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Tanja Kostanjevac

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University North (Croatia)

Zeljka Bagaric ORCID: 0000-0002-4085-8736 University North (Croatia)

Accessibility of public health information on the COVID-19 outbreak: Analysis of the first European official TV releases

Keywords: deaf people, social inclusion, public health information, cultural rights of persons with disabilities, accessibility to media content

Słowa kluczowe: osoby niesłyszące, integracja społeczna, informacje o zdrowiu publicznym, prawa kulturowe osób niepełnosprawnych, dostępność treści medialnych

1. Introduction

1.1. Right to information and communication – European regulatory framework

Within the modern civilization environment, each member of the society should have a guaranteed access and respect of all the human rights and fundamental freedoms. Articles 11 and 14 of the EU Charter of Fundamental Rights confirm access to information and education as basic human rights. The EU has recently adhered to the UN Convention on the Rights of Persons with Disabilities (CRPD). A vulnerable group, into which disabled persons belong to, should have access to all the human rights as all other people. Still, over 50 million deaf or hard of hearing Europeans are deprived of their basic human rights simply because they cannot hear programs broadcasted on TV, understand films in the cinema, or performances in the theatre. Regarding the European level regulation, when it comes to protection and promotion of human rights and fundamental freedoms, then this refers to (European) Convention for the Protection of Human Rights and Fundamental Freedoms. Further on, there is the Law on confirming the European Social Charter, Additional Protocol to the European Social Charter, Protocol amending the European Social Charter and Additional Protocol to the European Social Charter that set up a system of collective complaints, which is based on the principles of equality for disabled persons; specifically Article 15 which states that "persons with disabilities have the right to independence, social integration and participation in the life of the community". (Council of Europe Strategy on the Rights of Persons with Disabilities 2017–2023, 3). For the purposes of this paper there will be detailed discussion on the accessibility that is mentioned in Article 9 of the Convention, more precisely Law on implementing the Convention on the Rights of Persons with Disabilities and its Optional Protocol on the Convention on the Rights of Persons with Disabilities. As stated in the Law, accessibility serves to eliminate the obstacles in abilities of individuals to receive, give and serve informationcommunication technologies; this is a precondition which has to be met in order for persons with disabilities to be fully integrated into the life of the community on equal basis as others. When speaking about the accessibility, the focus is on design of the environment, transportation, i.e. physical accessibility. However, the accent here shall be on ensuring information and communication, including information and communication technologies and systems (Guideline on the implementation of Article 9 of the UN Convention on the Rights of Persons with Disabilities for applicants and users of the Operational Programme Efficient Human Resources 2014–2020, 6). This implies that persons with disabilities are fully engaged and included in all spheres of life, as well as other citizens. In addition, it refers to the fact that "persons with disabilities must and should be provided with reasonable accommodation tailored to the needs of an individual. It is necessary to promote affordable assistive technologies, devices and services aimed at removing the existing barriers" (Council of Europe Strategy on the Rights of Persons with Disabilities 2017–2023, 6).

Furthermore, education is made difficult for persons with disabilities, which makes it necessary to ensure access to education and training programs (Council of Europe Strategy on the Rights of Persons with Disabilities 2017-2023). Persons with disabilities should be provided with accessibility to inclusive programs which will be implemented into the educational institutions and places of employment. This should be done in the same manner in which professional training is being implemented, which includes awareness on disabilities and on persons with disabilities. In the same way, persons with disabilities should not be discriminated against based on modes and formats of communication and should therefore have access to *braille* and sign language (Council of Europe Strategy on the Rights of Persons with Disabilities 2017–2023). In communication context, persons with disabilities have access and are included in the media, where they can participate as users as well as active actors. However, they should be aware of dangers on the internet. Dissemination of good practices on improving statistics with regard to types and frequency of disabilities and persons with disabilities is being conducted. This enables accessibility to accurate statistical data on disabilities and persons with disabilities.

"Persons with hearing impairment can be deaf, they can suffer from hearing loss or can have speech-language and vocal disorders" (Digital Accessibility Guidelines, CARNET 2019, 11). It is necessary to provide accessibility for persons with hearing impairment by adjusting audio and/or video materials on web sites with appropriate subtitles, descriptions and/or transcripts; when possible, audio/video materials should have included or joined recording of the translation into a national sign language; it is crucially important that simple and easy to understand language is used in the texts (Digital Accessibility Guidelines, CARNET 2019).

