

JESS CROMBIE

Ethics and Equity

A new chapter
for fundraising storytelling?

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Session outline // Morning

Time	Activity
10.30 – 10.40am (10 minutes)	Introductions: Why are we here?
10.40 – 10.55am (15 minutes)	What is ethical storytelling – and how do we recognise it?
10.55 – 11.10am (15 minutes)	Looking inward: What needs to change in our ways of working?
11.10 – 11.25am (15 minutes)	Looking outward: Being inspired by others
11.25 – 11.40am (15 minutes)	Discussion
11.40 – 11.45am (5 minutes)	Wrap-up and commitments: What will you do differently after today?

Introductions

Why are we here?



Objectives for today's session

- ✓ Understand **what ethical storytelling means in a fundraising context.**
- ✓ Explore examples of **brave best practice** from across the sector.
- ✓ Consider **how you might translate these lessons** to your own work.
- ✓ Identify some **concrete next steps.**
- ✓ Leave **feeling a little more confident** about the road ahead!



What is ethical storytelling?

How do we recognise it?





Let's hear from you!

1) Go to **mentimeter.com**

2) Enter the code **5224 2356**

3) Tell us: What does ethical storytelling look, sound and feel like to you?



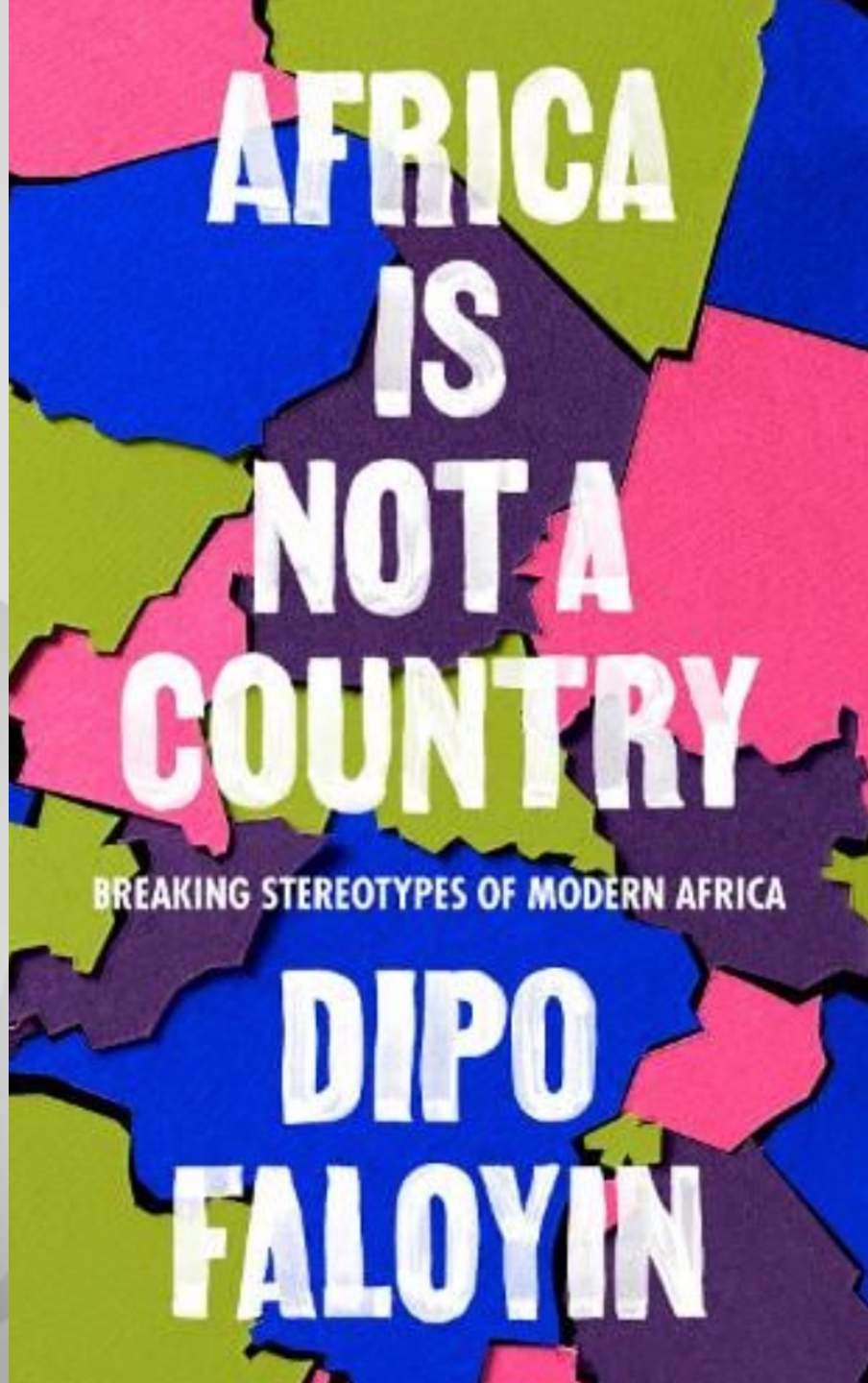
Power-conscious storytelling that considers the multiple impacts of:

a) the **story production process**, and

b) the **end product / representation**, upon both contributors and audiences.



- Okay, you must ask permission
to tell stories from now on.



“Images are still widely understood to be harmless, as long as they have a flicker of charitable intent behind them [...]

It’s understandably hard to imagine how a single Instagram post can break a region. Until you appreciate that **it’s not about a single photo, but the cumulative power of having these perceptions continually regurgitated**, with multiple generations in the West growing up with the same paternalistic relationship with the continent, adding their own modern pieces to **a mosaic too ingrained in the collective subconscious to easily break apart.**”



“We brown-skinned folk identify ourselves, albeit a grossly misshaped version of who we think ourselves to be. We know what they are saying about Blacks, about Africans, that we are nothing more than beggars, that we are the lowest of all the low and that’s racist, without a doubt it is.”

