









COVID-19- RAPID TRAINING

Risk Communication and Community Engagement (RCCE)



Expectations?

What can we expect from each other

- A respectful and open training environment
- Listen to each other
- No such thing as a stupid question
- Encourage others to speak up
- Keep to time
- Phones on silent, laptops closed
- Stay in the room

. . .



Learning objectives

By the end of the session the participants will understand:

- Key facts about COVID-19
- 2. The importance of RCCE in the response to COVID-19
- 3. RCCE activities across the response phases: preparedness, containment, mitigation
- Risk Communication
- Collecting and responding to community feedback
- 6. Community participation

Session 1 COVID-19 Key facts

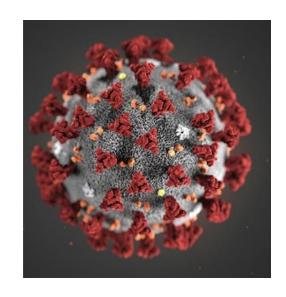


Quiz – What do you know about COVID-19?

- 1.What is COVID-19?
- 2. Who can get COVID-19?
- 3. How it is transmitted?
- 4. How can you prevent COVID-19?
- 5. What are the symptoms of COVID-19?
- 3. How can you treat COVID-19?

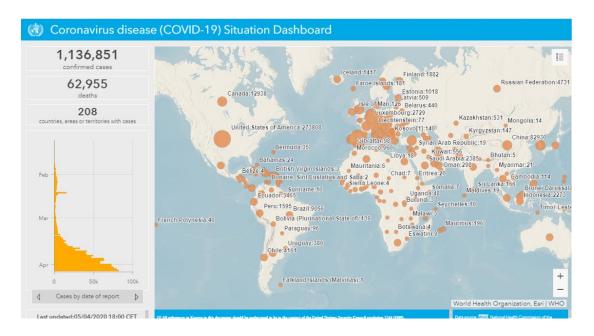
Where did COVID-19 come from?

- Coronaviruses are a family of viruses that cause different illnesses from the common cold to more serious diseases
- The Middle East Respiratory Syndrome (MERS-CoV) which caused an outbreak in 2012 was a type of coronavirus
- Severe Acute Respiratory Syndrome (SARS-CoV) which caused an outbreak in 2002-2003 was also a type of coronavirus
- Coronaviruses are common in humans and animals – COVID-19 is a new type of coronavirus that was first discovered in China in 2019
- Since then it has been spreading from person to person



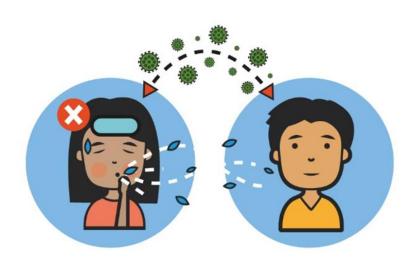
Who can get COVID-19?

- Everyone can get COVID-19, young and old, men and women, rich and poor, from any ethnic origin or location
- The virus has spread to almost every country (183 countries in Africa, Europe, Asia Pacific, Australia, Americas)
- Older people (over 60) and those with existing illnesses, such as lung conditions, high blood pressure and diabetes, are more at risk of getting seriously ill
- People can spread COVID-19 to vulnerable groups even if they have no or mild symptoms, that is why we all need to take responsibility



How does COVID-19 spread?

There is a lot we still don't know about COVID-19. What we do know is that this virus spreads when droplets from an infected person enter the eyes, nose or mouth of someone who is healthy.



When an infected person coughs, sneezes or blows their nose, droplets might get into the eyes, nose or mouth of a healthy person.



These droplets can get on other things too, even on the outside of a mask. We don't know how long this virus can survive on a surface, but we know that strong disinfectant (at least 70% alcohol-based) can kill it.

Spreads in a similar way to cold and flu

How can COVID-19 be prevented? 5 simple rules

- Always wash your hands with soap and water for 20 seconds or use hand sanitizer (70% alcohol). This will kill the germs on your hands
- 2. Do not touch your eyes, nose and mouth so that the virus does not enter your body
- 3. Limit your contact with other people and stay home as much as possible. Avoid shaking hands, kissing or hugging and keep a 1 metre (3.3 feet) distance. Follow quarantine regulations in your country. Less contact with others = less chance of catching or spreading the virus!
- 4. Cover your nose and mouth with a tissue or your bent elbow when you sneeze. If you sneeze into your hands, wash them afterwards and throw the tissue away.
- 5. Stay home if you feel unwell. Contact your local health provider or Ministry of Health hotline and they will advise you on what to do.