1.2. Digital accessibility

The term of accessibility can be divided into accessibility to the built environment and into accessibility to information and electronic services, as well as into social and economic accessibility, as it was defined in the previously mentioned regulatory framework. Accessibility refers to both open and closed spaces intended for public. In order to ensure life without barriers to persons with disabilities, it is important that the term of accessibility includes the adaptation of buildings such as educational institutions, roads, public transport and so on. In all the public facilities *braille*, i.e. clearly written and legible text, should be used. Additional way to make adjustments is to engage a sign language interpreter, assistant, reader or a similar person. This all arises from the Law on implementing the Convention on the Rights of Persons with Disabilities and its Optional Protocol on the Convention on the Rights of Persons with Disabilities (2007). There are four basic principles on which digital accessibility stands. Those four principles enable all the users, regardless of their abilities, to implement observability, manage user interface, understand all information and the way interface functions, and be able to access content regardless of the technology.

1.2.1. Information and communication accessibility

Information and communication technology is defined both "as a diverse set of technological tools and resources that is able to ensure the transmission and use of all types of information, and that enables the inclusion of persons with disabilities or special needs into education system and work" (Batarelo Kokić and Kisovar-Ivanda, 2014, p. 4). In addition, when it comes to persons with disabilities, in terms of information and communication technology, it is important to study how to overcome the obstacles that people face in exercise of their cultural rights – rights to the information and communication. In the COVID-19 pandemic situation ensuring the rights to the health public information to the people with disability was extrapolated to their right to life. So, it is important to pay attention to what kind of disability a person has, that a certain type of technology could be adapted to each person (Batarelo Kokić and Kisovar-Ivanda, 2014). Therefore, in order to make general public information accessible to persons with disabilities, it is necessary for them to be in accessible formats, and it is important to use appropriate technologies for different forms of disability. Depending on the type of impairment, the forms of information and communication accessibility also differ. These applications are *braille* for the blind, sign language and subtitling for the deaf, and there are also texts which are easy to read and understand for people with intellectual disabilities (Guideline on the implementation of Article 9 of the UN Convention 2014–2020, p. 9). It is crucial for the content of web pages, to be accessible. For example, people with impaired motor skills do not have the ability to control and use a computer mouse. They perform all the functions using the keyboard. Furthermore, people who are blind, despite using *braille* and using audio readers, do not have the ability to recognize what is in the image if the image does not have a textual description, which is especially important if the image serves as a hyperlink. In order to ensure optimal readability, that is to enable the adjustment of the size of letters or characters, change of color or background, such an adjustment should be made for people who are visually impaired. Deaf persons need adjustments in form of a written text or text presentation with the help of an interpreter or sign language interpreter because they do not have the ability to hear the soundtrack, while hard of hearing persons should be allowed to adjust the volume. People with intellectual disabilities need adaptation concerning the comprehension of the text. The method of easy-toread format is used for that purpose.

1.2.2. Adaptation of video and audio content to persons with disabilities

According to the Guidelines for Accessible Information (2015), audio content can be beneficial for persons who cannot access content shared through visual channels. When the audience includes members of deaf community, another channel of accessibility should be secured, such as text, or interpretation for a particular sign language. In the process of making the audio content or the audio material (radio broadcast) accessible, the simplest way is to produce a video version of the show or podcast episode which contains the transcripts or the subtitled text. Volume control should be enabled, if possible, in order to avoid automatic playback of audio or video material, as well as a fast-forward function, which includes fast-forward, rewind, and pause (this can be done using a keyboard) (Guidelines for Accessible Information, 2015). However, it is important to point out that video material adapted in such a way does not represent fully accessible content for all deaf persons. In addition to the transcribed audio recording, a translation into appropriate national sign language should be included for full accessibility, in accordance with the applicable legal provisions. Example of good practice in audio content adaptation using ICT made by a students within the Croatian University North's project UP.02.1.1.10.0036 "eRadio for a second chance" which was co-funded by European union within European Social Fund¹ where the text version of the podcast

¹ Available at https://eradio-za-drugu-sansu.unin.hr.

episode's content in the form of descriptions and subtitles is added to the audio content, i.e. produced audio material² (Figure 1).

However, the video material adapted in this way is not a fully accessible content for all deaf people. It should be said that content subtitling presents an extremely good way to adapt the content, but it only covers those people who have lost their hearing after having already learned the Croatian language and can read and write very well in Croatian. For those who are deaf since birth, the Croatian is an unknown language and they do not understand it well enough to be able to follow the subtitled content. In that case, a sign language translator is needed.

