

Risk Communication and Community Engagement for COVID-19 Response



Stories from the field

Chhattisgarh
Jharkhand
Madhya
Pradesh
Andhra
Pradesh

Acronyms

ANM	Auxiliary Nursing Midwife
ASHA	Accredited Social Health Activist
CAB	COVID-19 Appropriate Behaviour
FLW	Frontline Worker
IEC	Information, Education and Communication
KSRA	Karra Society for Rural Action
NGO	Non-Government Organisation
NRC	Nutrition Rehabilitation Centre
NYKS	Nehru Yuva Kendra Sangathan
PHC	Primary Health Centre
PRI	Panchayati Raj Institution
RCCE	Risk Communication and Community Engagement



Forging innovative partnerships with private hospitals in **Andhra Pradesh** and **Telangana** to reinforce CAB

Pharmacists explain the importance of masks and other COVID-appropriate behaviours to their customers. A brochure on CAB and proper use of mask goes with their compliments to the customers with the mantra, "No mask, no medicine!"

The COVID-19 pandemic has impacted the availability of essential healthcare services, including family planning services and antenatal care. Pregnant women are wary of visiting essential facilities due to fear of getting infected. Antenatal visits are left incomplete.

Since both pharmacies and antenatal care are part of the essential services in the pandemic, UNICEF and SAATHII NGO responded to this challenge. In Andhra Pradesh and Telangana, partnerships were forged with private hospitals to reinforce COVID-19 appropriate behaviour (CAB). Sensitisation sessions were done in private hospitals, exclusively providing obstetric and gynaecological services. Pharmacies linked to these hospitals as well as others were also reached out to.

This project began in September 2020 in 8 districts and continued till Jan 2021.



It reached out to over **370** private hospitals sensitizing staff



4,750 paramedical staff



More than **6,600** mothers, spouses and caregivers were sensitised on CAB.



Over **600** pharmacies were reached sensitising **1,350** pharmacists. The intervention was implemented by SAATHII's eight field officers.

SOWJANYA MEDISETTI from SAATHII

"We realised that pharmacies are a very important stakeholder since COVID patients and their caregivers would frequently visit pharmacies. Hence, they could be vehicles to ensure right information is going out to all. It would also ensure they themselves follow safety protocol in order to keep safe."

NIRMALA An HIV+ mother

"The training helped her understand her greater risk and the importance of seeking timely care. "Now I know that I need to be more careful than others. Also, I need to approach my doctor if I develop any complications."

BALARAJU A pharmacist

"Customers come and ask about which mask to use, how to use, and how often to change. I never had clear answers. But thanks to the SAATHII intervention, I now help customers make the right choices not just in mask use but following other COVIDappropriate behaviours."

RAO

SAATHI's field officer from East Godavari district of Andhra Pradesh

Initially, the private hospitals were sceptical about their approach. "But once they saw the IEC materials developed by UNICEF, they knew we meant business. A few of them even sent letters of appreciation for conducting the training in their clinics."

MEDISETTI from SAATHII

Project officers say the intervention has been extremely successful with targets being "doubled and tripled". Learning lessons include that, "We assume super speciality hospitals would adhere to basic safety norms, but we found that that was not the case. They were not following masking and social distancing, these messages needed to be reinforced."





There were challenges. Since private hospitals are largely commercial, sometimes it took coaxing to convince them of the need for this. Some still declined. However, there were excellent responses as well. In one case with a chain of hospitals after a session was done at one branch, they requested for sessions to be done in the remaining 10 as well. Missionary hospitals were extremely responsive to this project.

Over 90% of the sensitisation was in person. In addition, social platforms like WhatsApp and Facebook were used to disseminate information. In some cases virtual trainings were done.

The sensitisations at the private hospitals covered paramedical staff and support staff such as security guards, housekeeping, receptionists, and pharmacists, etc. On the other hand, sensitisation of the pregnant women visiting these hospitals included information like antenatal care, immunisation, breastfeeding, mother and child care, etc. The hospital gave a specified time on a day, and all the trainings were done on that day. Only those pregnant women who happened to be there that day could be served.

