

Changing The Narrative: Outcomes From Pan-African Brain Health Advocacy And Reporting Training

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Background: Effective public health implementation requires not just clinical interventions, but a shift in societal discourse. Public stigma and misinformation about dementia remain widespread across Africa. We evaluated two training curricula, both built on the WHO Brain Health across the Life Course framework, that equip health journalists and emerging neuroscience leaders to report accurately and advocate for brain health.

Methods: We evaluated two audience-specific curricula using paired pre/post self-efficacy surveys (five-point scale). Health journalists took a hybrid course (four weekly online modules plus a half-day in-person capstone): 57 completed the pre-survey, 19 with matched pre/post responses. Twenty-one graduate neuroscience students from eleven nationalities completed a two-day in-person workshop, all matched. Both instruments shared seven core competencies. Within-person change was estimated per competency using paired-difference means with 95% confidence intervals.

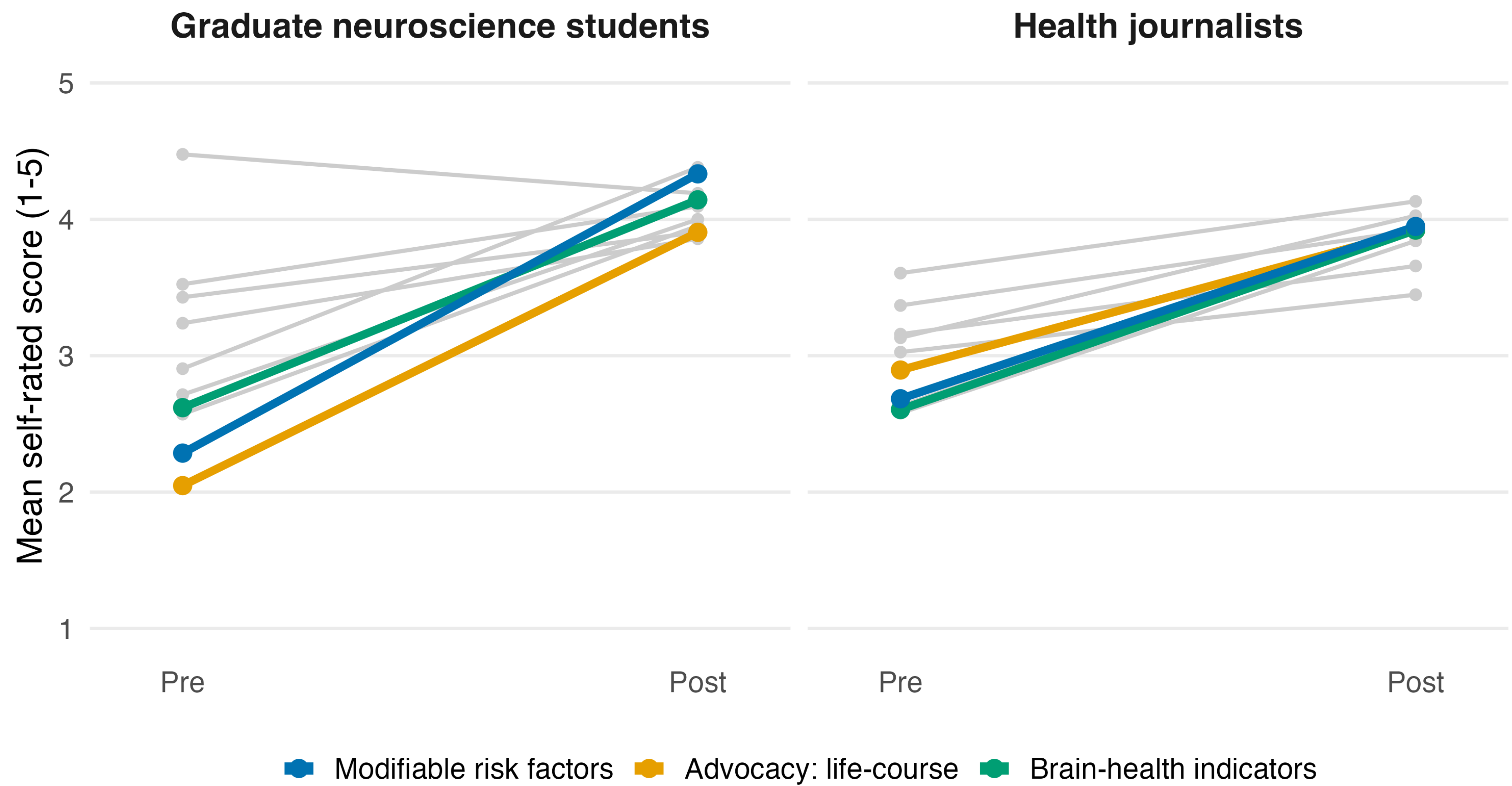
Results: Both cohorts gained significantly, but their gain profiles diverged: journalists advanced most on the data and indicator skills, students on advocacy and policy framing. Qualitatively, journalists moved from framing dementia as an "old age" issue to a preventable NCD, while students translated scientific evidence into policy arguments. Smaller shifts occurred only where baseline confidence was already high.