Interviewee quote from ‘Seeing and Being the Visualised Other’,
Dr. Edward Ademolu (2021)



'I Googled "white guy" and there I was': stock photo models on seeing their faces in everything from ads to ridiculous memes



“Shocked, I reverse-image searched the picture on Google, and was stunned. **There I was, in all corners of the web and all around the world.** I was the face of eye cream, skin-lightening, makeup, laser treatments, dentistry. I was in ads for banking, insurance, teaching and management [...] I sold carpets in New York, travel packages in Cambodia and, yes, promoted immigration in Uruguay and Canada.”

Shubnum Khan, author, photographed as a student





HOLLYWOOD

Key components of ethical storytelling

- 1) **Power** is spoken about - and shared
- 2) **Consent** (informed)
- 3) **Context** and nuance
- 4) **Co-creation**: process as well as product
- 5) **Accountability**





**Raising
money**

?

**Narrative
changes**



Looking inward

What needs to change in our ways of working?



“I was outside my house washing dishes, suddenly a white woman was taking my picture. **I felt like a tiger in a cage.** Before I could say anything, she had moved on.”

from Unsilenced by Rasna Warah (2016)



“It is good to tell your own story because **the one who has the problem knows it better.**”

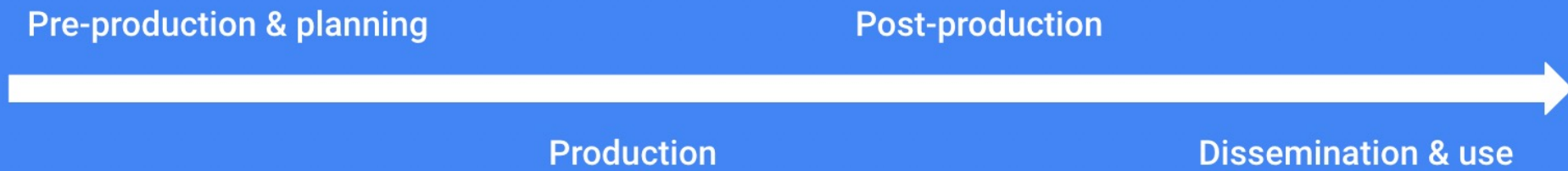
Participant in Bangladesh, ‘The People in the Pictures’, Warrington & Crombie (2017)

“..that is reality as it is... from his own mouth. And one feels the pain; **he himself is in the best position to explain.**”

Participant in Niger, ‘The People in the Pictures’, Warrington & Crombie (2017)



The content lifecycle



The content lifecycle

Pre-production & planning

- Writing a brief
- Commissioning creative work
- Composing your team
- Identifying contributors
- Logistics (inc. compensation)

Post-production

- Translation
- Writing up stories
- Editing images
- Editing videos
- Contributor feedback



Production

- Filming
- Photography
- Interviews
- Gathering consent
- Expectation mgmt

Dissemination & use

- Selecting images
- Captioning images
- Choosing an angle
- Providing context
- Renewing consent





muholizanele

Mep



“I do not like, and have never used or related to, the term ‘subject’. Photography to me is supposed to be a collaborative act.”

– Zanele Muholi



Zanele Muholi, artist and activist, February 2023





“We use the phrase ‘to take a photograph’. But I always say **the best photographs aren’t taken; they are given.**”

Stories are the most precious things we have.”

Giles Duley, photographer, 2020



Extraction



Exchange

Saviourism



Solidarity



1) Communicate the change



2) Share the responsibility



3) Share narrative power (properly)



Looking outward

What can we learn from others?






**Raising
money**

?

**Narrative
changes**



#OverExposed // Chance for Childhood



**Chance for
Childhood**

REFRAME OUR THINKING.

RESHAPE THEIR FUTURE.

Today, Jean's mostly thinking about attending her dance class and seeing her friends there.

Tomorrow, she may not even know that a photo of her face has gone viral, and will live online forever.

#OVEREXPOSED



WE WANT TO STOP #OVEREXPOSED IMAGES OF CHILDREN- WILL YOU JOIN US?

8 September 2022

We are ceasing the use of identifiable features of children aged under 18 from our photography and videos and we will completely remove children's faces from all our fundraising activities from the 8th of September onwards.



Our new #OverExposed campaign aims to reframe the thinking around using images of children for fundraising purposes and, importantly, we anticipate it will galvanise a sector-wide change in the way that organisations reflect on their own editorial standards.

We all know that for many years photos of children's faces have been the bedrock of fundraising so while it hasn't been an easy decision to stop using them, we're sure you agree that it is the ethical one.



This decision has been taken based on the following pledge on the ethical standpoints of the organisation:

- We will prioritise the rights and well-being of the children sharing their stories with Chance for Childhood.
- We acknowledge that informed consent is complex, can change over time and may not always be possible.
- We will share stories of children using positive strength-based language.
- We will actively ensure that no child is put at risk by the way we share their story online.
- Above all, Chance for Childhood will continuously reflect on the power and responsibility we hold in collecting and using stories and images of children.

As part of **OverExposed**, Chance for Childhood has taken the decision to remove identifiable features of children from imagery and video footage, this will include removing children's faces from all fundraising campaigns.

WHAT WILL YOU DO TO REFRAME YOUR THINKING?