When should people wash their hands?

Protect yourself and others from getting sick!



Wash your hands:



after toilet use



after coughing or sneezing



when caring for the sick



before, during and after you prepare food



when hands are visibly dirty



before eating



after handling animals or animal waste

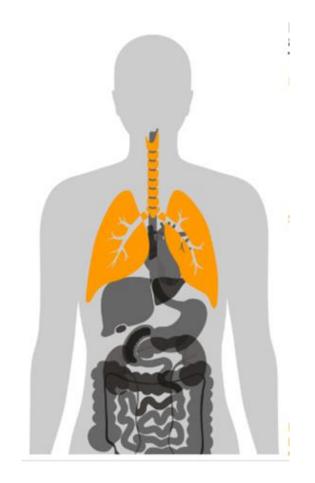
Symptoms

Common symptoms include:

- Fever of 37.5°C and above
- Tiredness
- Dry cough

Other symptoms include:

- Shortness of breath
- Aches and pains
- Sore throat
- Diarrhoea, nausea or a runny nose (Rare)
- Some people may have mild or no symptoms at all
- Older people and those with existing illnesses are more likely to become seriously ill



How is COVID-19 treated?

- There is currently no cure or vaccine for COVID-19, however for most people the symptoms are not serious.
- If you think you may have symptoms, stay at home and call your local health service. They will advise you what to do.
- People with difficulty breathing or high fever should seek medical care
- Around 80% of people will not require special treatment and 1 in 6 will develop more serious symptoms. It varies from country to country, but the death rate is around 2-4%
- The following will not cure or prevent coronavirus
 - Eating garlic or drinking concoctions made with garlic
 - Bathing in hot water or drinking hot water with salt
 - Drinking alcohol
 - Drinking hot water and lemon
 - Sleeping under a mosquito net



Exercise

Read the following scenarios and discuss if the actions are correct or wrong stating:

- 1. What you, as a volunteer would advise in each scenario, based on the health information you have?
- 1. Why you would give this advice and how does it help prevent COVID-19?



SCENARIO 1

Robert is a very religious man living in Town A. He hears that there is a potential COVID-19 case amongst one of his congregants called Martha who is 45 years old. Robert is very moved when he hears this and decides that it is best for all 200 of his congregants to meet at Martha's house, where she is currently staying, to pray for her.



SCENARIO 2

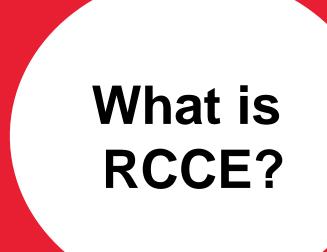
MacDonald is a very proud father of 3 sons. His eldest son, Mark, came back from New York 10 days ago after graduating with honours from Columbia University. MacDonald has decided that he wants to throw a party for the whole village at his house in two days in honour of his son's return.

SCENARIO 3

Johnny is a 10-year-old boy. Because of the COVID-19 outbreak, his school has been closed and he has been sent home. Johnny lives in a compound with 6 apartment buildings in it, each with 20 apartments. He doesn't mind not being at school right now, because it means he can play with his friends from his compound. The kids meet up and play every day because they'd be bored if they stay home all day.

Questions?

Session 2 The importance of RCCE in the response to COVID-19



1. What is RCCE?

RCCE is the process of engaging communities and individuals at risk to encourage and enable them to uptake protective healthy behaviours and to address questions, fear, rumours and stigma during outbreaks such as the current COVID-19.

RCCE...



Provides timely, relevant and actionable life-saving information through the most appropriate communication approaches to encourage people to adopt safe health practices and reduce fear, stigma and misinformation.

Listens to community feedback to understand the beliefs, fears, rumours, questions and suggestions communities have about COVID-19 and use this to guide the response.

Uses innovative approaches to encourage behaviour change and take actions to prevent and reduce the spread of the disease

Identifying and supporting community-led solutions for bringing the outbreak under control, ensuring people's active participation in the response.



