









National Training of Trainers for



6 March 2020 | New Delhi

Risk Communication and Community Engagement

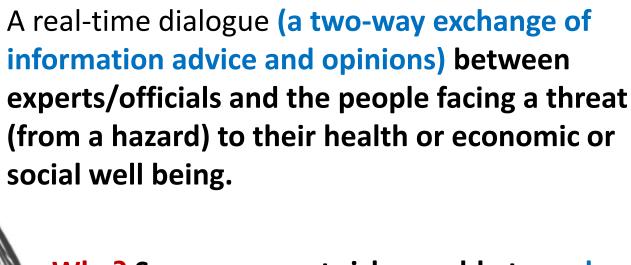
(Dr Padma M R, Epidemiologist, State Surveillance Unit)

Presentation Outline

- 1. Risk Communication and Communication Engagement (RCCE)-Understanding the concept
- National COVID-19 Risk Communication and Communication Engagement Approach
- 3. RCCE Resource Packages (Community, Health Service Providers and Workplace) and Communication Planning tool (for State Government Planning)
- 4. List of key RCCE focal persons

Risk Communication and Community Engagement

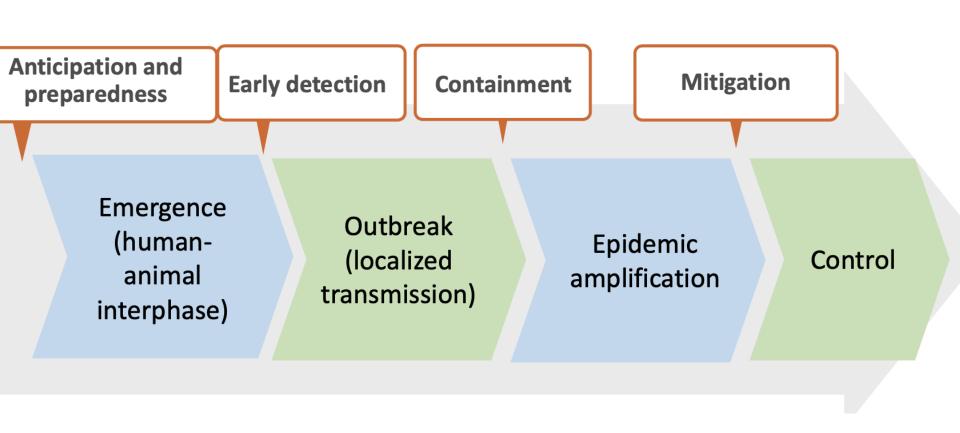
Risk Communication-what is it?





Why? So everyone at risk are able to make informed decisions to mitigate the effects of the threat —such as COVID-19 Outbreak — and take protective and preventive measures

What are the Risk Communication intervention points in epidemics and pandemics?



Why Risk Communication intervention during in epidemics and pandemics are important?

- Cultural practices and harmful social norms hamper uptake of preventive measures and safe behaviours (Fever is not seen as a threat, limited handwashing etc)
- 2. Concerns related to spread of COVID-19 due to direct close contact with suspected or confirmed patients (Close living quarters, taking care of sick family members)
- 3. Possibility of cross-infection in hospitals caring for patients with COVID-19 Infection
- 4. Access to limited trusted and correct information
- 5. New virus with an evolving aetiology lack of knowledge on how disease is transmitted

Risk Communication and Communication Engagement for epidemics and pandemics (COVID-19)

Be first, be fast, be frequent

(1)

Early first
announcement
essential to build
and maintain
public trust

2

Awareness of the disease and the situation is key, especially among health care workers and the populations at risk

3

Be proactive in information dissemination with frequent updates

Risk Communication and Communication Engagement for epidemics and pandemics (COVID-19)?

Help people take informed decisions to protect themselves

Develop easy to understand materials in languages and preferred channels of affected population

Identify and manage rumors and misinformation quickly

Use a mix of tactics and approaches for risk communication, including

Mass Communications, Community Engagement and Interpersonal Communications (One to one and Group Meetings)

Risk Communication and Community Engagement (RCCE)-How?