Pledge to reshape
your thinking and
start the
conversation

ORGANISATION

Join the movement
and help reframe
the story by taking
the pledge today

INDIVIDUALS

Start the
conversation! Access
our free learning
resource

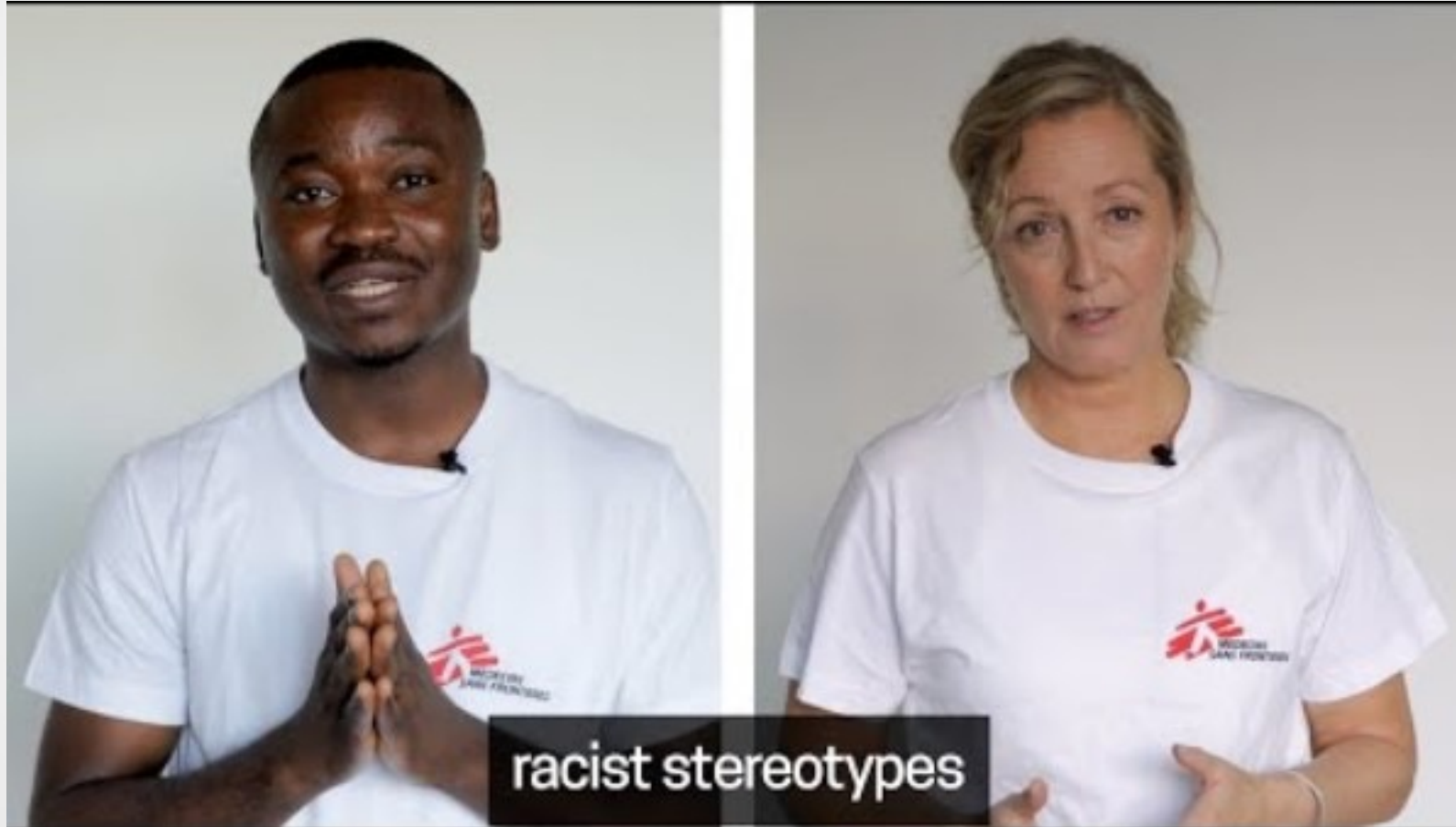
RESOURCE HUB

Fight for Every Child!
Ensure all children
can have a safe &
happy childhood

DONATE



Anti-racism video // MSF Norway



We Built this Town // Tearfund



“Doing nothing” // CCFD Terre Solidaire



Who Owns the Story? // Amref Health Africa

WHO OWNS THE STORY?

Live financial testing of charity vs participant led storytelling in fundraising

Jess Crombie and David Girling

March 2022

THEY DESERVE BETTER, IF NOT THE BEST...

amref health africa

uol: london college of communication

UEA UNIVERSITY OF EAST ANGLIA

SCHOOL OF INTERNATIONAL DEVELOPMENT

An elderly man called Omonkang, lives alone in a small hut in the village of Mambur, Kibera.

An elderly woman (Abel) sits outside her house where she lives alone in Mambur, Kibera.

An elderly man called Omonkang, lives alone in a small hut in the village of Mambur, Kibera.

An elderly woman (Abel) sits outside her house where she lives alone in Mambur, Kibera.

Community Health Volunteers from Amref (Patrick) is helping an elderly person (Tom) to check his blood pressure.

All photography © Patrick Mwangi

VACCINE SOLIDARITY WITH AFRICA



NO TIME TO WASTE: HELP SAVE LIVES!

Dear [name],

Here in the UK, everyone is talking about the COVID-19 vaccine: when they'll get it, if they haven't got it yet, when their loved ones might get it, the plans they'll make once they're protected. For most people in Africa, being vaccinated against COVID-19 is a much more distant prospect.

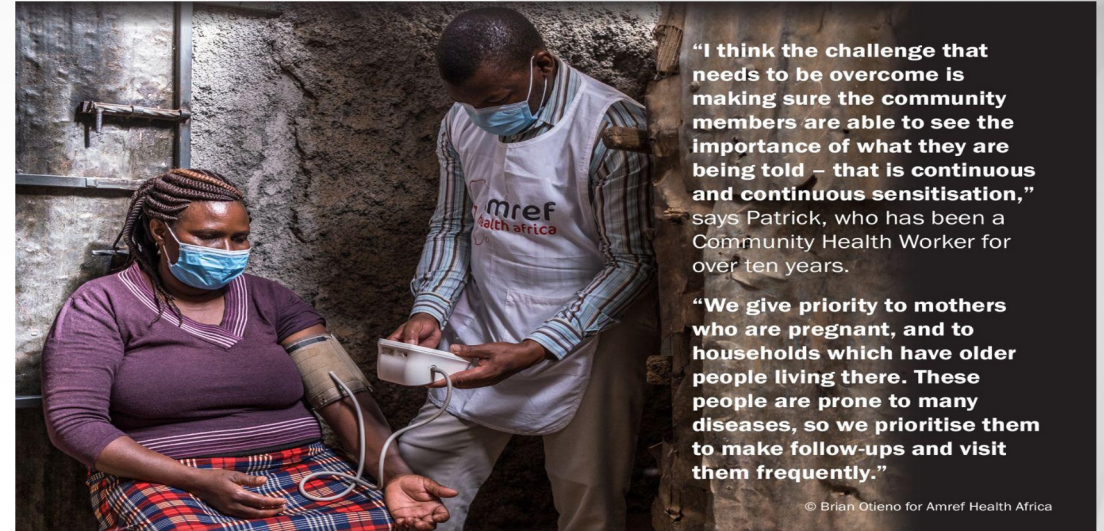
This is the largest and most complex global vaccination campaign in history – but it has been strikingly unequal. As it stands, only one in ten people in Africa will be fully vaccinated by the end of this year.