Why...?

During an epidemic:

- There are often gaps in information and conflicting information.
- Not all messages are understandable or useful to everybody
- Rumours spread fast and contradict real health information



Therefore...

✓Ask first, understand what the community is unclear about and still wants to know



- ✓ Listen to what people are saying about COVID-19: the key to shape your messages and approaches
- ✓Build trust to get people's acceptance
- ✓ Ensure communities understand public health recommendations
- ✓ Adapt messages to address community questions, be culturally appropriate and context-specific
- ✓ Get leaders to talk! key influencers on board mobilizes communities

Session 3

RCCE approaches across the 3 response phases

RCCE across the three response phases

Prepare (no cases)

Contain
(few cases with known link)

Mitigate
Clusters, Large Outbreaks

- Prepare staff and volunteers
- Set up feedback systems to understand and address questions, fears & misinformation
- Strengthen knowledge about COVID-19 transmission, prevention and symptoms
- Encourage changes in practices (handshakes, hand washing, less contact)

- Continue/scale up activities from phase 1
- Encourage people to report and isolate cases
- Promote individual and social responsibility to prevent the spread of the virus, protect health services and the most vulnerable

- Continue/scale up relevant activities from phase 1 - 2
- Support community actions and solutions to bring the outbreak under control
- Encourage communities to follow Government regulations (quarantine & physical distancing)
- Scale up PSS activities for communities and volunteers
- Share trusted information on support services



Task

Each group to prepare three flip chart papers with the headings;

- 1. Preparedness (no cases)
- 2. Containment (few cases)
- 3. Mitigation (clusters / outbreak)
- What RCCE activities would you do in your National Society or branch at each phase?

Phase 1: Preparedness (No Cases)

GOAL

1: Community understands and is aware of COVID-19

- Train staff and volunteers on COVID-19
- Regularly communicate global situation to broad public audience, adapting MoH and WHO messages

GOAL 2: Community accepts and uptakes healthy recommendations

- Track community perceptions, beliefs, rumours and feedback to address misinformation and knowledge gaps
- Establish two-way communication approaches to engage communities in discussions about COVID-19

Phase 2: Containment (Few Cases)

GOAL 1: Communities participate in sharing trustworthy information

- Increase the frequency of community feedback mechanisms
- Scale up the use of trusted mass media channels to reach more

GOAL 2: Communities are mobilized in promoting responsibility and social solidarity

- Offer psychosocial support to address fear and anxiety around contact tracing and movement restrictions measures
- Help the most vulnerable in your community by enabling access to trustworthy information

Phase 3-4: Mitigation (Clusters/ Large Outbreaks local transmission)

GOAL 1: Communities are aware and support quarantined or movement-restricted measures

RCCE strategies, material and activities to promote home-based care

GOAL 2: Communities and individuals are empowered and resilient to reduce the effects of COVID 19.

 Create open debates with peers and experts on how to tackle COVID19 and protect the most vulnerable

Questions?

Session 4 Risk communication

How to communica te



Task – Good communication skills (20 mins)

When you are in communities, talking to people about COVID-19 what are the do's and don'ts?

- 1. What would a good communicator do?
- 1. What would a bad communicator do?

What To Communicate

Shift tactics for effective risk communication



Tell people what to



Ask people what they know and think first – then address them with information



Use one-way messages & channels to communicate



Have a two-way conversation with communities

Write messages at the start of the outbreak and don't update them



Regularly adapt and update messages based on community feedback

8 Rules for risk communication messaging about COVID-19

- 1. Know what people don't understand or have questions about
- Communicate a threat
- Provide a call to action give people practical advice on what they should do
- 4. Explain **why** what is being said is important
- Consider the level of existing knowledge
- Consider cultural beliefs and practices
- 7. Be **realistic** and feasible
- 8. **Update** regularly



Group exercise – What is wrong with these messages? (15 mins)

Each group to take one message and discuss whether these coronavirus risk communication messages are effective? What would you add, change or remove?