- 1. Ensure RCCE is part of National Outbreak/State Preparedness and Response Plan
- Develop a national RCCE plan with state guidance, clear objectives, outcomes and resource requirement
- Establish RCCE coordination mechanism for information sharing, addressing rumours and fast-track mechanisms for release of information
- 4. Establish a mechanism for monitoring media, social media and rumours, for timely management of misinformation

National COVID-19
Risk Communication and
Community Engagement
(RCCE) Approach

National COVID-19 Risk Communication and Community Engagement Approach

Aligned with Ministry of Health Family and Welfare Cluster Containment Plan **Anticipation and** Containment Mitigation **Early detection** preparedness Large outbreaks **Local Clusters Emergence** Outbreak (human-**Epidemic** (localized Control animal amplification transmission) interphase)

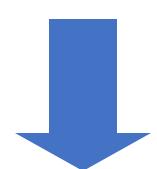
National COVID-19 Risk Communication and Community Engagement Approach-Guiding Principles

- 1. Phased approach for RCCE
- KAP in the affected states and regular community monitoring and listening
- RCCE (MoHFW/State Department of Health) institutional mechanisms for planning and implementation and monitoring
- Respect geographic diversity, social and cultural practices including local customs.
- 5. Keep it simple and sensible and to be based on the social data, media habits for effective and relevant content and communication

National COVID-19 Risk Communication and Community Engagement Approach-Guiding Principles

- COVID-19 virus is creating fear
- √ Communication needs to be direct, transparent & consistent
- Potential of Panic is very high
- √ Positive tone, a sense of reassurance as 81% of cases are mild
- •Prevention is crucial, provides meaningful rationale
 - ✓ Enhance understanding of risks/risk factors among general public and high risk groups
 - ✓ Everyone has a role to play

Overall Role for COVID-19 RCCE



Response and Control

2 Communication Components



Clusters of Novel Coronavirus Disease

- Encourage early health seeking behavior focused self reporting and monitoring especially in those with recent travel history or history of potential contacts
- Augment hand hygiene and respiratory etiquettes among general public as a routine/regular practices against everyday respiratory illness/respiratory tract infections



Widespread Community Transmission

To reassure the public reinforce the critical need to protect themselves, their families and others-social distancing measures, continued focus on hand-hygiene, respiratory etiquettes and early heath seeking behaviours (especially among high risk groups)

Therefore, National COVID-19 Risk Communication and Community Engagement:

- Ensure population at risk, is adequately protected from the infection of COVID-19 by creating awareness and knowledge on prevention behaviours and limits its impact by their improving hygiene and health seeking behavior
- Build capacities and strengthen Inter-personal skills of the frontline workers (ANM/ASHAs/AWWs), local health service providers and networks to ensure effective response of treatment and services
- Create an enabling environment at the national, state, and district level through strengthened coordination with partners, sustain political commitment and
- Effective advocacy for mass mobilization and minimize social disruption

Opinion makers

Community

VID-19

Health Service Providers



- General Public
- Travelers and their family members
- Indians living abroad
- School teachers,
 SMCs and children
- High Risk Group: Elderly and those with comorbidities

- Health staff and workers at General Health Facilities and Designated Hospitals
- ANMS/ASHAs

- Media
- Policy makers
- Partners
- Professional Associations (IMA, IAP) and private sector





Protect yourself and others! Follow these Do's and Don'ts





Practice frequent hand washing. Wash hands with soap and water or use alcohol based hand rub. Wash hands even if they are visibly clean



Cover your nose and mouth with handkerchief/tissue while sneezing and coughing



Throw used tissues into closed bins immediately



See a doctor if you feel unwell (fever, difficult breathing and cough). While visiting doctor wear a mask/cloth to cover your mouth and nose



If you have these signs/symptoms please call State helpline number or Ministry of Health & Family Welfare's 24X7 helpline at 011-23978046



Avoid participating in large gatherings

Don'ts ⊗



Have a close contact with anyone, if you're experiencing cough and fever



Touch your eyes, nose and mouth



Spit in public

Together we can fight Coronavirus

For further information:

Call at Ministry of Health, Govt. of India's 24X7 control room number +91-11-2397 8046

Email at ncov2019@gmail.com



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COVID-19 Preventive Measures







COVID-19 Intervention Framework: Motivating to act **Building Trust and Enabling local** environment Roll out Community To address Advocacy & Engagement activitiesfears and Media Community meetings promote Management under VHNDs, H2H with positive increased frequency. prcatices **IEC** Posters & Ports **Targeted information** of Entry materials Mass Media (TV, Radio, Print & local Media) **Creating general** awareness

Interventions by MOHFW and partners for COVID-19

- MoHFW collaboration with WHO, UNICEF and other key partners for RCCE
- Letters written to all Chief Secretaries towards disseminating do's and don'ts
- Intensive content posting-travel advisory, preventive measures on MOHFW social media handles
- Regular press conference and press releases-interaction with Hon'ble Minister and Senior Officials
- Community resource package with Posters, print ads AV products shared across ministries, states and social media platform
- Toolkit for Health Service Providers developed. Meeting with Private Sector Hospital conducted.

