Social Science to Guide Risk Communication & Community Engagement in Humanitarian Situations: UNICEF C4D Actions

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Building Communication Capacity to Counter Infectious Disease Threats Workshop
Forum on Microbial Threats, The National Academies of Science, Engineering and Medicine, Washington DC, 2016
Four pillars to strengthen UNICEF’s capacity in C4D across development and emergency response

- Systematizing Technical Guidance
- Enhancing Technical Capacity
- Strengthening Leadership and Coordination
- Increasing Institutional Resources
Building on lessons and investments in flagship initiatives – Polio and Demand for Immunization

Linkages between the health system and communities to generate success in polio eradication

**SERVICE DELIVERY**

**Healthworker:**
- Culturally appropriate profile
- Knowledgeable
- Compassionate
- Communicative
- Motivated

**Supply:**
Supply systems ensure health services and vaccines are available, potent, in right quantity, managed appropriately

**Demand:**
Caregivers and communities seek, support, and advocate for services

**Caregiver:**
- Informed
- Aware
- Motivated
- Receptive to service

**CAREGIVER EXPERIENCE AT POINT OF SERVICE**
- Can positively or negatively influence demand

**STOCKOUTS OF VACCINE INHIBIT DEMAND**
Current and future actions
UNICEF’S HEALTH EMERGENCIES PREPAREDNESS INITIATIVE

Cross-sectoral initiative – Health, WASH, C4D, Supplies – for UNICEF to be prepared to engage in an outbreak.

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<th>CATEGORY 1</th>
<th>CATEGORY 2</th>
<th>CATEGORY 3</th>
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<td>Current epidemics of concern and diseases of epidemic/pandemic potential with significant public health impact, requiring the development of the full package of preparedness activities.</td>
<td>Endemic or epidemic diseases of potential threat/changing pattern and/or currently with a more limited geographic distribution, requiring additional attention and capacity building with the development of a basic support package of preparedness activities.</td>
<td>Endemic or epidemic diseases currently affecting a limited geographic area and/or posing lower threat, with response package limited to summarizing key facts and linking to existing resources.</td>
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Arboviruses: Chikungunya, Dengue, Yellow fever, Zika
Avian influenza, Pandemic influenza
Ebola, Marburg
Cholera
Malaria
Measles
Meningococcal disease
Polio (non-vaccine derived)

Hepatitis E²
Leptospirosis²
Novel Coronaviruses (MERS-CoV® and SARS-CoV®)
Typhoid fever²
Viral Hemorrhagic Fevers*: Crimean-Congo hemorrhagic fever, Lassa fever, Rift Valley fever
West Nile virus
Nipah and related henipaviruses²

Diphtheria
Monkeypox
Japanese encephalitis
Pertussis
Plague
Rubella
Seasonal Influenza
Shigellosis, Enterohemorrhagic E. coli/

UNICEF
Disease Packages Resources – Health, WASH, C4D, Supply
Capacity Building Efforts

C4D Emergency, Disease Outbreaks and Crisis Communication Training Programme

Workshop overview

Day 1: UNICEF Humanitarian Work – C4D Emergency & Crisis Communications Lens

Day 2 & 3: C4D Emergency Training
or
Crisis Communication Training

Day 4 & 5: C4D Preparedness for Poliovirus and other Disease Outbreaks

13 -17 June 2016
Nairobi, Kenya
Social Science in Action Platform

Areas of focus

1. Community Engagement and Cultural logics
2. Social difference and Vulnerabilities
3. Political Economy

Staged coverage across all regions
Platform & Its Outputs

Social Science in Humanitarian Action
A Communication for Development Platform

This platform links the humanitarian sector with social science and anthropology expertise on the social, cultural, political and economic contexts of emergencies. Social Science in Humanitarian Action works with a network of social and communication experts with regional and subject expertise to provide rapid insight, analysis and advice on critical dimension of emergency and response.

• **Network**: of social science contacts, thematic leads and regional partners

• **Research**: rapid response evidence reviews and policy briefs, drawing on networks and with steering from thematic leads; ‘peacetime’ research and horizon scanning

• **Information & KM**: Dissemination of new research through networks; maintain website

• **Capacity building for active response**: training and deployment modalities in using social science evidence in community engagement
Cholera in the Horn of Africa

UNICEF and partners want to improve the quality of our interventions in responding to current cholera outbreaks (medium term response plan)

a) What are the practices, behaviours and social factors that increase the risk of cholera/AWD transmission among communities in Somaliland and Somali region, Ethiopia?

b) What beliefs and other socio-economic factors influence the decision to seek treatment (for adults, adolescents and children) from a health facility in Somaliland and Somali region, Ethiopia?
Collective service: Communication & Community Engagement

Strategic decision-making Level

Programme implementation level

Key functions:
- Assess communication landscape
- Regular perception surveys
- Track rumours
- Coordinate provision of information to affected people
- Support & coordinate collective approaches
- Aggregate data and feedback
- Provide humanitarian leadership with information to inform decision-making

Approaches & tools:
- Joint call centre/hotline
- Perception surveys
- Inter-agency complaints mechanisms
- Suggestion boxes
- Government Mechanisms
- Monitoring visits

Help desk (during distributions)
- SMS platforms
- Local community monitors
- Community gathering
- Traditional Community Mechanisms
- Radio programmes
Moving forward – Broadening partnerships and investments

• Unique opportunity to broaden the range of partners engaged in these initiatives

• Common platforms and resources to maximize uptake and impact

• Strengthening coordination and sustained investments over time