- 1. Wash your hands
- 2. Do not touch your eyes, nose and mouth this increases the chance of passing the pathogen from your hands into your body
- 3. Stay home if you feel unwell
- 4. There is no vaccine for deadly COVID-19

Communication Channels



Discussion – What RCCE channels do you know? (10 mins)

- What are the most common communication channels used in your area? Why do you think people use them?
- Which channels are used to share information about coronavirus?
- Are different channels used to reach women, children or people in your community with disabilities?

Different channels for risk communication



FACE TO FACE

Community meetings

Door to door visits

Community leaders

Community theatre / cinema

Information desks



MASS MEDIA

Television and radio (shows, news or jingles)



PRINT

Fact sheets
Flyers & posters
Notice boards



TECH

Phone/text hotlines
Social media
Text messages
Loudspeakers
Messenger groups

public and internal



Group Exercise – Advantages and disadvantages of different channels (15 mins)

- 1. Break into four groups
- 1. Each group takes one of the methods of communication
 - Face to face
 - Mass media
 - Written
 - Technology
- 1. On a flip chart, list the advantages and disadvantages of these methods

To choose the right channel consider...

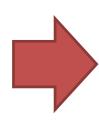
- 1. How much information can it convey?
- 2. How many people can it reach at once?
- 3. Is it two-way?
- 4. Is it accessible to different people? Who might be excluded?
- 5. Do people trust this channel?
- 6. Is it safe in the current context?
- 7. Is it in the right language(s)?



Twitter from Bangladesh Red Crescent Society

COVID-19 is reshaping RCCE channels:







From traditional community dialogues

To physical distance approaches

RCCE activities during physical distancing (phase 3):

Good Options

- ✓ House to house visits but remain outside and with a 1m distance
- ✓ Interactive radio shows
- √ Social media
- √ Telephone hotlines
- √ SMS
- ✓ Messenger groups with staff and volunteers – ask people to set up groups with their friends and families
- ✓ Sharing pre-recorded audio or megaphones

Remember to use local language(s) and find out who uses what channels

Avoid / be careful

- × Mobile cinemas
- × Community theatre
- × Information desks
- × Community meetings
- Social mobilization in busy public places (safety of volunteers)
- ★ Schools (may close)
- Mosques, churches etc (may close)
- × Community clubs and groups



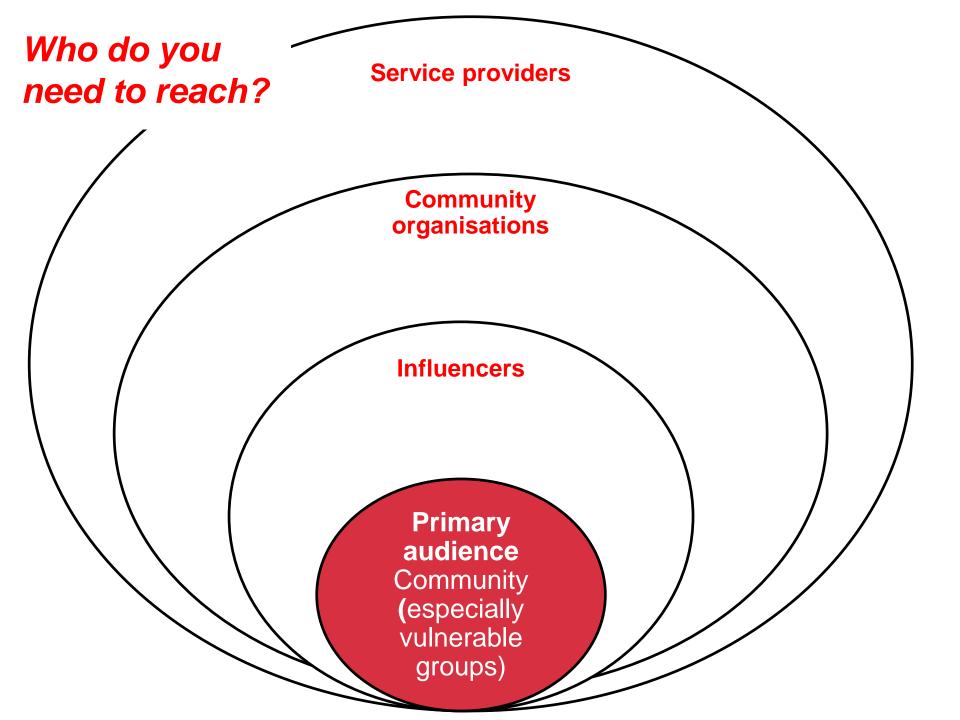
Discussion - What would be the best communication channel for the following scenarios? (10 mins)

SCENARIO 1

A recent survey has shown a large percentage of the population are not aware of the main symptoms of COVID-19 and want to know more.