The pandemic won't be over for anyone until it is over for everyone, and Amref is uniquely positioned to support the roll-out of vaccination programmes across Africa.

The challenges are numerous. First, African governments need to be able to acquire enough doses. Those vaccines then need to be safely stored and transported to the places and communities where they will be administered. The health workers who will deliver them need to be vaccinated themselves, as well as being trained to address people's fears and the widespread myths and misinformation surrounding the vaccine.

In the meantime, the people and communities that Amref supports are also facing immediate concerns and worries: loss of work and income, difficulties in accessing routine healthcare, a rise in sexual and gender-based violence, as well as the mental health impact of the pandemic. Helping them face these challenges are the committed health workers who have been at the forefront of the COVID-19 response for more than a year.

At Amref, we have fresh admiration for the incredible health workers who have worked so hard during the pandemic, here in the UK and around the world – as I'm sure you do, too. **Day after day, these health heroes have selflessly cared for other people and put their own lives at risk.**



"I think the challenge that needs to be overcome is making sure the community members are able to see the importance of what they are being told – that is continuous and continuous sensitisation," says Patrick, who has been a Community Health Worker for over ten years.

"We give priority to mothers who are pregnant, and to households which have older people living there. These people are prone to many diseases, so we prioritise them to make follow-ups and visit them frequently."

© Brian Otieno for Amref Health Africa

For more than 60 years, we've been connecting some of Africa's most remote and marginalised people and communities with life-saving care. With your support, Amref Health Africa is committed to achieving vaccine equity. We'll make sure no-one is left behind. We will ensure vaccines arrive at their destinations safely – even in remote areas – and that they can be stored in the appropriate conditions. We will ensure that the vaccine is administered by well-trained health workers. We will create the conditions for a successful vaccine campaign: one that has communities at its heart.

By giving a gift today, you will help us continue to champion the incredible work that people like Patrick do and accelerate vaccine uptake across Africa.

By getting behind our campaign, you will be supporting the many health heroes working tirelessly in their communities to tackle the pandemic and save lives.

Play your part in ending the pandemic. Stand in Vaccine Solidarity with Africa.

Thank you and best wishes,

Camilla Knox-Peebles
Chief Executive, Amref Health Africa UK

Thank you so much



Control creative



VACCINE SOLIDARITY WITH AFRICA

This is a global threat that requires a global response, rooted in solidarity and a shared responsibility. Led by our headquarters in Nairobi, we are launching the **VACCINE SOLIDARITY** campaign which aims to deliver new interventions to support governments to deliver a comprehensive COVID-19 vaccination programme across the continent.

The COVID-19 vaccine is every human's right and health workers will play a critical role in vaccination efforts across Africa – from administering the vaccine to mobilising communities and tackling misinformation – to ensure the most marginalised people and hardest-to-reach communities are not left behind.

One of these health workers is Patrick Malachi (pictured), who I would like to introduce you to today. He is one of the extraordinary Community Health Workers we work with in Kibera, Nairobi: Africa's largest informal settlement. Kibera is home to approximately one million people, many of whom are unemployed and live on less than one US dollar per day. Access to basic services, including electricity, clean water, and medical care, is limited.

Where you live should not determine whether you live.

Community Health Workers are members of the local community who volunteer their time to bridge the gap between the community and essential health services. They have been at the forefront of the fight against COVID-19, making household visits and holding socially distanced public information forums to ensure their communities are well-informed on the ways they can protect themselves and others from COVID-19.

With the generous support of people like you here in the UK, we have provided training for over 270,000 health workers – most of them Community Health Workers - since the first cases were confirmed on the continent. Through face-to-face training and mobile and online learning, we have equipped them with the skills and knowledge to advise their communities on how to access the care they need and ultimately save lives.

You've helped us get this far. And now we're facing a new challenge.

As trusted members of the community, Community Health Workers are well-placed to dispel myths and misinformation about COVID-19 and other conditions, creating demand for vaccine uptake and ensuring no-one is left behind.

© Brian Otieno for Amref Health Africa

Control creative



An elderly man called Tom stands outside his house. Tom lives alone in a one room house in Mashimoni, Kibera.

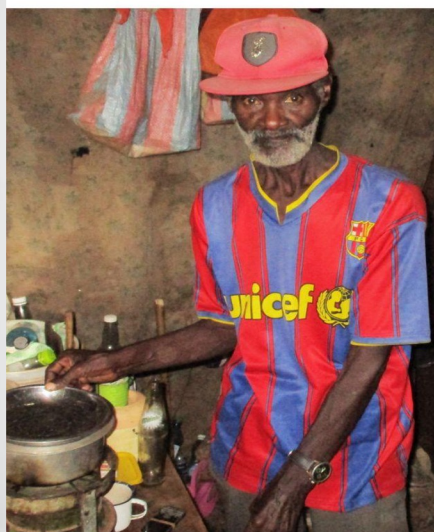


An elderly woman (Ake) sits outside her house where she lives alone, in Mashimoni, Kibera.



Ake stands outside her house.

THEY DESERVE BETTER, IF NOT THE BEST...



“My name is Patrick and I am a Community Health Volunteer here in Kibera, Nairobi. Have you ever encountered an elderly person who is lonely, frustrated, sick and has no hope either in your household, village, town or your country? This group of people need special attention and I place a question to humanity: when was the last time you paid a visit to an elderly person in your community? And do you know their needs? As community members we have a role to play as humans in helping these people live a dignified life.”

Mr Cheke prepares a meal inside his house at Mashimoni, Kibera.



Mr Chege sits inside his house at Mashimoni, Kibera.



Community Health Volunteer from Amref (Patrick) is helping an elderly person (Tom) to check his blood pressure.

“Elderly people deserve better, and we can see a reflection of their sadness, fatigue and poverty from my images. I know they represent many more elderly persons in our society who deserve a smile. An intervention in medical care, economic empowerment and formation of support groups where they discuss their challenges and success. I know this can be achieved with the support of the communities, health facilities and well wishers who want to see change.”