Table 1. Training cohort characteristics

	Health journalists	Graduate neuroscience students
Format	Hybrid: 4 weekly online modules (90 min) + half-day in-person capstone	2-day in-person workshop (6 modules)
Origin	Kenya-based	Pan-African: 11 nationalities (Ghana, Nigeria, South Africa, Sudan, Uganda, Tanzania, Egypt, Zimbabwe, Ethiopia + others)
Cohort	Health / medical journalists	Graduate neuroscience students
n (pre / post / paired)	57 / 22 / 19	21 (paired)
Analysis design	Paired change scores	Paired change scores
Experience	<3yrs 46%; 4-6yr 21%; 7-10yr 26%; >10yr 7%	Graduate students across African & international institutions
Gender	Not collected	12 She/Her, 9 He/Him

Figure 1. Competence rose on nearly every measure

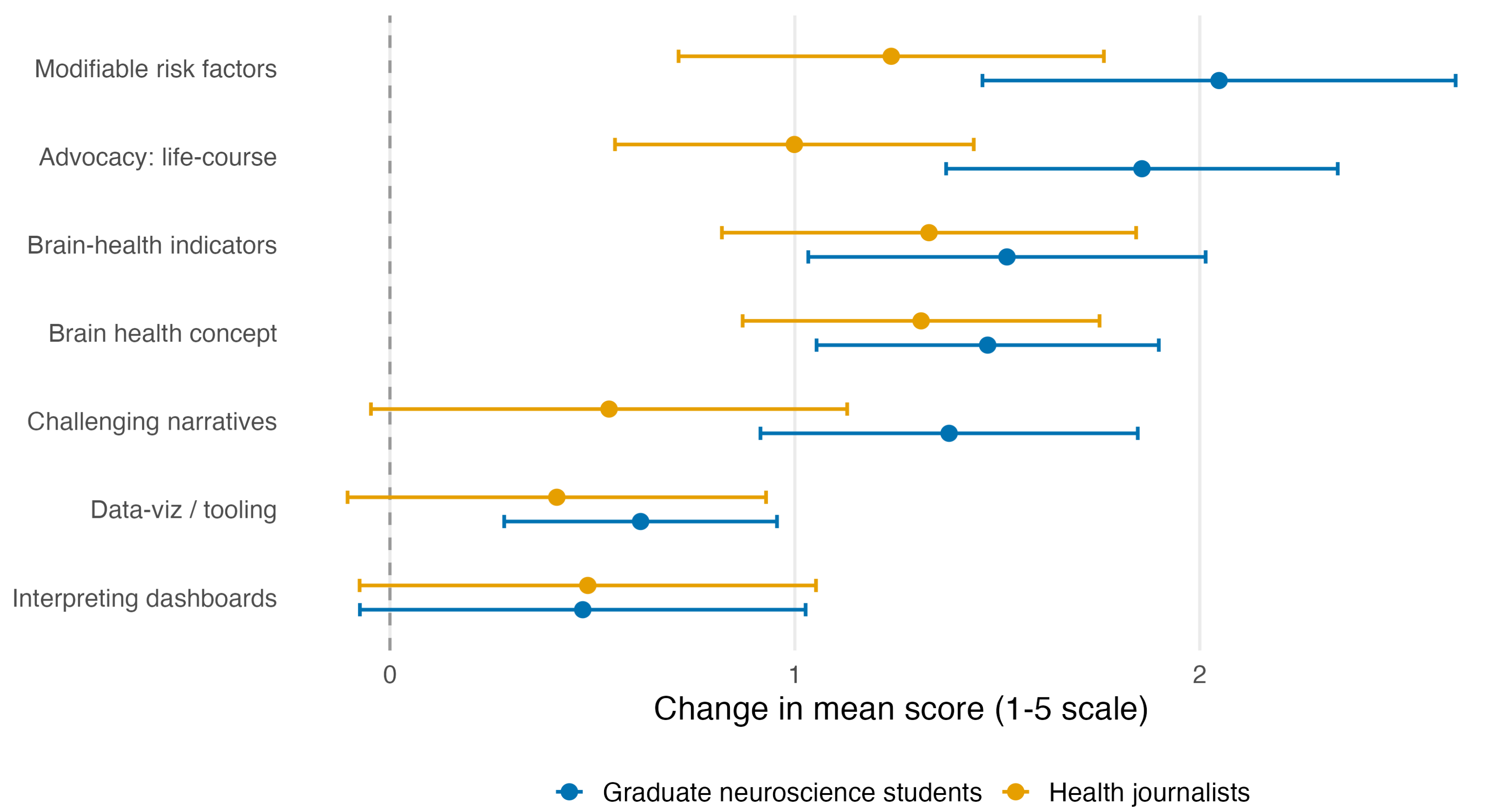
Mean score on a 1-5 scale. Grey lines = all other constructs.



paired (matched pre/post): graduate students n = 21, health journalists n = 19. 'Applying skills' (students) started near ceiling and did not rise; it is shown in grey.

Figure 2. Self-rated gains on shared competencies (paired)