SCENARIO 2

There is a rumour in one community that if you admit having COVID-19 symptoms you will be taken from your family and never see them again. This is leading to people hiding symptoms and spreading it to others. You don't know where this rumour comes from.





Task – Match the RCCE message with the target audience (5 mins)

- 1. There has been a large rise in people displaying COVID-19 symptoms in Village A
- 2. If you have any symptoms of coronavirus, stay at home and call your local health provider who will advise you on what to do
- 3. The best way to show you respect your grandparents is by not visiting them they are more vulnerable to coronavirus than you and you could make them sick

Young people and parents

Community in general

Government and MoH

Remember to always



And respond to what the community is talking about

Questions?

Session 5 Collecting community feedback

What Is Community

ty
Feedback?

The six types of community feedback

 Rumours, observations and beliefs – information that may be partially or fully inaccurate



- Questions anything the community wants to know
- Suggestions ideas from the community about how to tackle issues or what we could do better or differently
- Acknowledgement & praise compliments from communities



The six types of community feedback

5.Sensitive comments – Complaints about the behaviour of staff or volunteers that breach the **Code of Conduct**, sexual exploitation and abuse (SEA) and corruption:

- Sexual activity with children (<18)
- Exchange of money, jobs, goods or services for sex
- Sexual relations between staff/volunteers and beneficiaries
- Corruption
- Theft
- Nepotism jobs for friends and family
- Bribery

6. Statements that are a threat – individuals threatening the staff or volunteer collecting the feedback

Exercise - What type of feedback is this?

- 1. The Red Cross is deliberately spreading the disease in this community.
- Coronavirus cannot kill Africans.
- 3. My neighbour told me that she was asked for sex in exchange for food vouchers by someone from the Red Cross Red Crescent
- 4. I saw that the hand sanitizers were taken by the Red Cross volunteer in my village and only given to his family and friends.
- 5. Is there a vaccine against coronavirus?
- 6. How can I protect myself from coronavirus?
- 7. You should work with us more (young people). We want to be more involved in activities.
- 8. You should also go to talk to religious leaders, they have a lot of influence and are trusted by communities.
- Thanks so much for organizing this FGD, it means a lot to us to share our opinions.
- 10. Keep up with the good work!



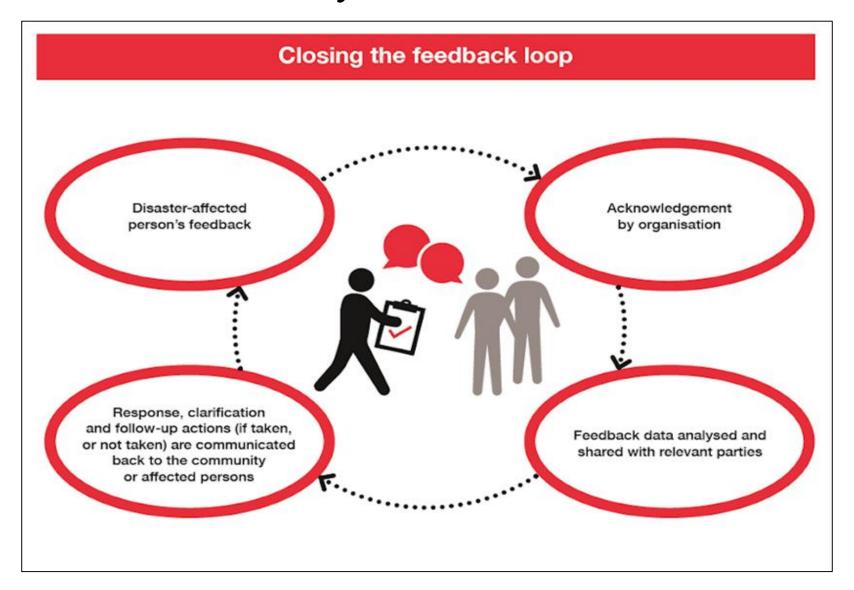
Because feedback...