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Predstavljanje projekta	
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Fig. 1. Accessible podcast episode of project "eRadio for a second chance" Source: University North, [online]. Access: https://eradio-za-drugu-sansu.unin.hr/ iz-medija/ [21.08.2021].

² This project aims to develop inclusive potentials of community media for social inclusion by strengthening the capacity of journalists and increasing the quality of media content of the student internet Radio Pressedan, increasing the visibility of vulnerable groups of persons released from prison and contribute to increasing equal opportunities in the labor market and their reintegration into the community (Bagaric, 2021). Beside the project website, the accessible podcast episodes are published on *YouTube* channel of University North. It is also necessary to point out that part of the implementation activities of the project "eRadio for a second chance", namely a study visit during July 2021 to the detention facility in Olsztyn and to a student radio UWM FM 95.9, achieved through a successful cooperation and with the kind support of professor Urszula Doliwa from the University of Warmia and Mazury in Olsztyn and her associates, lieutenant Justyna Jachacy-Majewska (from Areszt Śledczy in Olsztyn) and Mr. Łukasz Staniszewski, deputy chief editor of UWM student radio. Podcasts #20 and #21 contain interviews with professor Doliwa, and podcast #26 is an interview with Mr. Staniszewski.

1.4. Digital accessibility of official public health information for persons with hearing impairment at the beginning of COVID-19 pandemics

The media is the main information source that citizens should trust in any crisis situation. They present basic information without leaving room for speculation or rumors. At the same time, they bring the first information about the situation and instructions on how individuals should behave in a particular crisis situation (Perinić, 2011; Karlsson, 2010; Althaus, 2002). Various studies have also shown that in a crisis, TV is becoming the dominant medium. "Apparently, individuals who used radio, print media and the web during normal times relied on TV to a greater degree in the months following the crisis, and the leading force in this change was the perception of threat. It is clear that TV is the medium of choice in a national crisis, and this preference is not simply the result of habit" (Wilson, 2004, p. 354). In the context of TV broadcasting accessibility, Figure 2 shows that the overall trend since last report in 2011 is a positive one. Data has shown that most countries in 2013 have demonstrably improved their subtitling provision across this time period. However, some countries are clearly leading the way, whilst 10 countries have a great deal of room for improvement (Bulgaria, Cyprus, Estonia, Latvia, Lithuania, Luxemburg, Malta, Portugal, Rumania, and Belgium Wallonia).

However, despite the positive tone of the report, it turned out that the crisis caused by the COVID-19 pandemic has greatly increased the level of inequality and social exclusion of persons with disabilities in terms of accessibility to public health information published in media, official TV and video channels. This is supported by a speech of UN Secretary-General, Mr. Antonio Guterres (Policy Brief on 6th May 2020), "Pandemic reveals how excluded are society's most marginalized", Secretary-General says (United Nations, 2020): "The COVID-19 crisis is affecting every aspect of our societies, revealing the extent of exclusion that the most marginalized members of society experience... The pandemic is intensifying these inequalities – and producing new threats... Persons with disabilities are among the hardest hit by COVID-19. They face a lack of accessible public-health information, significant barriers to implementing basic hygiene measures, and inaccessible health facilities".

Due to co-morbidity, persons with disabilities are one of the most endangered groups, and in the terms of mortality they are among the worst affected groups in the crisis caused by global pandemics.

Within the mentioned problem framework, this paper aims to investigate the extent to which deaf people and people with hearing impairments in European and EEA states had access to official sources' TV releases related to COVID-19 pandemic.

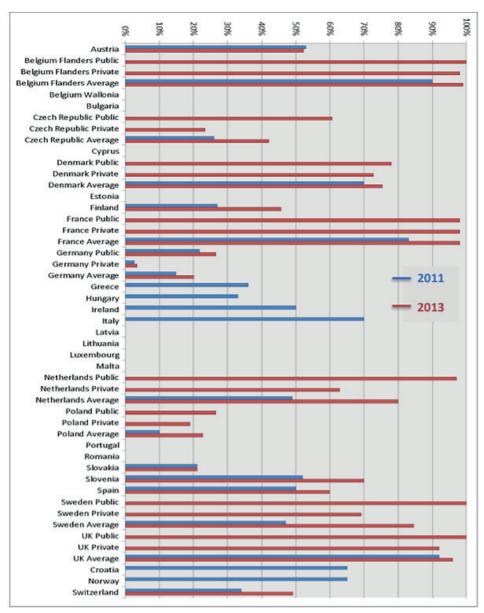


Fig. 2. Level of subtiling provision in TV broadcasting (2011–2013) Source: European Federation of Hard of Hearing People (EFHOH) (2015).

