

2.4 Risk communication and community engagement

The greatest lesson learnt on communication from the first year of the pandemic is that public health bodies must communicate early, strategically, and persistently to curb the spread of the virus, with strong support from community health. Educated and empowered communities play a vital role in preventing transmission of COVID-19, and community health workers are a gateway to good health. WHO-AFR fully absorbed this lesson in implementing the SPRP 2021. Working with UNICEF, AFENET, civil society and national public health agencies, community health workers and influencers received training on contact tracing, with keen attention to symptomatic contact referral, ahead of patient transfer to designated isolation facilities. As part of its partnership with community health, WHO facilitated procurement of reporting and monitoring forms, pens, digital thermometers, and alcohol-based rub solutions. Several important survey and training mechanisms were provided to inform risk communication strategies and for understanding drivers of non-adherence to public health measures:

Survey and training mechanisms to inform risk communication strategies



5 Knowledge Attitudes and Practices (KAP) in Uganda, South Sudan, Ethiopia, and Namibia, with results pending in mid-July for Kenya, Tanzania, Eswatini, Lesotho



3 Online and offline Social Listening & Community feedback platforms (with AIRA and UNICEF) fed: a monthly joint report, designed to summarize, and recommend actions



14 Social Science Evidence in Health Emergencies by Collective service trainings conducted



15 Behavioural observations using participatory mapping and community dialog methodologies



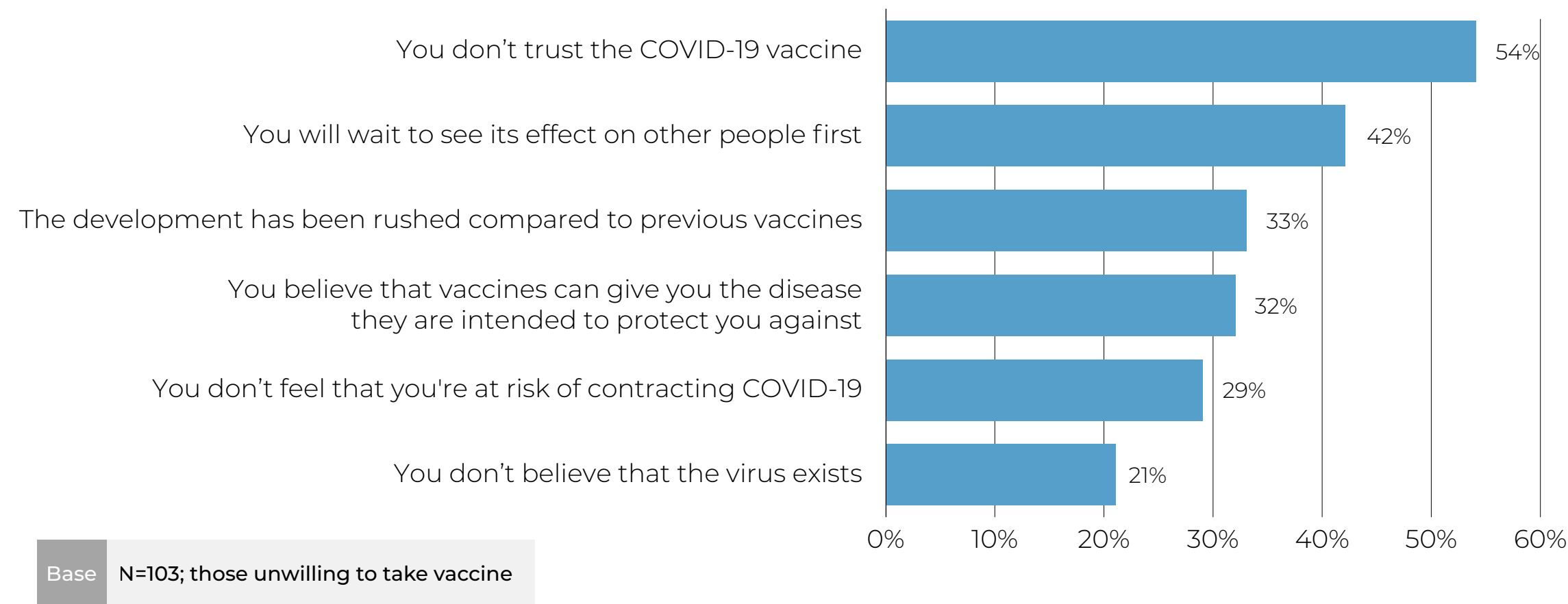
Online peer learning-communication hubs shared best practice in community prevention measures, such as alphabetical order entry in supermarkets, shock media, and youth-led public information campaigns, among others.

“The Embassy of Demark in Uganda is proud to partner with the WHO Country Office and does acknowledge the good collaboration WHO has, not only with the donor partners but most significantly with the Ministry of Health and district health offices. The pivotal role which WHO plays in supporting the Government to provide a national response to COVID 19 has significantly helped in containing the spread and management of COVID-19 in Uganda.”

H.E. Nicolaj A. Hejberg Petersen
 Ambassador, Royal Danish Embassy, Kampala, Uganda.

FIGURE 7: KAP study – Reasons for vaccine hesitancy

What would be your reasons for not taking a COVID-19 vaccine?



Note: Base too small to break down by demographics

From the field

Partner voice – In Kenya, Women take action against COVID-19

When the COVID-19 pandemic hit Kenya, Ugenya Sub County in Siaya County came into the national lime-light by a video clip, which went viral, capturing the first ever COVID-19 death burial, in accordance with stringent COVID-19 regulations. This scared many people at the time, including families in the area and members of the Duuma women group, which I lead.

Fortunately, we saw an opportunity to help our community better when we attended a meeting organized by WHO-Kenya, where the local leadership was sensitized and engaged towards the virus, and what we could do to stop its spread. The meeting enabled local sub-county leadership – political, social, and administrative – to reflect on COVID-19 in the sub county and the need to further appreciate the problem at hand and commit to some action.

Although this meeting was held last October, this year we resolved to take action and approached WHO to engage further on how to reach women, so that we could learn and participate in COVID-19 prevention and control. I then mobilized and organized a meeting in June with 15 women, representing 7 women's groups. Here, we recognized that as women we could play a key role in influencing members of our households to observe COVID-19 containment measures, like ensuring we have hand washing stations at home, and reminding our families and communities to carry and wear face masks as they leave home. Since then, the four women's groups that I lead have continued to support each other through table banking, but to also to ensure sustained COVID-19 health measures.

Most members of the four women's groups have hand washing stations in their homes and remind their families and neighbours about all measures. We no longer hold our regular meeting, to minimize gatherings. We also avoid attending funeral gatherings. Our groups use tailored re-useable face masks, to match our individual group uniforms. We thank God that our efforts to sustain safety measures have shown some results – to date we have not reported any unfortunate severe disease or death due to COVID-19 among our members.

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Duuma Women's Group / Ugenya, Siaya County, Kenya