- 1. Is people's right
- 2. Helps us to improve
- 3. Ensures we communicate about the right topics
- 4. Shows problems early
- Highlights cases of fraud and abuse
- Makes our work more efficient and long-lasting
- Can protect volunteers



PMI volunteer collecting feedback in Sigi, Sulawesi

What is a feedback system? Discuss...



Collecting and Acknowledging Feedback



Role Play- Collecting and acknowledging feedback

- Ask one volunteer to act as the National Society and one to act as a community member.
- Community member will play the role of sharing complaint or feedback example with the National Society
- Did they respond well, or was something missing?
 Could it have been improved?

Tips & tools for collecting and documenting feedback on COVID-19

Ways to collect feedback on COVID-19

- Existing feedback mechanism
- 2. Documenting community feedback during risk communication activities
- 3. Focus group discussion
- 4. Messenger groups
- 5. Social media
- 6. Key informant interviews
- 7. ...

There are tools to help you with these activities – check here:

https://www.communityengagementhub.org/what-we-do/novel-coronavirus/

Or ask your CEA focal point

Community feedback form





COMMUNITY FEEDBACK FORM

Date:	Volunteer 1: M / F Name:	Volunteer 2: M / F Name:
District/state/city:		
Village/town:		
Risk communication activity:		

INTRODUCTION

Hello, my name is [your name] from the Red Cross/Red Crescent, we are a neutral and independent organization. We are here today to talk to people about the new ocrona virus. Have you heard of the new ocronavirus? What do you think about it?

- Write the persons answers in the boxes below.
- I/lake sure to use the right box is the person's feedback a rumour/observation or belief? is it a
 question? Is it a suggestion or request? Is it praise or acknowledgement?
- If you hear the same piece of feedback multiple times, record the number of times you hear it in the box.

FE	EDBACK RECEIVED		
Ru	Rumours/ observations/ beliefs		

Community feedback form

verything marked with * is mandatory to fill in, everything else is optional						
☐ face-to-face	□ hotline call	□ hotline SMS □ Facebook	□ WhatsApp □ Instagram	□ radio □ other		
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Feedback management = accountability?



It is not enough to collect feedback, we have to respond to the community.



Depending on the type of feedback the response can be information and/or action.



Ensure that the response/action is well understood and meets the needs of the community



Appropriate and separate management of serious complaints

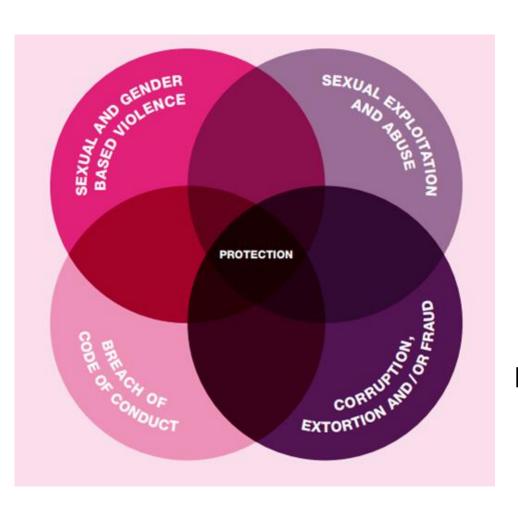


Make sure that community feedback can lead to changes of your programme



For rumours, make sure you give the right information as quickly as possible.

Managing sensitive or serious complaints



What to do?

- Train staff and volunteers
- Protect the complainant
- Decide who needs to know
- Keep sensitive complaints separate
- Follow guidelines on how to handle sensitive complaints

Reporting options:

- Code of Conduct and PSEA Focal Point
- Line manager
- HR representative
- Safecall

Options for responding to feedback and complaints

- Respond immediately if possible
- If not, be clear about when and through which channel you will respond
- How to respond:
 - Directly to the individual in person or by telephone
 - To the whole community radio, messenger application
 - Via noticeboards
 - By making changes and telling the community about them
 - •



Addressing Rumours

Discuss - What rumours have you heard about COVID-19?

