

By the end of this unit, participants should be able to:

- Describe at least three reasons why responders need to engage communities during an outbreak
- List challenges faced in community engagement (CE) and
- Describe approaches for effective CE in detecting, preventing and responding to an outbreak



Why do communities need to be engaged during an outbreak? – 1

Affected communities and populations need to know how to protect themselves and response teams need to know how communities understand the disease and the response



Generic public or media announcements are not sufficient, trusted or tailored to communities at high-risk

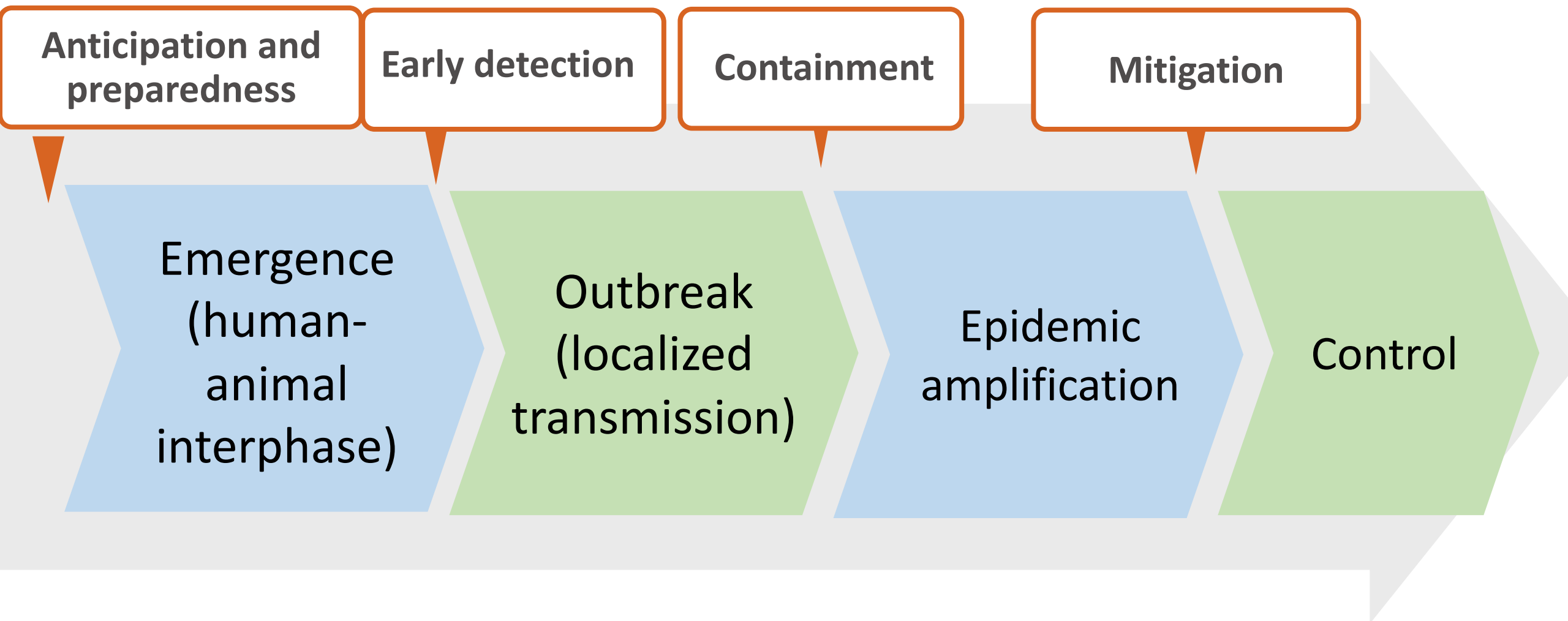
Engaging with communities allows their direct participation in the response to address fears, barriers, concerns and to change transmission-enhancing practices, while promoting protective behaviors and working together with the response teams