On an average, a session would involve 15-20 pregnant women/mothers/ their caregivers. A session with paramedical staff and pharmacists would include 5-15 people at one time. However, there have been instances where the hospital gave a large hall and asked all their staff to attend – up to 75 people including paramedical staff, housekeeping staff, security guards, receptionists – as they felt everyone needed to be sensitised to practise CAB and be empowered to sensitise others.

UNICEF, with CDC support, provided funding for the project. Technical support including conceptualising the project, strategizing developing and providing communication materials was given. IEC materials were used to reinforce CAB guidelines. Posters with CAB messages were put up at hospitals and pharmacies. Videos were also used. Hospitals that had televisions near their receptions were asked to play these videos reinforcing CAB messages so that patients and caregivers could view them while waiting to see the doctor.

Youth volunteers respond to COVID-19 in tribal areas of Bastar, **Chhattisgarh**

The CDC-supported Yuvoday programme of youth volunteers began here in October 2020. There are about **6,000 volunteers** in Bastar district.

They are engaged in raising awareness for COVID-appropriate behaviours. They also encourage people to vaccinate, do community mobilisation and help with the registration process for vaccination. Other than COVID response, volunteers are also engaged in addressing malnutrition, one of the most crucial challenges for the district. They identify malnourished children and refer those severely malnourished to the NRC (Nutrition Rehabilitation Centre). Volunteers are involved in cleanliness drives and in promoting sports and fitness in villages.



BUVNESH BAKDE | 26 Yrs | Resident of village Puspal, Bastar district, Chhattisgarh

This village is my home and its people my family. I have always wanted to contribute to my village. I have been volunteering with Yuvoday, a programme run by the district administration and UNICEF since December 2020. Yuvoday is a platform that provides great opportunities for youth. Under the support and guidance of Yuvoday, we can accomplish many difficult tasks with ease. The village boys feel confident that they can bring about a change.

I am 26 years old. I do farming with my family. We are 13 youth volunteers in the village, of which 10 are boys and three are girls. In the programme I learnt skills such as how to motivate people and contribute to village development.

These days the villagers are living in fear due to the COVID-19 pandemic. As volunteers, we have motivated about 400 people to get vaccinated during March-April 2021.

It has been challenging to convince people to come forward for vaccination. There is misinformation and villagers insist they would not allow a syringe or injection.

Volunteers show them videos from UNICEF and government emphasising that vaccination is safe and important. We do wall paintings in the village with positive quotes on vaccination. The panchayat secretary and block level coordinators guide us in mobilising the community.

Among those we helped vaccinate, is an 85-year-old man who lives alone and does not have anyone to look after him. When we went to his house, we realised he could barely walk. We told him about the vaccine and how it would help us fight the virus. He was showing some resistance based on what he had heard from friends that vaccination could cause death. We spoke to him about the importance of vaccination. The next day, he agreed to vaccinate. We took him to the vaccination centre about 2 km away on our motorcycle. After vaccination, we dropped him back to his home. Over the next few days I visited him to ensure he is back to his usual health once the post-vaccination fever has subsided.

Being a part of Yuvoday has been a great learning experience for me. I would like to thank Yuvoday coordinators, UNICEF and district administration for this opportunity.





As volunteers, we have motivated about

400 people to get vaccinated during March-April 2021

Volunteers go door-to-door to help communities overcome vaccinerelated fears in rural Chhattisgarh

A vaccination centre was set up in village Kasturpal Block Lohandiguda, in Bastar district. The village has a population of about 2,000. Farming is the main occupation here. The district administration had asked the panchayat (elected leaders) and Yuvoday volunteers to raise awareness and mobilise for people vaccination. There are five Yuvodaya volunteers in Kasturpal village. With CDC support, UNICEF has trained volunteers in social communication and community mobilisation. They have basic digital skills using smartphones. They are trained to explain COVIDappropriate behaviours to the community. They have been oriented on the vaccination process.

LALIT KASHYAP | 23 Yrs | Village Kasturpal

It was the second day of vaccination for village Kasturpal. I was among the first to reach the vaccination centre that morning along with two other volunteers. Vaccinations had not yet begun and there was nobody there to get vaccinated. Close by, a group of about 40 men were meeting government officers such as the officer responsible for land records and the panchayat Secretary. The Sarpanch (elected village head) was also present. The officers were processing land allocation for individual farmers.