Some rumours we've heard about COVID-19:

Rumours about who can be infected

"COVID-19 is a foreigner's disease" (Bangladesh)

"Black people can't die of coronavirus; it is a disease of white people" (DRC)

Rumours about the origin of COVID-19

"Corona virus is manufactured as biological weapon." (Burundi)

"COVID comes from the Chinese government to be more powerful" (Philippines)

Rumours about treatment and prevention

"Coronavirus can be cured by a bowl of freshly boiled garlic water." (Mozambique) "Washing yourself in salt water before sun rise prevents the virus" (Côte d'Ivoire)

Rumours about transmission

- "Only people in cold areas can get the disease" (Ghana)
- "All people coming back from China are infected" (Nepal)
- "Myanmar doesn't have cases because the weather here is so hot" (Myanmar)

Discuss — What is the potential impact of these rumours for volunteers and for the community?

- 1. COVID-19 is a man-made disease
- 2. Garlic will prevent coronavirus
- 3. COVID-19 will not spread in hot countries
- 4. If I wear a mask, I cannot contract Coronavirus

Why we must address rumours:

- Can affect trust in the National Society
- Lead to risky behaviours
- Can also undermine accurate health information
- Can provide honest feedback on our work
- Can affect the safety of staff, volunteers and the community



How do you address rumours?







Listen & Document

Verify

Engage

Step 1: Listen and Document

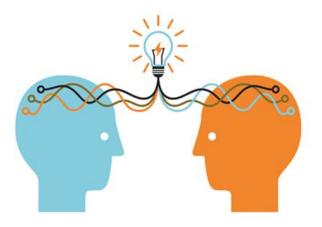
Establish a system to document rumours from different people through multiple channels. For example:

- Volunteers
- Radio call in show
- Media monitoring (traditional and social media)
- Key informant interviews, focus groups discussions
- Rapid assessments, surveys
- Community groups and leaders
- Community meetings or house to house visits
- Health hotlines
- . . .



Step 2: Verify the rumour

- What about the rumour is true or false?
 - Check with the experts & get the facts
- Speak to the community to understand more
- Be careful not to spread rumours



Step 3: Engage & respond



- Always address rumours
- Give accurate and actionable information
- Use rusted communication channels
- Use familiar language(s) and words
- Respect local customs and culture
- Engage in conversation, check you are being understood
- Ensure all staff and volunteers have FAQs

Questions?

Session 6 Community participation

"Our traditional methods of support have had to be either reinvented or tossed out the window altogether."

Jagan Chapagain, (The New Humanitarian, 3 April 2020)

Question:

Is community participation still possible when you can't meet with the community face to face?

Answer:

Yes - it's still essential!

Communities need to be at the centre of the response...even during COVID-19



- Epidemics start and end in communities
- Communities are the experts on their own situation
- We need to build trust with communities to be effective & accepted
- We build trust by treating communities as partners



Discuss - Engaging communities

- 1. How can you still involve communities in planning COVID-19 response activities?
- 2. What community groups exist in your area? How are they working now?
- 3. Who still has access to communities?

Community participation in the COVID-19 response



Existing community groups or committees (health clubs, youth groups, fishing committees) will still be connected to each other so can you discuss issues with them through WhatsApp or telephone?



Community leaders and influencers (religious leaders, community leaders etc) will still be talking to their communities so ask them to share information and collect feedback on plans



Essential workers (supermarket, gas station, pharmacy staff) will still be speaking to people every day – can you train them to share information and collect feedback?



Use technology like social media or online meeting options to hold collect opinions on response options or hold virtual FGDs

Session 7Recap and closing

Key take aways

✓Ask first, understand what the community is unclear about and still wants to know



- ✓ Listen to what people are saying about COVID-19: the key to shape your messages and approaches
- ✓Build trust to get people's acceptance
- ✓ Ensure communities understand public health recommendations
- ✓ Adapt messages to address community questions, be culturally appropriate and context-specific
- ✓ Get leaders to talk! key influencers on board mobilizes communities

Final questions?

Tools & Resources

- Your CEA focal
- CEA hub
- GO Platform
- CEA Guide & toolkit
- CEA Feedback Starter kit
- Perception study guide
- Case studies
- IFRC You Tube Channel
 films on CEA

CommunityEngagement

Welcome to the Community Engagement Hub

