to be there. The information recorded is confidential, and no one else will access to the information documented during your interview. The entire interview will be tape-recorded, but no-one will be identified by name on the tape.

Duration

The research takes place over a period of month to allow you to answer the questionnaire to the best of your ability and to share your lived experience while covering the Covid-19 pandemic.

Risks

Please bear in mind that the interview will lead to a discussion about mental health and how you have coped with it during your assignments. If at moment, you do not wish to go into detail, feel free to notify the researcher. There is a risk that you may share some personal or confidential information by chance, or that you may feel uncomfortable talking about some of the topics. However, we do not wish for this to happen. You do not have to answer any questions or take part in the interview if you feel the question(s) are too personal or if talking about them makes you uncomfortable. The other risks may be revealing information about your employer and their contribution to your reporting on the pandemic.

Benefits

There will be no direct benefit to you, but your participation is likely to help us find out more about the safety and strategic welfare of print journalists reporting on Covid-19 in the country.

Reimbursements

You will not be provided any incentive to take part in the research.

Confidentiality

The information you give will not be shared with anyone outside of the research team. The information that we collect from this research project will be kept private. Any information about you will have a letter on it instead of your name. Only the researchers will know what your letter is. It will not be shared with or given to anyone except my supervisor, Dr. Nkosinohando Mpofu.

Sharing the Results

The information you give us will not be shared with anyone else outside of this research team and your name will be attributed to anything. The knowledge that we get from this research will be shared with you and your employer. Following the submission and approval from the Research and Ethics Committee, we will publish the results so that other media houses can learn from the findings. The editors would be interested in knowing how they can change newsrooms for the better.

Right to Refuse or Withdraw

This is a reconfirmation that your participation is voluntary and includes the right to withdraw. Please note that you do not have to take part in this research if you do not wish to do so, and choosing to participate will not affect your job or job-related evaluations in any way. You are free to stop participating in the interview at any time that you wish without your job being affected. I will give you an opportunity at the end of the interview to review your remarks, and you can ask to modify or remove portions of those, if you do not agree with my notes or if I did not understand you correctly.

Whom to Contact

For further information and questions relating to the research, please do not hesitate to contact me Paheja Siririka at +26481 85 99 404. You can ask them now or later. If you wish to ask questions later, you may contact my supervisor, Dr. Nkosinohando Mpofu, she is easily accessible via email: nmpofu@nust.na, or additionally her landline is +264 61 207 2049. This proposal has been reviewed and approved by NUST Ethical Clearance Committee, which is a committee whose task is to make sure that research participants are protected from harm. If you wish to find out more about the REC, contact Dr Mpofu and the team +264 61 207 2049. It has also been reviewed by the Research and Ethics Committee of NUST, which is supporting the study.

Part II: Certificate of Consent

I have been invited to participate in research about the examination of the safety and welfare strategies of print journalists reporting on covid-19 in Namibia.

I have read the foregoing information, or it has been read to me. I have had the opportunity to ask questions about it and any questions I have been asked have been answered to my satisfaction. I consent voluntarily to be a participant in this study

Print Name of Participant _____

Signature of Participant _____

Date _____

Day/month/year

*If illiterate*¹

I have witnessed the accurate reading of the consent form to the potential participant, and the individual has had the opportunity to ask questions. I confirm that the individual has given consent freely.

Print name of witness _____

Thumb print of participant

Signature of witness _____

Date _____

Day/month/year

Statement by the researcher/person taking consent

I have accurately read out the information sheet to the potential participant, and to the best of my ability made sure that the participant understands that the following will be done:

- 1.
- 2.
- 3.

I confirm that the participant was given an opportunity to ask questions about the study, and all the questions asked by the participant have been answered correctly and to the best of my ability.

I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

¹ A literate witness must sign (if possible, this person should be selected by the participant and should have no connection to the research team). Participants who are illiterate should include their thumb print as well.

A copy of this ICF has been provided to the participant.

Print Name of Researcher/person taking the consent_____

Signature of Researcher /person taking the consent_____

Date _____

Day/month/year

Appendix 3: A Permission letter to The Namibian newspaper



10 May 2022

To whom it may Concern

Permission granted to conduct research at *The Namibian* newspaper

Greetings

This is to confirm that Mr Paheja Siririka, a Masters of Journalism and Media Technology student (No. 217097197) at the Namibia University of Science and Technology (NUST) has been granted permission to conduct research at The Namibian newspaper, for the following research titled: *An examination of the safety and welfare strategies of print journalists reporting on Covid-19 in Namibia.*

He will be interviewing five (5) journalists at the publication on their experiences on reporting on Covid-19.