We asked people 45 years and above to get vaccinated to avail the facility. We requested them to share their aadhaar cards with us so that we could register them for vaccination. They declined. They were convinced that vaccination was causing fever and death. Despite all efforts to convince them, the group did not agree.

We came to know that the sarpanch had also not been vaccinated as yet. We approached him so that he could set an example for the rest. The sarpanch agreed and was vaccinated. In a video message, he motivated people to vaccinate. This video was disseminated by volunteers by visiting the community door-to-door. It was also shared on WhatsApp. This helped dispel myths and allay fears. About 20 men, including members of the Gram Panchayat and some senior government officials, were vaccinated that day.

Over the following days we continued the door-to-door campaign. IEC materials such as infographics and videos were used to explain the vaccine. We also pointed out to the community that those who got vaccinated were fine, and that the post-vaccination fever subsides in a day or two. This contributed significantly to more people getting themselves vaccinated.



FLWs, NGOs and volunteers engage to promote COVID-appropriate behaviours in **Jharkhand**



With CDC support, UNICEF ran a campaign to promote COVID-appropriate behaviour in urban Ranchi. Over 50 community volunteers from 7 NGOs were oriented and engaged to promote CAB among families, as well as health workers, sanitation workers, shopkeepers, among others. UNICEF also provided safety gears for volunteers such as masks, sanitizers and face shields. CDC funding helped provide appropriate RCCE materials which were much needed.

An ANM, a female sanitation worker, and a male petty shopkeeper share how they benefited from the information and safety gear they received from NGO volunteers as part of the campaign.





ANM: "Volunteers taught us how to practise COVID-appropriate behaviour while providing immunization services"

CHANCHALA MAHTO | 36 Yrs | ANM in Kokar Sarna Toli, urban area, Ranchi

My name is Chanchala Mahto and I am the ANM of Anganwadi in Kokar Sarna Toli, an urban ward. With me are sevika Munni Devi and sahaika Lakshmi Runda who assist me. I would like to share my experience of working at the Anganwadi Centre during COVID times.

During the pandemic, the Anganwadis were closed for the first six months. Immunisation services for pregnant women and children were suspended. This led to fear and anger in the community. Everyone wanted their children to be immunized but were helpless. COVID protocol was also not being followed in many places.

Six months later when the Anganwadi resumed services, people were so afraid of COVID they didn't want to come. At that time KSRA volunteers came to our Anganwadi centre. They gave us detailed information about safety protocols. Perhaps we had forgotten some of these, or perhaps because of the crowds we were not able to follow them well. The volunteers pointed out to us gaps such as 5-6 women with their children gathered together in the small room of the Anganwadi and that too without masks. No matter how much we insisted, the women would come without a mask.

At this time, the KSRA volunteers helped us a lot. They made the women queue outside and sent them in one at a time. They insisted all wear masks; entry without mask was prohibited. Once the woman emerged from the Anganwadi post immunization the volunteers gave her detailed information about COVID and told how to keep herself safe. They told women about wearing a mask correctly, maintaining social distancing of six feet, hand washing for 40 seconds. They appealed to the women to not crowd around. The volunteers even drew chalk circles outside the Anganwadi to ensure queuing followed safety protocol.

For some days, the volunteers visited regularly, raising awareness on COVID safety protocols. People started to understand to follow the rules. This made our work much easier. The volunteers also educated us about what we can do to keep ourselves safe during the pandemic. This was crucial information for us. They gave us safety gear



like mask, soap, sanitiser, head cover and gloves. They reminded us to ensure we use the mask, gloves and head cover during immunization; to sanitise hands after each immunization; to be aware that any of the health workers are not too close to mother and child while immunizing in order to reduce risk. They advised us that only one mother and child be in the room at one time, rest can wait outside and weighing of child can be done outside.

Volunteers advised us to draw chalk circles outside the Anganwadi centre to ensure people did not crowd around. They told us to advise parents of newborns to ensure anyone who handles the child sanitizes their hands first. They reminded us that vitamin A is crucial for the child and should not be missed.

Pregnant women were registered with the Anganwadi. They were provided services such as supplementary nutrition, immunization, referral services, health and nutrition education. Volunteers advised us what should be done in case of emergency, how to call for an ambulance. Pregnant women were advised to test for COVID in the ninth month before delivery.