Internal and partner Coordination, Public Communication, Community Engagement, Capacity Building, Addressing Uncertainty, perceptions and managing mis-information

Creating Community Monitoring and Listening System

To address rumors, fake news and harmful practices and norms

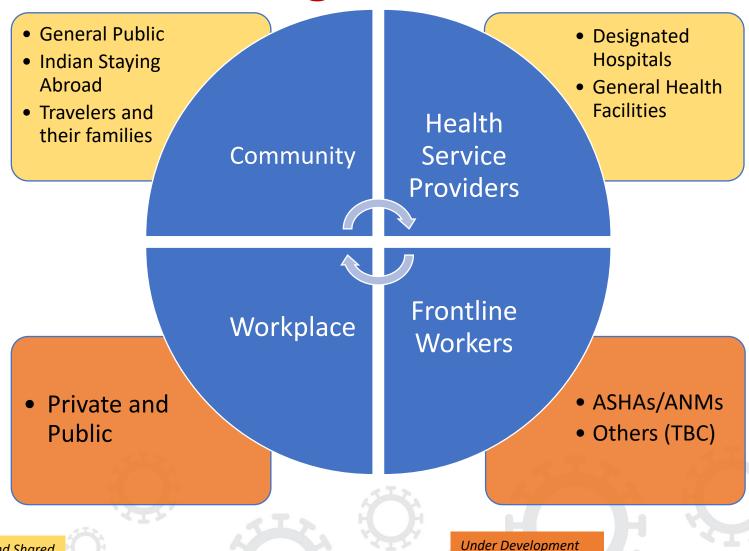
- Partnership with Facebook and Google
- Rumour and fake news tracking
- Myth-busters on all social media and community platforms-to provide correct information from trusted sources

Resource Packages and RCCE Planning tool

(Risk Communication and Community Engagement)

Communities, Health Service Providers including ASHAs/ANM and Workplace

Resource Packages



Community Resource Package

Print Materials

- Press Ads (MoHFW)
- Posters-Dos and Donts, 5 key Behaviours, Home Quarantine (only when there is community transmission)
- Standee for Indian Consulates for Indians Abroad

TV and Radio Materials

- 4 TV Spots-Cover your mouth, stay at home, hand washing and seek treatment
- 2 Radio Spots

Community Resource Packages



Yet To be approved PMO

(Yet to be approved by PMO)

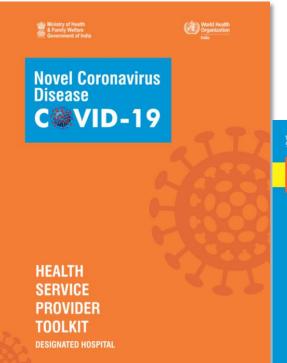
Community Resource Package

TV Spots: English and Hindi

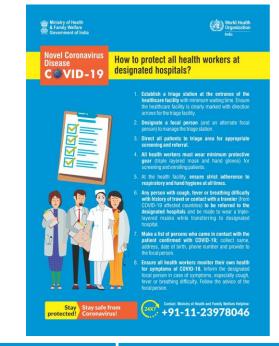
Health Service Provider Toolkit

Items	General Health Facility	Designated Hospital		
Poster 1: What is Novel Coronavirus Disease	Yes	Yes		
Poster 2: Is your healthcare facility ready to manage patients with COVID-19?	Yes (with referral message)	Yes		
Poster 3: Hand Hygiene	Hand Rub	My moments of Hand Hygiene		
Poster 4: How to manage suspected or confirmed patients with COVID-19 at designated Hospitals?	x	Yes		
Poster 5: How to protect all health workers at designated hospitals?	x	Yes		
Community Information Leaflets (2)	Yes	Yes		
Letter from Health Minister	Yes	Yes		

Health Service Provider Toolkit (Designated Hospital)

