Strengthening risk communication and community engagement in disease outbreak response: *a systems perspective*

Workshop on Building Communication Capacity to Counter Infectious Disease Threats

Erma Manoncourt, PhD
M&D Consulting Inc.
Wednesday, 14 December 2016
Lessons Learned from Ebola and Vaccine-derived Polio Virus Outbreaks

- Coordination mechanisms for risk communication
- Preparedness to detect and respond to outbreaks
- Building communication capacity in a limited resource environment
- Bottlenecks
Improving Data & Strategic Information Systems
Enhancing Technical Capacity
Systematizing Technical Guidance
Improving Data & Strategic Information Systems
Increasing Institutional Resources
The UN Mission for Emergency Ebola Response (UNMEER)

**Mission Critical Activities**
- Case finding & contact tracing
- Case isolation & management
- Community engagement & behaviour change
- Safe Burials

**UN Agency Lead**
- WHO
- WHO, WFP & UNICEF
- UNICEF
- ICRC

**UNMEER**
- Coordination & Crisis Management
Strengthening Leadership and Coordination

Ebola - Social Mobilization & Community Engagement Pillar

Global Polio Eradication Initiative (GPEI) Partnership
EBOLA
SOCIAL MOBILIZATION / COMMUNITY ENGAGEMENT

Pillar

Chair: MOH  Co-chair: UNICEF

- Partners
- UN Agencies
- NGOs/Civil Society
- Government Ministries

DISTRICT Superintendent (Chair)
CBOs, NGOs, UN, Community Radio

- Religious Leaders
- Neighborhood Watch
- Traditional/Local Leaders
- Health Workers
- Teachers
- Family
GPEI Partnership

National Government +
- WHO
- Rotary International
- Centers for Disease Control
- UNICEF

Bill & Melinda Gates Foundation

- UN & other private Foundations
- Development banks
- EU & donor government
- Humanitarian & NGOs (i.e. Red Cross/Crescent)
- Corporate partners
- In-country volunteers
Strengthening Risk Communication

Enhancing Technical Capacity

Systematizing Technical Guidance

Surge Capacity Mechanisms

Academic – Corporate Partnerships

National Comprehensive Capacity Development Plan
- Frontline workers
- Supervisors & Managers
- Policy/Decision-Makers
Train, Motivate and Empower Frontline Workers

Operational and Communication Priorities

Data

Trust

Selection

Training

Tools

Supervision & Motivation
Strengthening Risk Communication
Clarifying the “Who”

Ebola Response
- Communication/Journalist/
  FLWs (Social Mobilizers)
- Safe Burial Teams
- Case Managers
- Contact Tracers

Polio Outbreak
- Communications /Social
  Mobilizers
- Immunization/Polio/
  Health Officers/Managers
- FLWs/Vaccinators
Enhancing Technical Capacity

Systematizing Technical Guidance

Standard Operating Procedures (SOPs) & Preparedness Training

Online Support

Technical Advisory Group (TAG)

Joint planning / programming frameworks
C4D Preparedness for Polio and Disease Outbreaks

POLIO COMMUNICATIONS

GLOBAL TOOLKIT

A GUIDE TO THE STRATEGY AND ART OF MAXIMIZING IMMUNIZATION RATES THROUGH COMMUNICATIONS
SOP Risk Communication
Polio Outbreak Response

- **MEDIA**
  - 24 h
  - 72 h
- **C4D**
  - <14 days
  - > 14 days
- **MEDIA**
Strengthening Risk Communication

- Independent Monitoring
- Outbreak Assessment (OBRA)
- National Social Science/Anthropology Researchers/Networks
- Community Monitoring

Improving Data & Strategic Information Systems
2.A Chiefdom - Did you see any Miking activities today?
5. Have you heard of any secret burials today?
Increasing Institutional Resources

- Private sector
- Convergence with other health-related programs/Ministries’ initiatives
- Prepositioning w/n ongoing programmes
- Community in-kind/volunteers
Strengthening Risk Communication

CATCH 22 Bottlenecks

- Lack of consistent policy direction / guidance
- Topping off salaries
- Staff Turnover/Demotivation
- Health Promotion Dept in MOH – Relative power & influence w/n Government hierarchy
- Community “volunteers”
THANK YOU!
### Monitoring Key Determinants of Child Deprivations

<table>
<thead>
<tr>
<th>MAF</th>
<th>Determinants</th>
<th>Definitions</th>
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<tbody>
<tr>
<td>Enabling Environment</td>
<td>Social Norms</td>
<td>Widely followed social rules of behaviour</td>
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<td></td>
<td>Legislation/Policy</td>
<td>Adequacy of laws and policies</td>
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<td></td>
<td>Budget/Expenditure</td>
<td>Allocation &amp; disbursement of required resources</td>
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<td>Management /Coordination</td>
<td>Roles and Accountability/ Coordination/ Partnership</td>
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<tr>
<td>Supply</td>
<td>Availability of Essential Commodities/Inputs</td>
<td>Essential commodities/ inputs required to deliver a service or adopt a practice</td>
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<td>Access to Adequately Staffed Services, Facilities and Information</td>
<td>Physical access (services, facilities, information)</td>
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<tr>
<td>Demand</td>
<td>Financial Access</td>
<td>Direct and indirect costs for services/practices</td>
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<tr>
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<td>Social and Cultural Practices and Beliefs</td>
<td>Individual/ community beliefs, awareness, behaviors, practices, attitudes</td>
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<tr>
<td></td>
<td>Timing &amp; Continuity of Use</td>
<td>Completion/continuity in service, practice</td>
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<tr>
<td>Qty</td>
<td>Quality of care</td>
<td>Adherence to required quality standards (national or international norms)</td>
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# What went well

## Overall
- Visibility, information and outreach
- Communication skills training of frontline staff
- Mobilization of change agents – FBO, leaders, youth
- Engagement of communities

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<thead>
<tr>
<th>Guinea</th>
<th>Liberia</th>
<th>Sierra Leone</th>
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<tbody>
<tr>
<td>1. Mobilization of local leaders</td>
<td>1. Partner mobilization</td>
<td>1. Hot line</td>
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<tr>
<td>2. Training program</td>
<td>2. Media coverage &amp; involvement</td>
<td>2. Radio</td>
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<tr>
<td>3. Religious leaders highly involved</td>
<td>3. District level coordination</td>
<td>3. Outreach</td>
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<tr>
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<td>5. Evidence</td>
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<td>6. Hot spot approach</td>
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