Why do communities need to be engaged during an outbreak? – 2

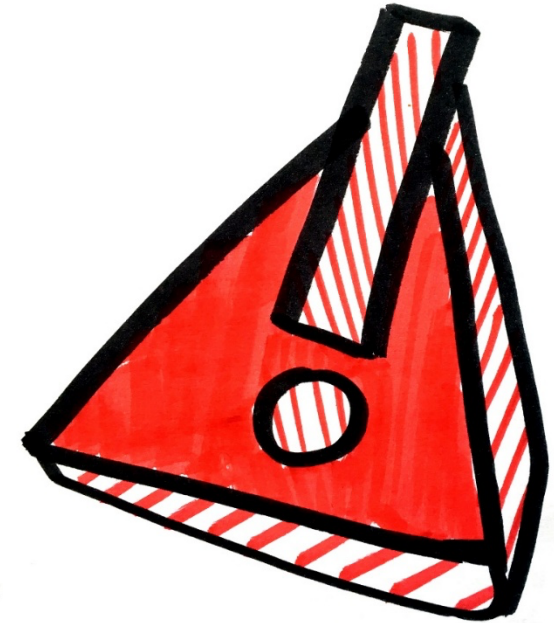


Populations at-risk want and must be a part of the solutions to protect lives and stop an outbreak

Bi-directional communication - dialogue - must be established from the onset of an outbreak between affected communities and response teams to ensure participation and mutual understanding - the base of trust building



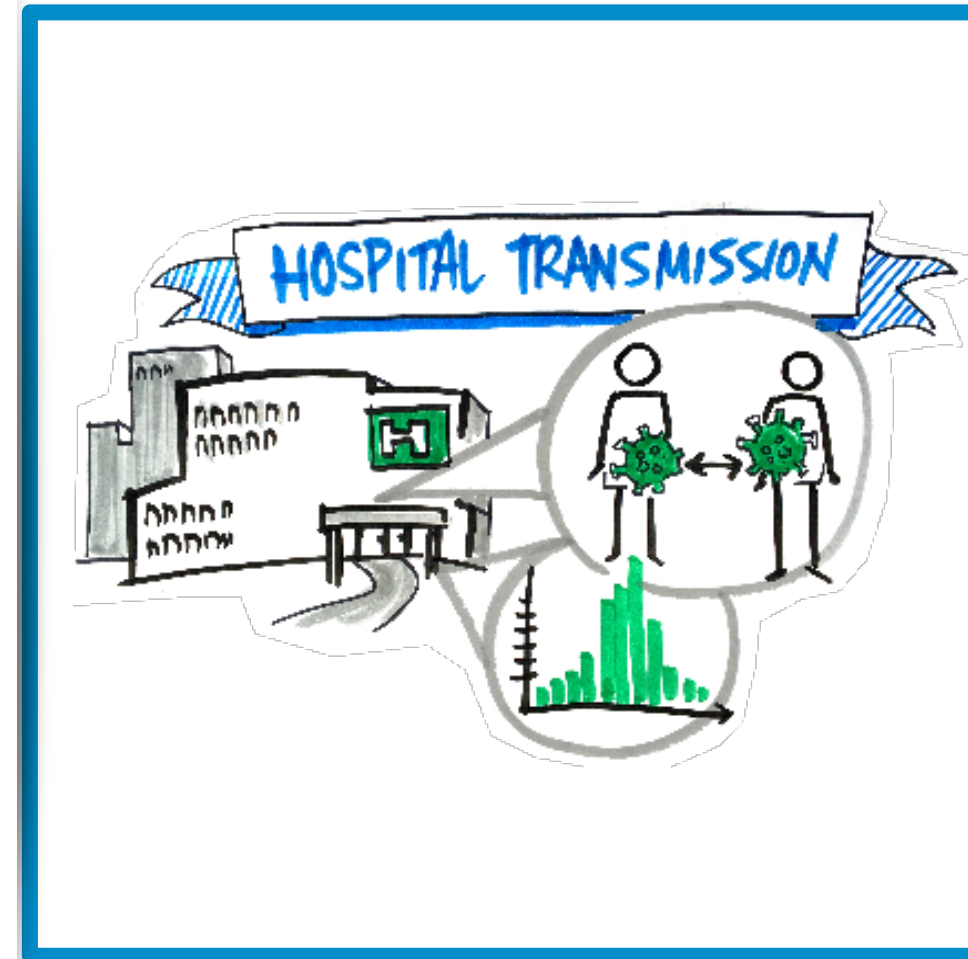
- Lack of understanding of community practices, concerns and fear by response teams
- Slow/late information release about the disease and the response could exacerbate community concerns and amplify the outbreak
- Lack of information and awareness on protection measures can aggravate the spread of the disease
- Starting implementation of measures without the agreement of communities impacts acceptance of the response
- Late/no action taken to stop rumors can lead to misunderstandings and impact trust in the health authorities and promotes “dangerous” behaviors