Text, photography and design concept by Patrick Malachi,
Amref Community Health Worker.

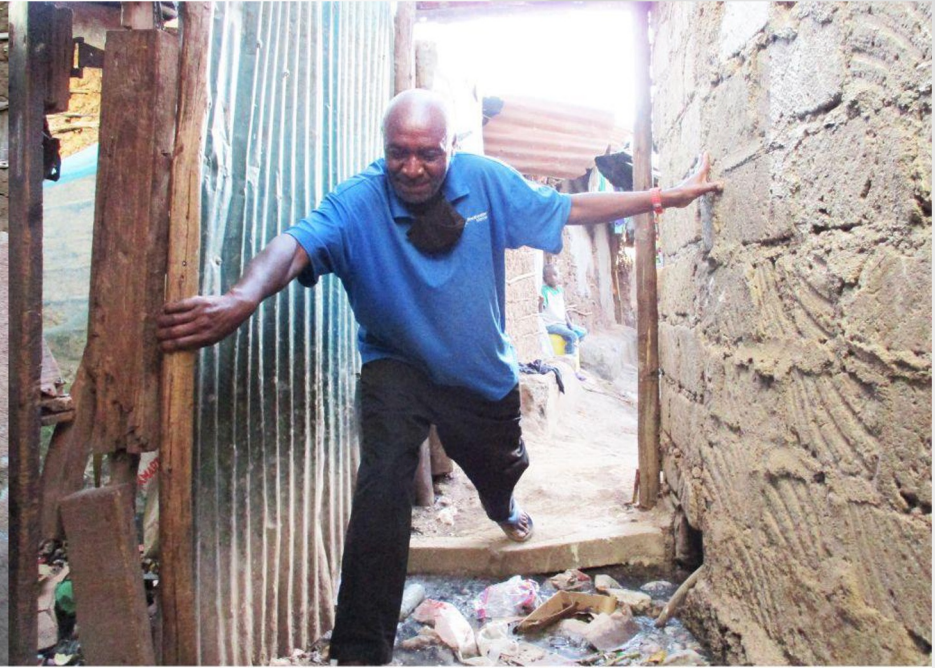




Ake, an elderly community member, trying to walk to her house in Mashimoni, Kibera.

OUR ELDERLY PEOPLE HAVE A RIGHT TO HEALTHCARE.

“Sometimes the right to healthcare can be limited by their mobility. We can do better by providing this right to people like Ake who cannot walk to the health facility by bringing the services to their doorstep. The Community Health Volunteers have the capacity and the will to provide the elderly with services like blood pressure screening, monitoring blood sugar levels and distribution of commodities like medicines.”



Tom, an elderly man is trying to manoeuvre his way to his house with bad terrain and poor infrastructure in Mashimoni,

ELDERLY PEOPLE ALSO HAVE DIFFICULTIES TRYING TO MANOEUVRE.

“Tom, an elderly community member is finding it so hard to find his way around Kibera. There are many more elderly people in my society with the same challenge, we can make their lives easier by making sure that they are able to access the important services in our society. If the community health volunteers are well trained, facilitated and equipped then our elderly population will have reason to smile.”

FINANCIAL RESPONSE

The two fundraising packs were distributed by post during July 2021 to existing supporters on the Amref UK database

Participant
created pack
898 supporters

Amref
created pack
896 supporters

Key findings

- 1 The participant created pack **raised more money** than the Amref created pack.
- 2 The participant created pack raised an average of **38% more** than the quarterly fundraising packs usually sent out by Amref in previous appeals.

Data analysis

The overall Summer Appeal (excluding Gift Aid) **raised a total of £13,911** which is above the original target which was set at £11,000.

Participant created pack

- A total of 88 gifts were donated totalling £6708
- The average gift was £76.23
- Male donors - 42 gifts - average - £82.14
- Female donors - 42 gifts - average - £72.26
- 4 unknown