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The following research questions are defined:

RQ1: Do the official source TV announcements of the EU and EEA and (1) Schengen area members declaring the COVID-19 pandemic and the introduction of epidemiological measures contain information accessible to persons with hearing impairments?

RQ2: Do the initial official announcements of the European Commission (EC) and the WHO (World Health Organization) declaring a COVID-19 pandemic contain informative content accessible to persons with hearing impairments?

2. Methods

2.1. Simple content analysis

This paper investigates the extent to which the media coverage of official information was accessible to persons with hearing impairments at the beginning of the COVID-19 pandemic. For this purpose, a simple content analysis was performed on a deliberate sample of digital content. The content analysis is defined as "a research method used to draw reproducible and valid conclusions from a text (or any other meaningful material) about the context within which it was used" (Krippendorff, 2004, p. 18), that is as "a research method that uses a set of procedures to draw valid conclusions from the text" (Weber, 1990, p. 9). To conduct a content analysis, according to Bryman (2008, p. 274), "content is quantified in terms of predefined categories in a systematic and repetitious way".

In this paper, the units of analysis were state's official announcements which were broadcasted via TV channels during February and/or March 2020 by all 27 EU Member countries, European Economic Area (EEA) Member countries – Iceland, Norway and the United Kingdom and Switzerland as a Schengen area member as well as by the EC and the WHO (partially illustrated in Figures 3–8).



Fig. 3. WHO - Corona virus Outbreak 22 March 2020 (live declaration) Source: https://www.youtube.com/watch?v=Btlzrwl9Lcw&ab_channel=UnitedNations [11.06.2020].



Fig. 4. EC - European response to the coronavirus pandemic 15 March 2020 Source: https://www.youtube.com/watch?v=GGmb6KtkZrI&ab_ channel=EuropeanCommission [11.06.2020].



Fig. 5. Example of using a sign language interpreter (UK live) Source: https://www.youtube.com/watch?v=LaBof9yYf04 [07.06.2020].



Fig. 6. Example of using subtitles (Germany) during a studio broadcast Source: https://www.dw.com/en/whats-angela-merkels-secret-to-crisis-leadership-ingermany/av-53522542 [07.06.2020].



Fig. 7. Example of complete accessibility (Spain live) Source: https://www.youtube.com/watch?v=sN_3eBCEfY8 [11.06.2020].



Fig. 8. Inaccessible live announcement (Malta) Source: https://www.youtube.com/watch?v=1SaE0S3aNPc [10.06.2020].

For the purposes of conducting content analysis, the following tools have been created (Table 1–2). Two manifest categories (*yes*; *no*) were used to describe accessibility of analyzed units.

Table 1

Content accessibility	Code
YES	+
NO	-

Code list: Manifest categories of accessibility

Source: own preparation.

-	
State/official body	Code
Austria	AUT
Belgium	BEL
Bulgaria	BUG
Cyprus	СҮР
the Czech Republic	CZE
Denmark	DNK
Estonia	EST
Finland	FIN
France	FRA
Greece	GRC
Croatia	HRV
Ireland	IRL
Iceland	ISL
Italy	ITA
Latvia	LVA
Lithuania	LTU
Luxembourg	LUX
Hungary	HUN
Malta	MLT
Netherlands	NLD
Germany	DEU
Norway	NOR
Poland	POL
Portugal	PRT
Rumania	ROU
Slovakia	SVK
Slovenia	SVN
Spain	ESP
Sweden	SWE
Switzerland	CHE
United Kingdom	GBR
WHO	WHO
EC	EC
<u> </u>	

Code list: Analysis units of official TV releases

Source: own preparation.

Table 2

3. Results and Discussion

On a deliberate sample of 31 countries' official announcements and the official releases of World Health Organization and European Commission, we obtained the results shown in Table 3. On the exact day of (individual) official declaration of the epidemics/pandemics COVID-19 within the analyzed sample of a total of 33 official source's TV releases, only four (9.3%) provided full accessibility while 9%, which includes WHO, did not provide accessible content of official announcements of this important public health information. EC provided subtitles with the official TV release content. As far as it goes for the European countries and the announcement of official source information, only four countries have provided full content accessibility in all the analyzed modalities since the beginning of the crisis – Italy, Spain, Austria and Denmark.