This information helped me put COVID safety protocol in place in all the eight Anganwadi centres that I visit in two urban wards. This led to excellent results. People listened to our instructions and followed them. This made our work smooth. For this I thank KSRA volunteers who told us all about how to keep safe in pandemic times.

2 Sanitation Worker: 'I learnt how to minimize risk of COVID infection at work'

SONY | 45 Yrs | Sanitation worker of Ranchi Municipal Corporation from Kadru urban area, Ranchi

My name is Soni and I am a woman sanitation worker working in Ward Number 24, Kadru. While I was on duty KSRA volunteers were raising awareness on COVID. They approached me and praised my work. This encouraged me and I was motivated to perform my duties better. They explained to me how the COVID pandemic is spreading by the day and how risk of infection increases with coming in contact with infected materials, surfaces, and air. This makes it important to ensure we keep safe. At that time there was no vaccine.

The volunteers told me ways how we could protect ourselves from COVID infection, simple things to incorporate into our daily life. Simple things like: We must wear a mask, not let anyone use our mask or use any one else's mask; dispose off a used mask in such a way that it is not reused; ensure the mask is clean. Volunteers



advised that we handwash for 30-40 seconds with soap and in case soap and water is not available, to use a hand sanitiser. We must use gloves and ensure social distancing of 6 feet ('2 *gaj ki doori*') and stay clear of crowded places.

I sincerely follow all this advice throughout the day. I ensure I wear a mask while working. As soon as I finish my day's work I wash my hands well with soap. I share all this safety related information with others as well so that they can be safe and contribute towards maintaining cleanliness and good hygiene all around.

Shopkeeper: 'I practise COVID safe behaviour and share accurate information about this with customers'

SAMEER KUMAR | 36 Yrs | Runs a petty grocery shop in Ranchi city

My name is Sameer Kumar. I run a grocery shop in Ward 12 in the Samlong Lowadih area. During the pandemic, UNICEF and KSRA volunteers came to our shop. They demonstrated how to wear masks correctly. They advised us to keep a sanitiser at the shop and use it frequently. They said shopkeepers must maintain a distance from the customers. This can be done by drawing chalk circles outside the shop or barricading so that the customer is able to interact and shop while maintaining social distancing. This gave me the confidence on how I must behave with customers in order to keep safe. It also gave me the confidence to share with them accurate information about COVID safety protocols.

The volunteers gave me a banner which



highlights COVID safety behaviours such as wearing of mask, using hand sanitizer, and physical distancing. I have displayed this prominently outside the store so that customers can follow this advice and contribute towards controlling spread of COVID infection. For my own safety, I wear a mask at all times and have a barricade outside my shop. I have started taking online payments as well.



Partnership with youth organization strengthens' community mobilization in **Madhya Pradesh**



This year, in Madhya Pradesh, over **700 NYKS** volunteers have been recruited for all the blocks With Madhya Pradesh reeling under the second wave of COVID in April-May 2021, there has been a substantial rise in the number of COVID cases. UNICEF, with CDC support, has been supporting the state govt on risk communication and community engagement strategies to disseminate accurate and timely messages on CAB and vaccine effectiveness.

Nehru Yuva Kendra Sangathan (NYKS), one of the key partners, is an autonomous organization under the Government of India's Ministry of Youth Affairs and Sports. It is the largest grassroots level youth organization in the country. This year, in Madhya Pradesh, over 700 NYKS volunteers have been recruited for all the blocks. UNICEF, along with State Health Department, conducted an orientation for the volunteers and youth officers. They have been trained to give correct and consistent information on adoption of COVID-19 appropriate behaviour and address vaccine hesitancy. Volunteers have knowledge of home isolation protocols and have been trained to communicate key messages and strengthen community engagement.

The 700 volunteers and youth officers have engaged a pool of over 10,000 youth volunteers and members of youth clubs reaching out to 0.2 million community members across the state. Over 8,000 community engagement activities have been implemented by these volunteers till date. These include wall writing of CAB messages; supporting the Roko Toko Campaign for promoting CAB and mobilizing people to pledge to follow CAB. Volunteers support in managing vaccination centres and promoting CAB post vaccination. They support frontline workers – Anganwadi workers and ASHAs – in door-to-door visits to raise awareness on COVID and identify likely COVID patients. Volunteers make and distribute masks and create awareness in the community about the importance of using them correctly.