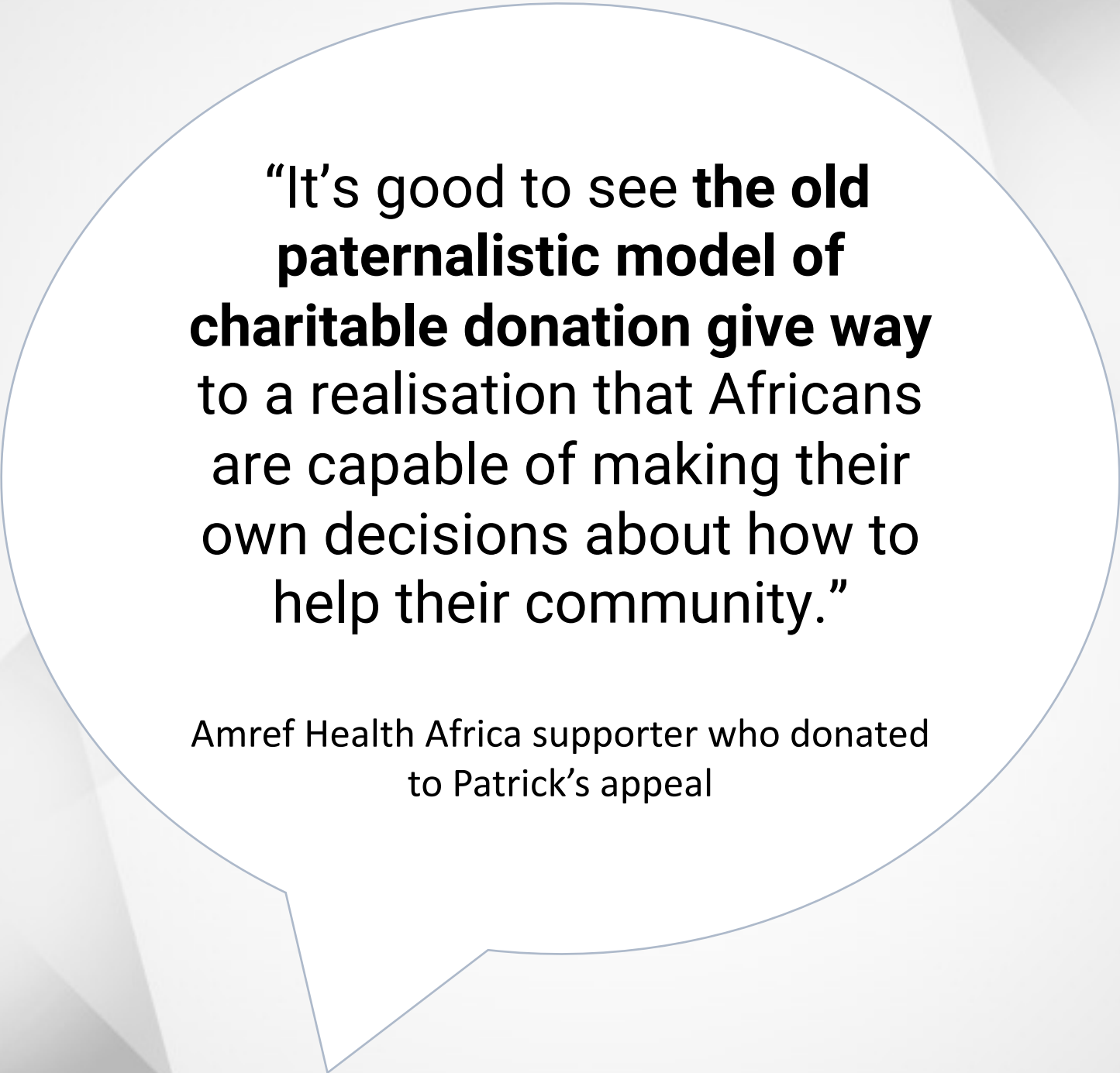
Amref created pack

- A total of 110 gifts were donated totalling £6105
- The average gift was £55.50
- Male donors - 50 gifts - average - £68.30
- Female donors - 60 gifts - average - £44.83

*Personal supporter data available was limited to gender and age, we did not have access to other supporter characteristics such as race.

Based on previous data for this subset of supporters, the average gift is £47.69. Therefore this pack initiated a **38% increase** compared to previous appeals.

Based on previous data for this subset of supporters, the average gift is £48.91. Therefore this pack initiated a **12% increase** compared to previous appeals.



“It’s good to see the old paternalistic model of charitable donation give way to a realisation that Africans are capable of making their own decisions about how to help their community.”

Amref Health Africa supporter who donated
to Patrick’s appeal



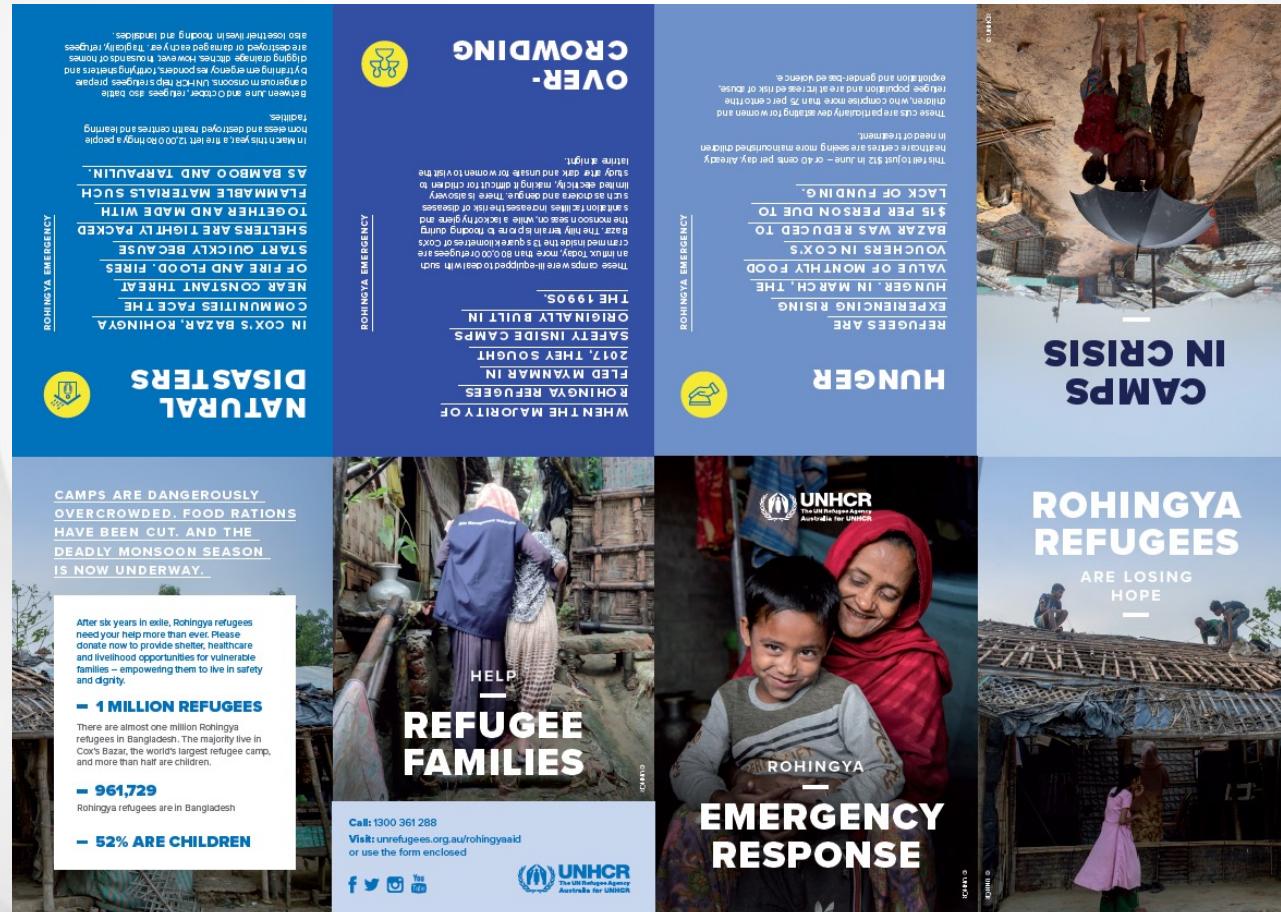
“I feel appreciated that we came with a story about my community, I am the one who developed a story, rather than the world telling my stories.”