Table 3

	Characteristics of adapted content					
State	Sign language interpreter	Subtitles	Live	Studio	Entire time	Partial
1	2	3	4	5	6	7
AUT	+	+	+	+	+	
BEL	_	_	_	-	-	
BGR	_	+	+	_	+	+
CYP	_	_	_	-	_	-
CZE	+	_	+	—	•	+
DNK	+	+	+	+	+	
EST	_	-	-	-	-	_
FIN	_	_	-	-	-	-
FRA	+	-	+	-	-	+
GRC	+	_	+	+	_	+
HRV	+	_	_	+	-	+
IRL	_	+	_	+	_	+
ISL	_	+	_	+	+	+
ITA	+	+	+	+	+	
LVA	_	+	-	-	-	+
LTU	_	+	_	-	-	+
LUX	+	_	_	+	-	+
HUN	_	_	_	-	_	_
MLT	_	_	_	_	_	_
NLD	_	+	_	+	+	+

Simple analytical matrix: Accessibility to official source's release content upon declaring Covid-19 pandemics (to deaf and hearing-impaired persons)

1	2	3	4	5	6	7	
DEU	—	+	_	+	-	+	
NOR	—	+	_	+	-	+	
POL	—	+	_	+	—	+	
PRT	—	_	_	-	_	-	
ROU	+	_	+	-	-	+	
SVK	—	_	_	—	-	-	
SVN	—	+	_	+	-	+	
ESP	+	+	+	+	+		
SWE	+	_	+	—	-	+	
CHE	_	+	-	+	-	+	
GBR	+	_	+	+	_	+	
WHO	—	_	_	-	-	—	
EC	_	+	_	_	+	+	
~							

cont. Table 3

Source: own preparation.

This is in line with daily media practice because these countries are recognized leaders in the protection of human rights and social inclusion of persons with disabilities at all levels. Eight countries (Croatia, Czech Republic, France, Greece, Luxembourg, Romania, Sweden and the United Kingdom) presented official information using national sign language. Furthermore, 11 countries presented official information using subtitles (Bulgaria, Ireland, Iceland, Latvia, Lithuania, the Netherlands, Germany, Norway, Poland, Slovenia and Switzerland). However, only 3 of them did so during the entire broadcasting time (Bulgaria, Iceland and the Netherlands). We find it very concerning that a fifth (26%) of EU members – Belgium, Estonia, Finland, Hungary, Malta, Portugal and Slovakia – have not made accessible the announcement of the first official public health information related to the COVID-19 epidemic and have not introduced their citizens living with disabilities with the emerging crisis situation and the introduction of epidemiological measures aimed at protecting their health.

5. Conclusion

A simple content analysis provided answers to the research questions on accessibility of official public health information on the declaration of the COVID-19 epidemic/pandemic in the European media space. In comparison to level of subtitling provision in TV broadcasting for period 2011–2013 (see Figure 2) there was a certain shift in the number of countries that subtitle informative media content. The obtained data in relation to globally adopted regulations and proclaimed protection of fundamental rights and freedoms, as well as rights arising under the instrument of international solidarity which were previously discussed in this paper, demonstrate the real situation characterized by insufficient social inclusion and protection of the right to information and communication as well as the right to health and healthy living of persons with disabilities at European level. At the same time, the fact that the WHO as public health official source is among those that did not provide information accessibility in their live broadcasts on the day of the proclamation of the COVID-19 pandemic seems withering. Although the EC provided subtitled content in its TV announcements, we believe that institutions of such importance should always ensure full access to official health (and others) information to their citizens. Within this context, global media role and responsibilities for ensuring the respect of the information and communication rights of deaf and hearing-impaired persons is also very important, if not crucial.

To remove future barriers in public and media space, universities and institutions which conduct higher formal education of media and journalism students have the mission of awareness and sensibilization level raising together with applying desirable inclusive patterns. Introduction of academic servicelearning courses and projects within curricula due to adopting ethical values and improving intercultural communication skills can establish an inclusive media platform that future media professionals will continue to use in their professional environment. Based on good practice examples, enabling student skills on how to ensure digital accessibility of produced audio and video media content using Information and Communication Technologies is certainly the first step towards civic participation of these vulnerable groups.