Nosocomial (health care) outbreaks may occur due to lack of

- information and awareness about the virus

among health care workers and/or failure to apply appropriate infection prevention and control measures

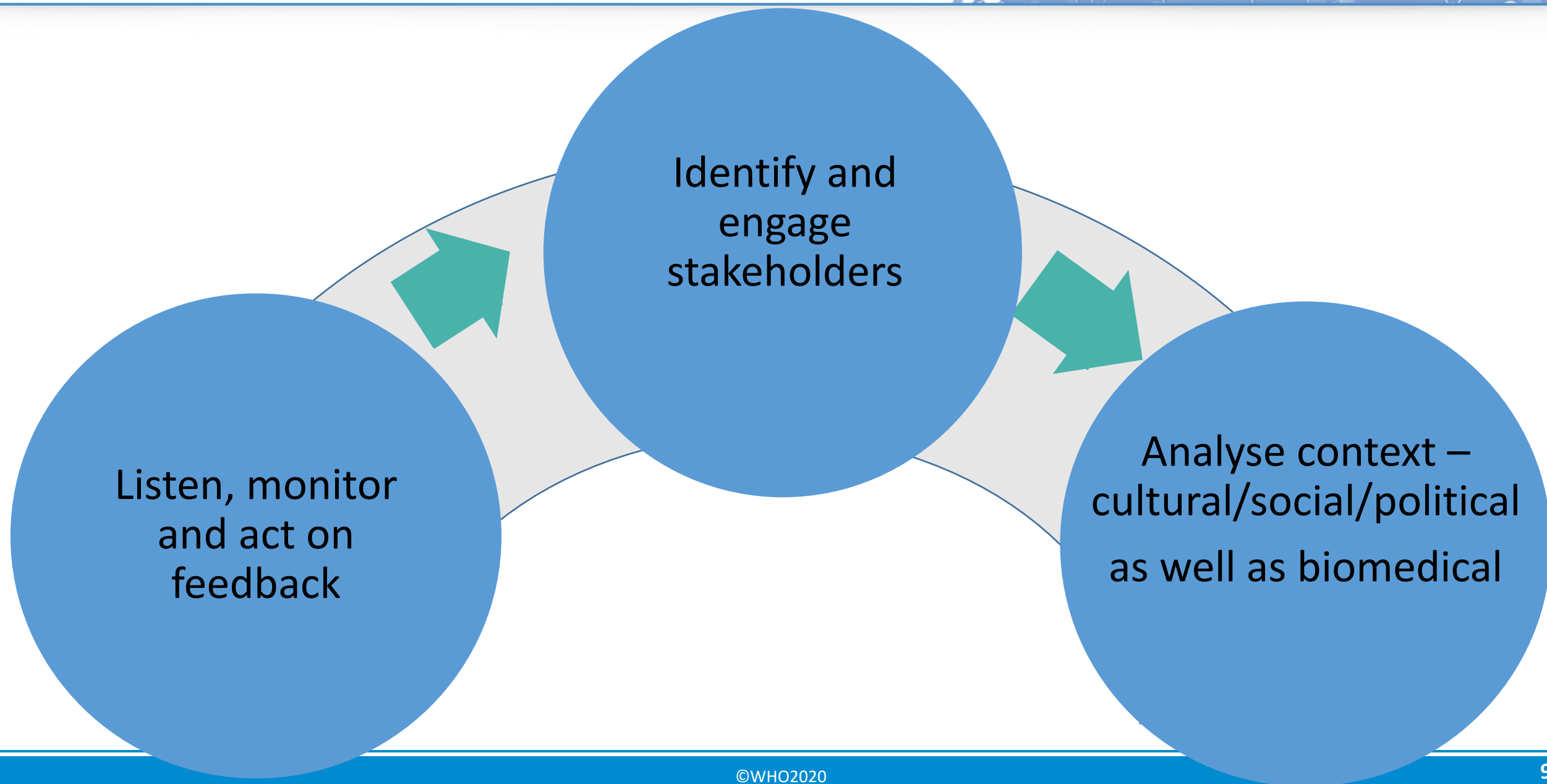


Examples of some possible challenges in outbreaks – 2

Cultural practices related to caregiving and health care seeking behavior may make it difficult to control an outbreak:

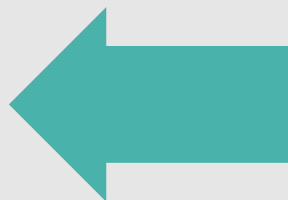
- For example, in some cultures, many relatives will accompany or visit sick family members when in hospital, and
- Some people may go to many different hospitals while sick before they decide where to seek care (this is sometimes called doctor or hospital shopping)





Operationalize:
implement key
actions

Strategize and
prioritize



Identify and work with key stakeholders – For example – 1

Government
officials &
spokespersons

Health care
practitioners

Women as main
caregivers at
home

Media & social
media
influencers

Identify and work with key stakeholders – For example – 2

Businesses and employers	General public from where patients are being reported
Travel and trade sectors	Workers in health care settings

Identify and work with key stakeholders – For example - 3

Local government
and civil society

Women and Youth
associations

Religious and
community
influencers

- Consult local colleagues and stakeholders
- Know and understand needs, concerns, fears as well as strengths and capacities at community level
- Review existing literature: KAP surveys, ethnographies, political science analyses
- Apply social science methodologies:
 - community walk-through
 - focused group discussions (FGD)
 - observation
 - interviews
- Explore communities' preferred communication means

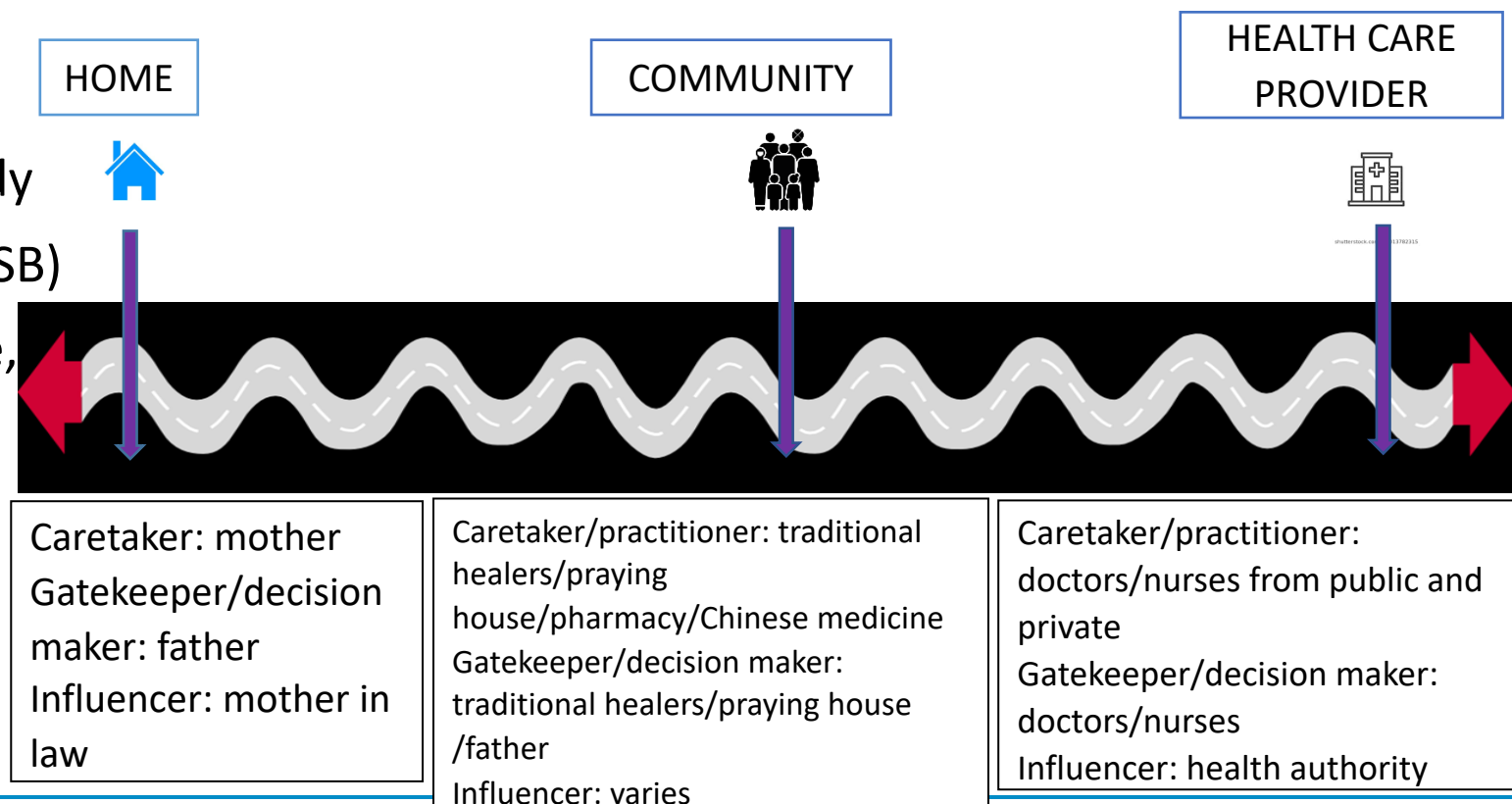


- Identify the health seeking behavior pathway (HSB) for the disease and the factors that condition it locally:

- socio-cultural factors: including explanatory models, localised gender vision, and power dynamics,
- economic,
- practical and
- empirical factors

- Identify the key people who are already linked to the health seeking behavior (HSB) pathway for this kind of disease at home, community and health facility level:

- Gatekeepers
- Decision makers
- Influencers
- Caretakers/health practitioners

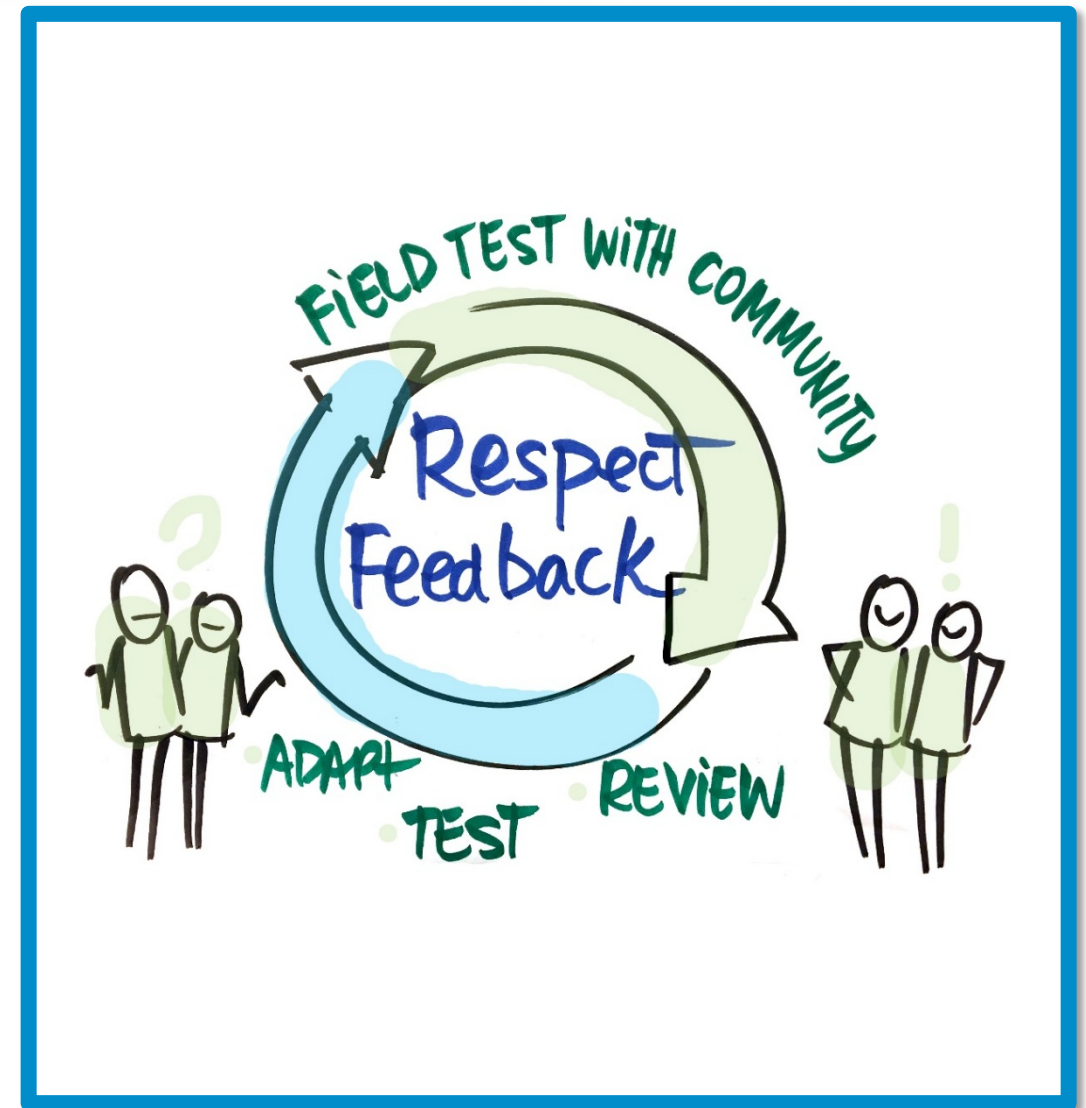


Develop a strategy and plan of action



- Develop a strategy and plan of action
- Define your audience: key actors and target population
- Design the communication plan and choose the communication channels/methods at three levels:
 - Mass media
 - Leaders and key people
 - Interpersonal communication
- Develop engagement narratives