I hope all is in order,

Regards,



Theresia Tjihenua
Assistant news editor
The Namibian
061 279616

The Free Press of Namibia (Pty) Ltd
Reg. 85/058
www.namibian.com.na

Directors: Theo Frank (Chairperson), Alisa Amupolo, Ulla von Holtz, Graham Hopwood
Editor and Managing Director: Tangeni Amupadhi

Appendix 4: A Permission letter to New Era



19 April 2022

To whom it may concern

RE: Permission for Mr Paheja Siririka to conduct research at New Era newspaper

This letter is concerning the research that Mr Paheja Siririka, who is pursuing a Master's in Journalism and Media Technology at the Namibia University of Science and Technology (student number 2017097197) is requesting to conduct at New Era.

As the managing editor, I give Mr Siririka permission to conduct research at our office for the study "*An examination of the safety and welfare strategies of print journalists reporting on Covid-19 in Namibia*".

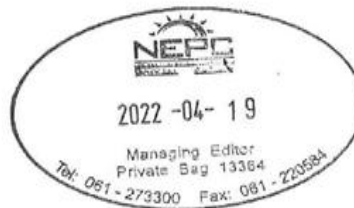
I am aware that Mr Siririka will be conducting individual semi-structured interviews with five journalists/editors at New Era's offices. These interviews will enable him to gather detailed views on the topic of print journalists reporting on Covid-19 and better understand the safety and welfare of reporters when covering issues such as the pandemic.

Once the research is concluded, Mr Siririka will share the results of the study with us.

If there are any questions, please do not hesitate to contact my office.

Yours sincerely,


Festus Nakatana
Managing Editor
New Era Publication Corporation
Tel: +264 61 208 0800
Fax: +264 61 220584
Cell: +264 85 220 3603
Web: www.neweralive.na



All official correspondence to be addressed to the Chief Executive Officer

Board of Directors: Dr John M Sifani (Chairperson), Edwin Tjiramba (Deputy Chairperson), Helena Amutenya, Selma Ambunda, Johannes Sheya
Christof Maletsky (Chief Executive Officer)

Appendix 5: A Permission Letter to the Namibian Sun



16 May 2022

To whom it may concern,

RE: PERMISSION FOR MR PAHEJA SIRIRIKA TO CONDUCT RESEARCH AT *NAMIBIAN SUN* NEWSPAPER

This letter is concerning the research that Mr Paheja Siririka (MA Journalism and Media Technology; Student number 217097197) is requesting to conduct at *Namibian Sun*. As editor of *Namibian Sun*, I do hereby give Mr Siririka permission to conduct research at our office for the study "*An examination of the safety and welfare strategies of print journalists reporting on Covid-19 in Namibia*".

I am aware that Mr Siririka will be conducting individual semi-structured interviews with five journalists/editors at *Namibian Sun's* offices. These interviews will enable him to gather detailed views on the topic of print journalists reporting on Covid-19 and better understand the safety and welfare of journalists when covering issues such as the pandemic.

Once the research is concluded, Mr Siririka will share the results of the study with us. If there are any questions, please do not hesitate to contact my office.

Signed,

Toivo Ndjebela
Editor: *Namibian Sun*



P.O.BOX 3436 | Windhoek | Namibia 11b General Murtala Muhammed Ave | Eros | Windhoek | Namibia Tel: +264 (0)61 297 2000 www.we.com.na

NAMIBIAN SUN IS A DIVISION OF NAMIBIA MEDIA HOLDINGS [PTY] LTD | COMPANY REGISTRATION NO. 2016/0127
BOARD OF DIRECTORS: JS MWATOTELE [GROUP CHAIRMAN] | P LAUBSCHER* | FA BOTHA
*South African

Appendix 6: Turnitin Report

Paheja Siririka - Thesis Turn it in Report

14 ORIGINALITY REPORT

| % | 11% | 6% | 5% | |
|------------------|------------------|--------------|---------|--------|
| | INTERNET SOURCES | PUBLICATIONS | STUDENT | PAPERS |
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| | 7 | | | |
| 3 | | | Submitted to University of South Africa | Student Paper |
| | 8 | | | |
| 4 | | | ippr.org.na | Internet Source |
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| Saba Bebawi, Ansgard Heinrich, | 1% |
| Antonio Castillo. "Ecologies of | |
| Global Risk Journalism - | 1% |
| Conceptualizing Local Journalism | |
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Editing Certificate

This certificate serves to confirm that I, Linea Awakeshe Shoopala, have edited the thesis, **AN EXAMINATION OF THE SAFETY AND WELFARE STRATEGIES OF PRINT JOURNALISTS REPORTING ON COVID-19 IN NAMIBIA**, by **PAHEJA SIRIRIKA** (217097197) for language and typographical correctness.

I have indicated the areas in the thesis to which attention should be paid. I trust that my advice was accepted, and that these corrections and changes were executed as suggested.

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