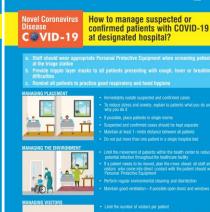








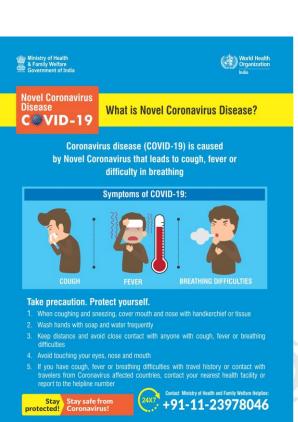


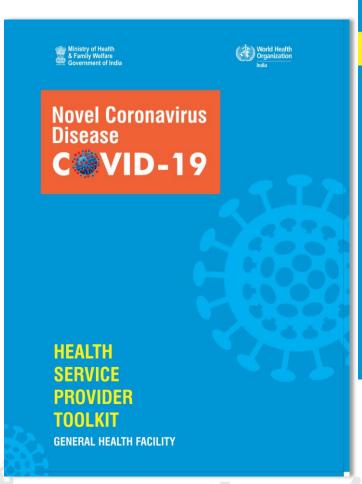


+91-11-23978046

Health Service Provider Toolkit

(General Health Facility)







Workplace and Frontline Workers package being developed





State level Risk Communication and Community Engagement Plan (Reccommended)

			State 1	evel comm	unication	plan (Fori	n No. 17B	3)				
	Name of th	ie state:	Name of District:						District IEC/ Media officer:			
		State RCCE group meeting	Date			Date			Date			
			Responsible person Responsible person					Responsible person				
	Advocacy	Orientation of RCCE group members	Date		Date Responsible person		Date Responsible person					
		Orientation of CSO partners,	Date			Date		Date				
		including religious leaders and										
		community influencer groups)										
Advocacy Meetings		Networking with school for	Date		Date			Date				
		supporting community mobilization	Responsible person			Responsible person			Responsible person			
		State media orientation workshop	Date									
			Responsible person									
		Any Other	Date					Date Responsible person				
								Responsible person				
Capacity building	Capacity	Training of block level health officers and FLWs	Date									
Social Media	Building	Constitution of social media	Members	<u> </u>								
Social Media	Social Media	committee	Wichibers		requency.		. ~~					
		WhatsApp messaging	Members									
		Facebook messaging	Members Frequency Members Frequency Frequency									
		Any other										
			District	Block 1	Block	Block 3	Block 4	Block 5	Block 6	Block 7	Block 8	Tota
Social mobilization activities	Advocacy	District RCCE meeting										
		Meeting with Schools (Govt and Pvt.)										
		Microplanning meeting (For risk										
		communication planning and										
		operation) Meeting with key CSO, religious				-			_			
		leaders/influencers at block level										
		Sensitization meeting with govt. line										
		department staff i.e. ICDS, Edu,										
		Any other Orientation of ANMs on RCCE and										
	Capacity Building	Microplanning review										
		Orientation of ASHAs/AWWs on										
		RCCE										
		Orientation of ASHAs/AWWs on										
		mobilization for risk communication										
	Social Mabiliza tion	Mother's meetings										
		Community/Influencer's meeting Community meetings (VHSNC, SHGs,										
		Mahila mandals)-Dedicated meetings										
		on COVID-19										
		Govt. school teachers orientation/coordination meeting										
		Parent Teachers Meetings										
		Community dialogues	Date									
		Announcements at all religious places										
Mid-media activities	Mid media	Inter Personal Communication sessions Posters in community							_			
		Posters in Schools										
		Hoardings										
		Leaflets for community										
		Leaflets for Schools										
		Leaflets for ANM, ASHA and AWW										
		Leaflets for MOs Miking/Local announcements				-						
		Any other activity										
		amplete will be completed by State and District	ATTO ATTO					en				

Note I-This template will be completed by State and District MEIO/IEC officer/consultant. If there is no one dedicated for IEC activity, then District IEC Officer will be responsible to compile with consultations of Block MOIC/BED/IEC consultant. One copy needs to be with concerned person who is responsible for IEC/communication and one copy needs to be submitted to Chief District Medical Officer/CMO/CDMO before the District Training start Risk Communication and Community Engagement

RCCE Planning tool



Contact details of RCCE Key Persons

- Ms. Padmaja Singh, JS-IEC MOHFW
- Dr. Ritu Chauhan, Team Health Security and Emergencies, WHO India
- Mr. Elnur Aliyev, Communication for Development, UNICEF India











Thank you