Youth partners help counter mass refusal for COVID vaccine in rural Chhatarpur, Madhya Pradesh

Panchayat Mudhar, Block Gaurihar of In Chhatarpur district, MP, about 200 people were eligible for COVID vaccination during the first phase in April 2021. The village has a population of 2.400. Excellent mobilization by volunteers and frontline workers resulted in 100% vaccination of eligible people for the first dose of the vaccine. This was done over two days. However, in May, there was a mass refusal for the second dose of the vaccine.

On investigation, volunteers found that some community members, including children, suffered from fever and cold. It is not clear what caused this fever and cold. Since the village is a small unit and information spreads fast, this created apprehension about the vaccine. The village attributed the illness to the vaccine and refused the second dose. Since there is only one primary health care center (PHC) in the block serving 75 villages, villagers had to seek treatment from private doctors. This costed each family about Rs 500. Hence, when volunteers approached them to mobilise them for the second dose of vaccine, villagers were aggressive and they refuse en masse.

Volunteers found that there had been no followup on the wellbeing of those vaccinated by health workers and frontline workers. Neither was there any follow up to ensure that the community is following COVID-appropriate behaviour. In the community, there appeared to be a general belief that wearing a mask, handwashing with soap and maintaining physical distance, was not needed after vaccination.

When Atul Dwivedi, NYKS volunteer for the block, saw the mass refusal, he realized it was crucial to bring key influencers on board. He facilitated local influencers and officials to come together to address the challenge. These included the panchayati raj members in the village, local govt officials like the sub-divisional magistrate, medical officer, panchayat secretary, land records officer, along with elected representatives. The influencers and key officials met at the PHC to discuss way forward. Collectively, they organized community meetings in the village to build



ATUL DWIVEDI Block Gaurihar

transparency and trust in the system. The Medical Officer answered the community's queries related to vaccine and explained the importance of following CAB after vaccination. He also visited about 40 families affected with fever.

Dwivedi motivated 10 influential people from the village including the Sarpanch and other PRI members to take the second dose of the vaccine so that they could set an example for the rest. He also flagged the gap that frontline workers and vaccinators be oriented by the state govt on the importance of delivering key messages during vaccination and follow-up post vaccination.

Supported by CDC, UNICEF organizes orientations for NYKS co-ordinators and volunteers before they start community mobilisation. One of the key strategies emphasized upon is taking support from influential local people to address impact of adverse effects following immunization and countering vaccine hesitancy. Dwivedi effectively used this strategy in this case.



नेहरू युवा केंद्र के स्वयंसेवक

देवास. कोरोना वायरस संक्रमण के इस दौर में सिर्फ स्वास्थ्य की समस्याएं नहीं अपितु सामाजिक से अधिक भोजन पैकेट वितरित from the income ग की है।

दरवाजे पर जाकर वितरित किए। स्वयंसेवकों द्वारा प्रतिदिन डेढ सौ निया जा रहे हैं। उन्हा ही पहीं पर

'Mai Corona Volunteer' – 'I am a Corona Volunteer': 100,000 people in Madhya Pradesh respond to clarion call by Chief Minister

With CDC support, UNICEF forged a new partnership with Jan Abhiyaan Parishad, a programme of the Department of Planning, economics and statistics, GoMP, to roll out the "Mai Corona Volunteer" campaign under the leadership of the Chief Minister's office.



CMO Madhya Pradesh 🥝 @CMMa... · 2h … ग्वालियर के श्री हरिओम गौतम ने बताया कि जिले में लगातार रोको टोको अभियान चला रहे हैं, मास्क वितरित कर रहे हैं। जो लोग वैक्सीनेशन कराने आते हैं उनको हम पूरी जानकारी देते हैं। बुजुर्गों को वैक्सीनेशन के लिये घर से लाने और घर पहुंचाने का काम भी कर रहे हैं।



CMO Madhya Pradesh 🥏 @CMMa... - 2h ----शहडोल के श्री विवेक पांडेय ने बताया कि हमारे यहां 1566 पंजीयन हुये हैं कोरोना बॉलेंटियर्स के रूप में। हम रोको टोको अभियान चला रहे हैं। मास्क वितरण कर रहे हैं। कोरोना बॉलेंटियर श्रीमती कल्याणी वाजपेयी ने बताया कि हम हर घर जाकर लोगों को वैक्सीनेशन के लिये प्रेरित कर रहे हैं।