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Summary

Due to co-morbidity, persons with disabilities are among the most endangered groups, and in terms of mortality, they are among the worst affected groups in the crisis caused by global pandemics. This crisis has extremely increased inequality and social exclusion of persons with disabilities regarding access to public health information.

This paper investigates the extent to which European states have made the AV content of the announcements of the COVID-19 pandemic accessible to hearing-impaired persons.

A content analysis was conducted at the beginning of the pandemiological measures (February/March 2020) introduced in the sample states. An analysis unit consists of the first TV broadcasts released with official statements of the EU member states (N=27), European Economic Area states (N=3) and Switzerland, as well as official video releases of the World Health Organization and the European Commission (N=2).

From the total analyzed TV deliberate sample (N=33), a total of eight official sources provided accessibility of health information to hearing-impaired persons using a sign language interpreter; 12 sources provided subtitles, and 11 sources did not provide any form of accessible information regarding the official proclamation of the COVID-19 pandemic (including the WHO's television release). Only four national official sources ensured full accessibility to the content of the announcement.

The obtained results demonstrate the real situation characterized by insufficient social inclusion and protection of the right to information and communication and the violation of the right to health and healthy living of persons with disabilities at the European level. These results are contrary to globally adopted regulations and proclaimed protection of fundamental rights and freedoms and rights arising under the instrument of international solidarity. It is necessary to increase the level of consciousness of a community's global social responsibility, especially in the TV media, with the purpose of the total inclusion of hearing-impaired persons in the public space. The mission of higher education institutions should include overcoming poor media social responsibility by adopting digital accessibility mechanisms and improving the intercultural skills of future media professionals.

Dostępność informacji na temat zdrowia publicznego w związku z wybuchem pandemii COVID-19: analiza pierwszych oficjalnych europejskich przekazów telewizyjnych

Streszczenie

Ze względu na występowanie chorób towarzyszących osoby niepełnosprawne należą do grup najbardziej zagrożonych, a pod względem śmiertelności są grupą najbardziej dotkniętą kryzysem wywołanym przez globalne pandemie. Kryzys ten bardzo pogłębił nierówności i wykluczenie społeczne osób niepełnosprawnych w zakresie dostępu do informacji o zdrowiu publicznym.

W niniejszym artykule opisano badania na temat stopnia udostępniania osobom z upośledzeniem słuchu treści AV zawartych w komunikatach dotyczących pandemii COVID-19 przez państwa europejskie.

Analizę treści przeprowadzono po wdrożeniu działań zapobiegawczych pandemii (luty/marzec 2020 r.) w państwach objętych badaniem. Na jednostkę analizy składają

się pierwsze audycje telewizyjne z oficjalnymi oświadczeniami państw członkowskich UE (N=27), państw Europejskiego Obszaru Gospodarczego (N=3) i Szwajcarii oraz oficjalne materiały wideo Światowej Organizacji Zdrowia i Komisji Europejskiej (N=2).

Ze wszystkich analizowanych telewizyjnych materiałów informacyjnych (N=33) 8 oficjalnych źródeł zapewniało dostępność informacji o zdrowiu dla osób niedosłyszących z wykorzystaniem tłumacza języka migowego, 12 źródeł – napisy, a 11 źródeł nie zapewniało żadnej formy dostępności informacji o pandemii COVID-19 (w tym komunikatu telewizyjnego WHO). Tylko 4 krajowe, oficjalne źródła zapewniły pełną dostępność do treści komunikatu.

Uzyskane wyniki wskazują na sytuację charakteryzującą się niewystarczającą integracją społeczną i ochroną prawa do informacji i komunikacji oraz naruszaniem prawa do zdrowia i życia osób niepełnosprawnych na poziomie europejskim. Wyniki te są sprzeczne z przyjętymi na świecie regulacjami i proklamowaną ochroną podstawowych praw i wolności oraz praw wynikających z instrumentu solidarności międzynarodowej. Konieczne jest podniesienie poziomu świadomości globalnej odpowiedzialności społecznej, zwłaszcza w mediach audiowizualnych, w celu pełnego włączenia osób z dysfunkcją słuchu w przestrzeń publiczną. Misją instytucji szkolnictwa wyższego powinno być przezwyciężanie słabej społecznej odpowiedzialności mediów poprzez wprowadzanie mechanizmów dostępności cyfrowej i doskonalenie umiejętności międzykulturowych przyszłych pracowników mediów.