Patrick Malachi

Community Health Worker, Kibera



“Pass the mic” project // UNHCR



Control creative

[Test]:Send help to Rohingya refugees facing ration cuts



Australia for UNHCR <reply@email.unrefugees.org.au>

To ☐ Jenny Jung



Dear Charlotte,

If you only had 40 cents to spend at the supermarket, what would you put in your basket?

At a food distribution centre in Cox's Bazar, Amina, 66, scans the shelves. There are lentils, potatoes, onions, eggs and rice on offer. But with barely any credit left on her food voucher, all she can afford is a bottle of cooking oil and a bag of red chillies. She begins to weep.

"I do not know what I will do," says Amina. "How will I survive on this?"

HELP ROHINGYA REFUGEES

After fleeing violence in Myanmar, almost one million Rohingya refugees like Amina are living in overcrowded camps in Bangladesh. Everyday life is a struggle.

But the situation just became even more dire. A lack of funding means that Rohingya refugees' food rations have been cut twice in the last few months.

Now, Amina has a paltry \$12 per month to spend on food – or 40 cents per day.

Hunger is rising quickly, with clinics already admitting more children for malnutrition treatment. Our staff are conducting health checks and providing nutrition supplements for the most vulnerable, including young children and pregnant or breastfeeding mothers.

Charlotte, Rohingya refugees are hanging on by a thread. Will you send help now?

DONATE NOW

With your support, we can provide therapeutic food and medicine for families who have already endured so much.

Thank you for continuing to care for Rohingya refugees.

Yours sincerely,

J Mitchell



"Many volunteers do not have proper equipment"

A volunteer trained by Mohammed Salim Khan is fighting a fire in Camp 11 in March 2023.

Photo by: Mohammed Salim Khan

"Cox's Bazar is hosting nearly 1 million Rohingya refugees, in the largest refugee camp in the world"



Community leader passes information to members of the refugee community. Photo by: Mohammed Salim Khan



A fire training demonstration in a refugee camp, Cox's Bazar, Bangladesh. Photo by: Mohammed Salim Khan



Mohammed Salim Khan, trainer of community volunteer fire fighters. Photo by: Mohammed Karim

"I have been working as a trainer for 5 years. I have trained volunteers in 33 camps in fire fighting and flood prevention."

I would like to share with the world community that Rohingya refugee photographers are trying to show more about their lives through exhibitions in different places. A group of us have already shared our work for an exhibition that UNHCR organized called Kutupalong Exhibition on the theme of Rohingya women's empowerment. We also contribute to UNHCR's social media.

Our hope is to share the reality about our refugee life. As a refugee this is hard to do with limited tools but we have been doing our level best to continue showing our experience. **This is our Rohingya community and the world should know about our lives.**



A community leader that Salim has trained on flood and fire safety measures. Photo by: Mohammed Salim Khan

Mohammed Salim Khan has been capturing the lives and emotions of his community who have been fleeing violence and persecution in Myanmar for decades. His photos have appeared in Bangladeshi and international media, as well as international exhibitions.

Test
creative

[Test]:I am a photographer documenting this refugee life.



Australia for UNHCR <reply@email.unrefugees.org.au>

To Jenny Jung

If there are problems with how this message is displayed, click here to view it in a web browser.



Dear Charlotte,

As I shared with you before, as a fire and flood safety instructor myself, and a photographer, I believe people around the world need to know about the dangerous situation Rohingya refugees are facing in Cox's Bazar.

There are many people taking photographs in the camps, including community members taking evidence for the organisations they volunteer with and some professionals taking photographs as freelancers. **I know the risks because I am also a photographer documenting this refugee life.**

Fire fighters and photographers in the camps are the most at danger as they are covering these emergencies on the frontline, every time they happen. When refugees try to take photographs to help cover emergency stories of fires and floods, they are in real danger. Sometimes they try to get in front of the fire and get burned or inhale smoke. My goal is for future generations to know about these fires. [You can help us stay safe.](#)



PLEASE HELP SALIM AND HIS COMMUNITY

I want to share with the world community that Rohingya refugee photographers are trying to show more about their lives through exhibitions in different places. A group of us have already shared our work for an exhibition that UNHCR organised called Kutupalong Exhibition on the theme of Rohingya women's empowerment. We also contribute to UNHCR's social media. **Our hope is to share the reality about our refugee life.**

As a refugee this is hard work to do with limited tools, but we have been doing our level best to continue showing our experience. **This is our Rohingya community, and the world should know about our lives.**

[Please help to safely equip Rohingya volunteers so we can protect our communities and share our experiences with the world.](#)