- Develop IEC materials and tools together with end user groups, test all materials before use

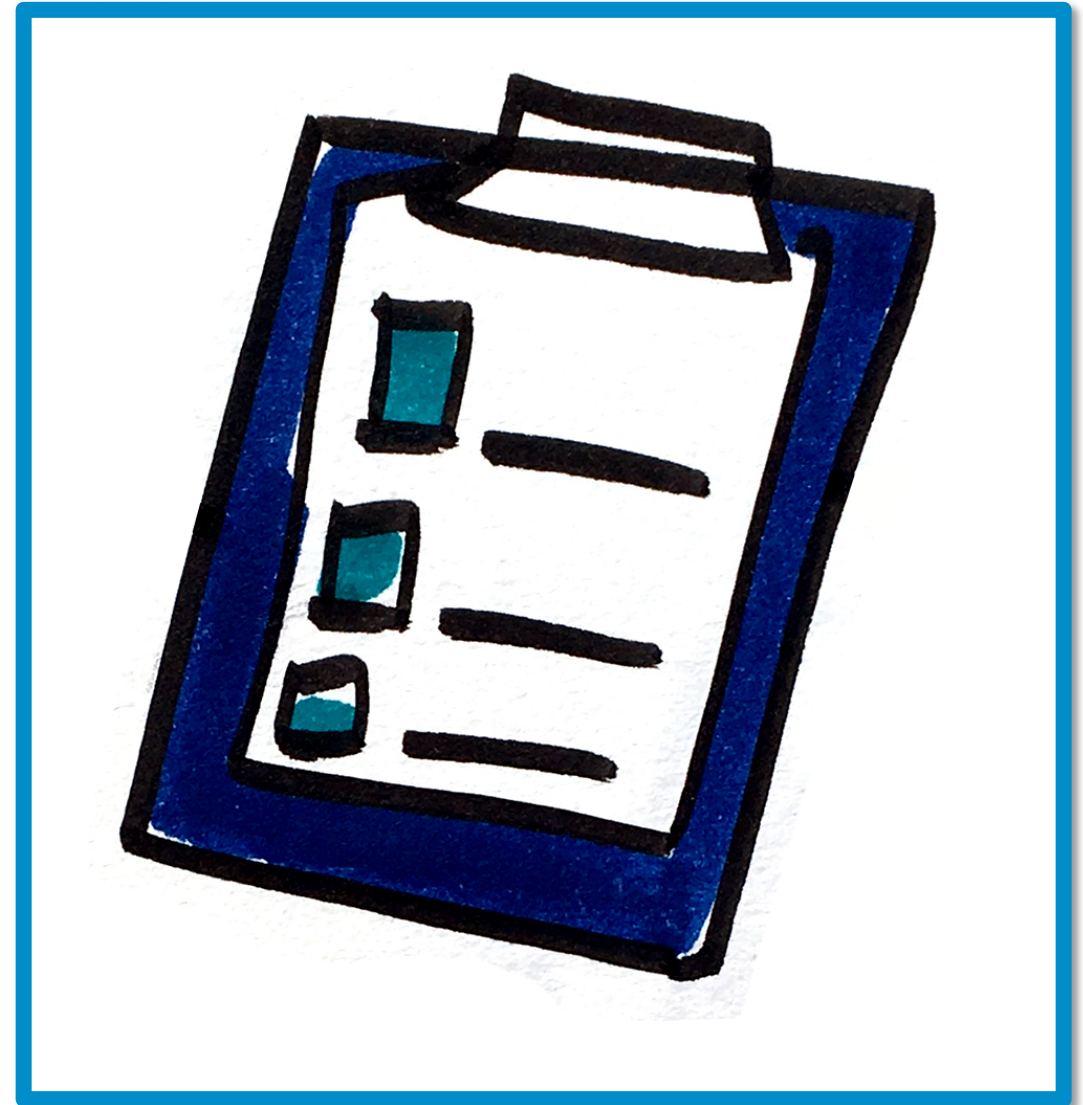
- Build a systematic and dynamic way to collect, analyze and integrate feedback, rumors and misinformation at the three levels:
 - mass media: media and social monitoring; radio shows with public calls
 - leaders and key people: health care workers' feedback; leaders' feedback
 - interpersonal communication: community dialogues, community workers' feedback