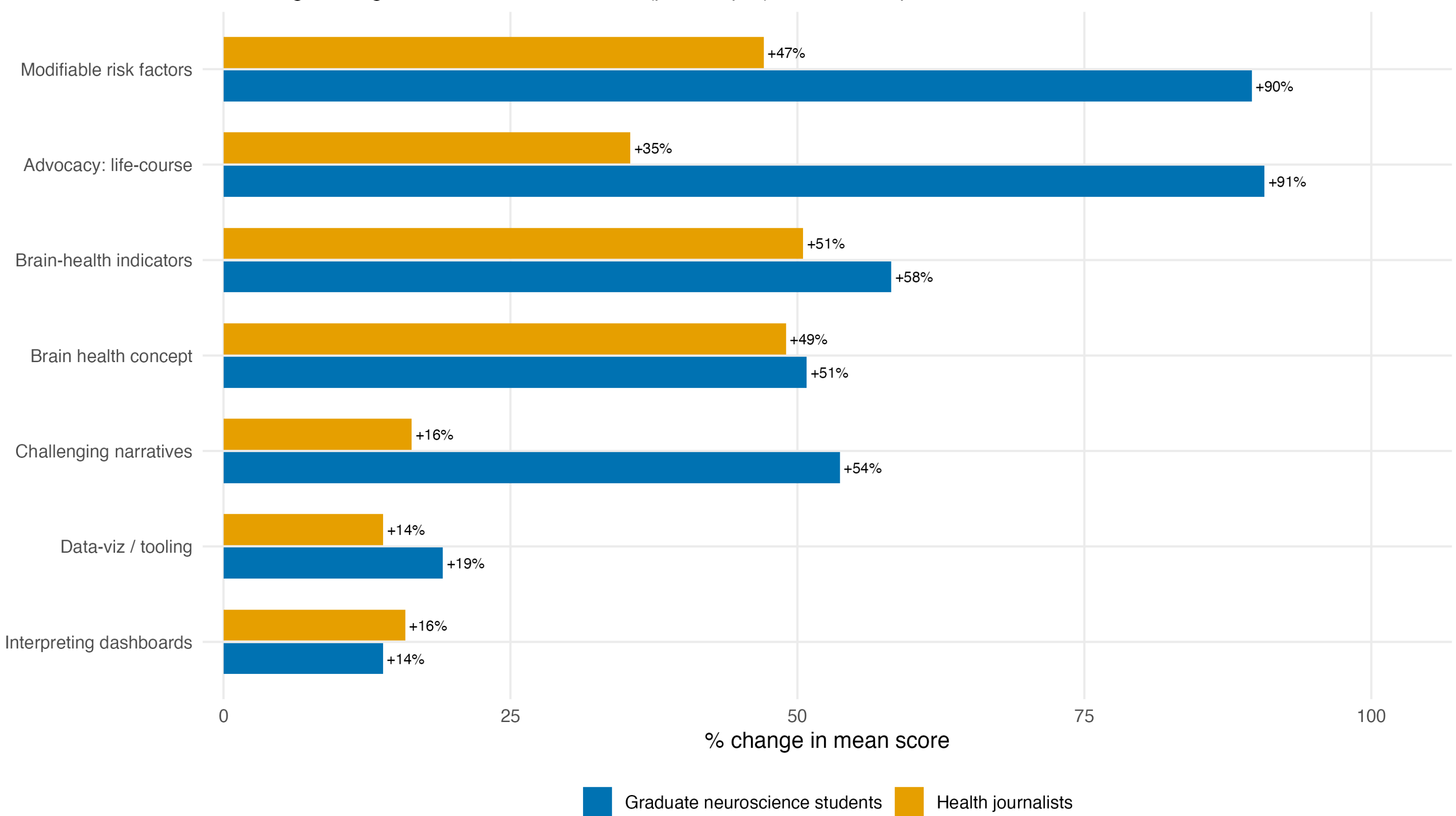
Mean within-person change (post - pre), 95% CI. Both cohorts, same 1-5 items.



Students n = 21, journalists n = 19 (matched pre/post). CI excluding 0 = statistically significant.

Figure 3. Training raised self-efficacy across both cohorts

Percentage change in mean self-rated score (post vs pre), shared competencies



Both cohorts paired (matched pre/post): graduate students n = 21, health journalists n = 19.

Conclusion: Building brain health literacy alongside communication and data skills is a high-impact public health strategy. Across both journalists and neuroscience trainees, each curriculum moved the competencies it targeted, a "force multiplier" for reshaping public dementia narratives. Future programmes should expand hands-on practice and sustained post-workshop support.



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1. Global Brain Health Institute, University of California, San Francisco
2. Global Brain Health Institute, Trinity College, Dublin
3. Atlantic Fellows for Health Equity, South Africa (TEKANO)
4. Atlantic Fellows for Health Equity, USA and Global
5. Brain and Mind Institute, Aga Khan University, Nairobi
6. British Columbia Centre for Disease Control
7. University of Cape Town
8. PHELA Foundation
9. Africa Behavioural Science Network

Acknowledgements:

- African Brain Health Network (ABHN);
- Neuroscience Institute and Neuroscience Imbizo, University of Cape Town;
- Brain Mind institute, Aga Khan University;
- Atlantic Institute,
- NCD Alliance Kenya