Thank you,

Hearing from the People in the Pictures //

Shelterbox

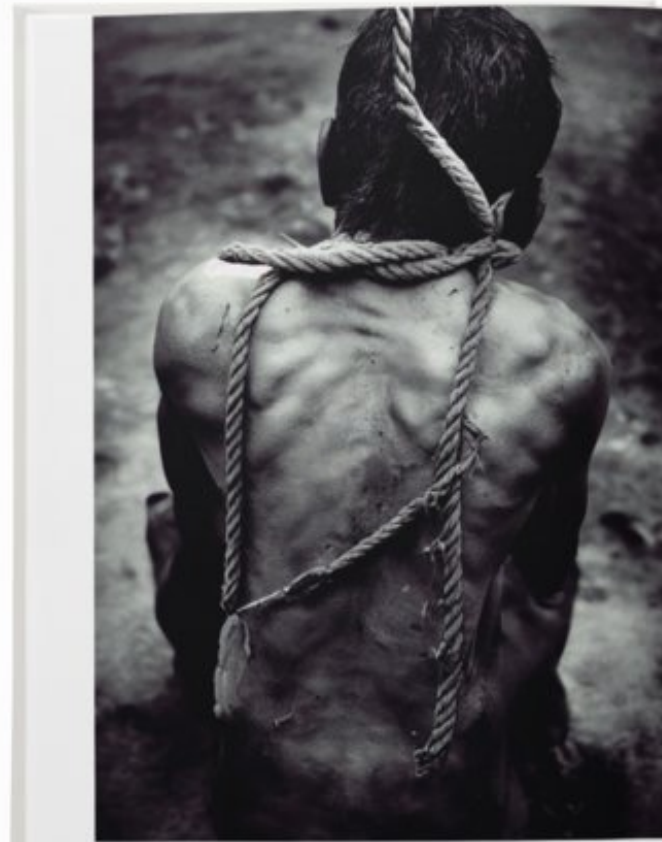


**CONTENT FOCUS GROUPS-
MINAWAO CAMP**



Exhibit A1: The Refugee Account //

Maurice Blackburn Lawyers



Chief Witness

41. During my last year in Delta Command, in around late 2006, maybe early 2007, I witnessed a report of a man who appeared to have hung himself on a tree. He was already dead when I found him.
42. This friend had mental health issues and had gone to Australia for medical treatment. He was then returned to Manus Island.
43. Approximately 1 year after he was returned to Manus Island I found him hanging from a tree. When I saw him, I saw that he appeared to have lots of cuts and bruises all over his body.
44. He was also only hanging one metre off the ground. I could see that his knees were touching the ground. This made me think that someone had tightened my friend, and had made it appear to be a suicide to hide this fact.
45. I watched as the police took my friend down from the tree.
46. I, and some other refugees wrote a request form asking Australian Immigration for more information. We also wrote to security asking the same. In these forms we said we had concerns about what had happened. We noted that it appeared that he may have been mistreated. We asked them to consider why he had cuts and bruises, and if he hanged himself, how did his knees touch the ground?
47. We received a response telling us that it was a suicide case and any further information was none of our business.

"I found him hanging from a tree. When I saw him, I saw that he appeared to have lots of cuts and bruises all over his body. He was also only hanging one metre off the ground."





1. 300 hours of interviews were conducted with survivors



2. Survivors workshoped images with AI technicians and photojournalists



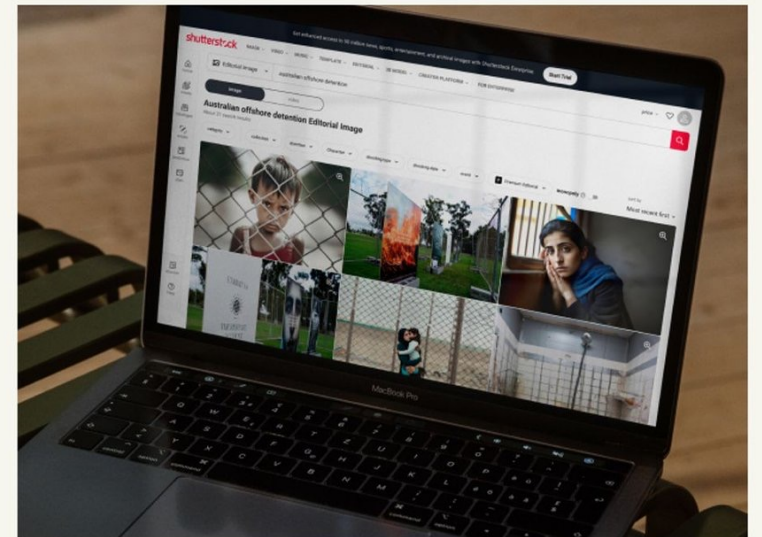
3. Every detail was made as accurate as possible



4. Evidence was compiled into a book and submitted to politicians and media



5. It was then shared with the public through OOH, online and exhibitions

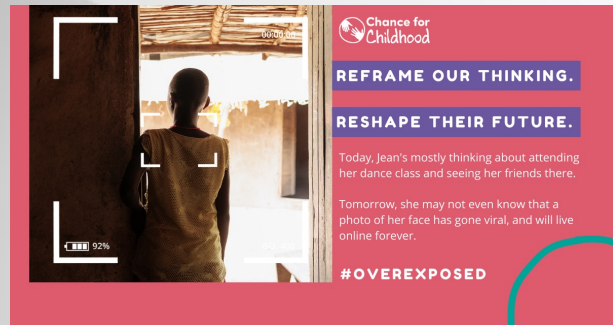


6. And uploaded to editorial stock libraries to sit alongside real photojournalism



Which example:

- Spoke to you most powerfully?
- Seems most applicable?
- Feels riskiest?



Where do we go from here?

What could you do differently?



Starting where you are: Practical steps



Conduct an audit of your **policies and processes**.



Think about who you can influence vertically, horizontally, diagonally.



Seek out allies and start an under-the-radar revolution!

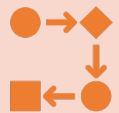
Starting where you are: Practical steps



Consult your supporters, and your contributors.



“Circle back” more often and incorporate contributor feedback.



Use the evidence that’s out there . . . and generate your own!

Challenges you might encounter

Fear of change

Defensiveness / guilt

Financial risk / fear of damaging supporter relationships

Overwhelm / uncertainty: now knowing where to start



Challenges you might encounter

Fear of change

Change is already happening: there's **no going back!**

Defensiveness / guilt

Accountability is important, but it's about **what we do now we know better**

Financial risk / fear of damaging supporter relationships

Rethink risk; focus on **opportunities; trust our supporters**

Overwhelm / uncertainty: now knowing where to start

Start somewhere!



What will you do differently . . .

1) To communicate
the change?

2) To share
responsibility?

3) To share
narrative
power?



So, what does this all mean for me and my fundraising?



- A personal mindset shift
- A long-term plan for change (1 – 5 years)
- Senior Leadership Team support to take risks
- Real scenarios in which to test and learn
- Creativity and tenacity



EVERYTHING EVERYWHERE ALL AT ONCE



Session outline // Afternoon

Time	Activity
1.15 – 1.25pm (10 minutes)	Introductions: Why are we here?
1.25 – 1.40pm (15 minutes)	What is ethical storytelling – and how do we recognise it?
1.40 – 1.55pm (15 minutes)	Looking inward: What needs to change in our ways of working?
1.55 – 2.10pm (15 minutes)	Looking outward: Being inspired by others
2.10 – 2.25pm (15 minutes)	Discussion
2.25 – 2.30pm (5 minutes)	Wrap-up and commitments: What will you do differently after today?



Let's hear from you!

1) Go to **mentimeter.com**

2) Enter the code **3473 4328**

3) Tell us: What does ethical storytelling look, sound and feel like to you?