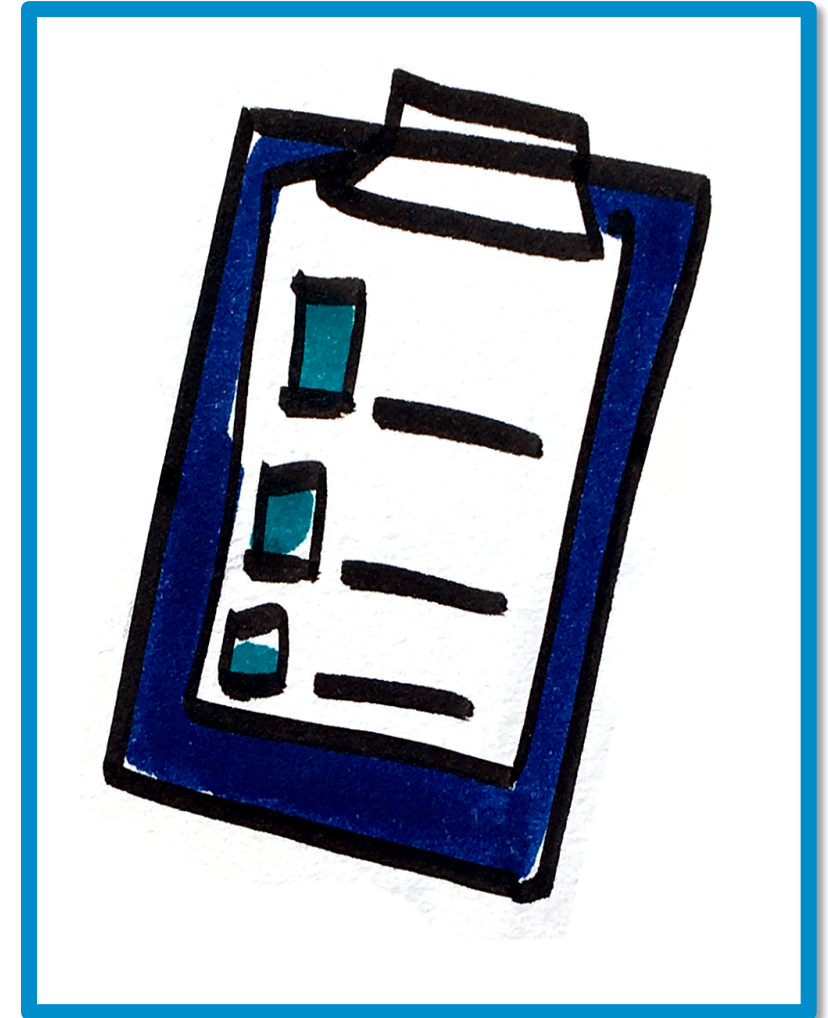
- Share the information with the other technical areas of the intervention and negotiate change and improvement in implementation according to feedback
- Ensure the daily collection, analysis and negotiation of feedback with the response and always get back to the communities with answers to their questions
- “Bridge” the response with the different communities



- Communication and information dissemination is not CE
- CE is more effective when relationships and mechanisms exist before an emergency
- Engage CE partners routinely and build trust. Be honest and transparent
- Connect and bridge the reality of the community and the reality of the response



- **Communication can be defined as the action of exchanging (sending and receiving) information**
- **Common barriers to communication**
 - Language and education
 - Cultural and ethnic differences
 - Irrelevant message
 - Too much information
 - Time constraints
 - Noise and distractions
- **Communication enablers**
 - Reach the intend audience
 - Attract audience attention
 - Engagement narrative is:
 - Understandable
 - Culturally adapted
 - Credible and relevant
 - Delivered in time



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