UNICEF in collaboration with Jan Abhiyaan Parishad and Dept of health and family welfare organized an orientation program for all the 52 district collectors, 52 district coordinators and 313 block coordinators of Jan Abhiyaan Parishad. The workshop built capacities of representatives of Jan Abhiyaan Parishad to guide the newly recruited volunteers on social mobilization and engagement activities and train them on their roles and responsibilities. The orientation focused on role of volunteers in promotion of COVID-19 vaccination, promotion of CAB, community engagement and social mobilization.

The district and block coordinators further oriented over 100,000 people who registered themselves as volunteer in response to the clarion call given by the Chief Minister over 45 days. Volunteers committed to supporting the campaign for promotion of COVID-appropriate behaviors and vaccination. A self training and learning video was developed to minimize transmission loss as the training program was rolled out for the volunteers. The volunteers have been categorized into vaccination volunteer; health facility volunteer; mask awareness volunteer; and mohalla toli volunteer, or those who help with home quarantine and institutional quarantine.

UNICEF, with CDC support, contributed to development of training modules and roll out of the training program for the volunteers. A self training and learning video and message guide was developed in order to avoid distortion of messages. Multi media motivational materials and training materials were developed. Messaging on issues such as home isolation, quarantine, stigma and discrimination, promotion of CAB and vaccines were developed and disseminated. UNICEF supported the department in developing the personalized appeal in the name of volunteers that was sent out to all of them.

The campaign has led to a multitude of community mobilization activities. These include use of digital media for creating awareness through multi media materials and messages disseminated via WhatsApp groups of doctors, NGOs, retired officials, civil society organizations, trader associations. Volunteers have facilitated vaccination registration and helped those who needed transportation to the vaccination centre. They have given management support to the COVID vaccination centers, especially in terms of crowd management. They have done household visits and counselling sessions with the community following COVID protocols. Volunteers have also co-ordinated support from different govt departments – for example in sanitizing villages and households, and ensuring supply of dry ration and distribution of cooked food as needed. Multi media communication van, miking and wall writings have been widely used to spread the message. The campaign and contribution of the volunteers has been recognized by the media.

Volunteers say they are committed to raising COVID awareness in the community and are grateful for this opportunity to serve. "As a volunteer, I make people aware about COVID-appropriate behaviour. I am thankful that through this role I am now not a mere observer in this pandemic, I am a warrior. Thank you MP govt and UNICEF for this opportunity," said Dileep Patelia of district Sheopur. Sunil Patidar of district Barwani adds that he explains COVID prevention to those he sees roaming unnecessarily. "All the youth of the village are with us. We will not rest till we make our village Corona free," he says.

Volunteers say the training organised by Jan Abhiyan Parishad and UNICEF was empowering as they were told ways how to protect themselves from COVID while being among people. "In the training organised by UNICEF we were taught how to protect ourselves from COVID infection. Thanks to this we are able to serve while being safe," they say.

Wall writing is a popular awareness raising activity. Nirmal Gurjar, of district Dewas says he writes CAB messages on walls of people's homes, but only once they have committed to follow this behavoiur. Volunteers are also accompanying ASHA and Anganwadi workers for door-to-door visits to identify likely COVID patients. "When we escort the team, we get full support of the community. We tell people how to prevent Corona," says Heeralal Panika, of district Anuppur. Others are providing meals twice a day for caregivers of COVID patients who have come from far off villages to health care centres and hospitals for treatment. "Being part of the "Mai Corona campaign" is an opportunity to serve humanity," says Shailaja Bargeer of Barwani district.

As a way forward, a three-fold action is proposed to ensure volunteers remain motivated. This includes acknowledgement of their role, as well as constant capacity building and learning opportunities. The volunteers have been provided with a badge by the district administration as well as mask, T-shirt, cap, bag and towel. They will continue to receive capacity building. There will be knowledge exchange and sharing of learnings among volunteers across districts. The campaign has led to a multitude of community mobilization activities. These include use of digital media for creating awareness through multi media materials and messages disseminated via WhatsApp groups of doctors, NGOs, retired officials, civil society organizations, and trader associations.

