COVID-19: Community feedback: Priorities and Recommendations

From 25th of May to 8th of June 2020

This report documents the main trends in community feedback reported by agencies responding to COVID-19 in West and Central Africa. It was prepared by the Community Feedback Sub-Working Group, which is part of COVID-19's Interagency Working Group on Risk Communication and Community Engagement (RCCE). This report is produced biweekly

---

1) Challenges regarding compliance with Covid-19 prevention measures

"Yes it does exist [the virus] but how are we going to protect ourselves from covid19 we don't even have a protection kit" - CAR (OXFAM)

Recommendations to address this feedback:

PARTNERS WORKING ON RCCE

Provide useful materials to support messages advocating for correct mask wearing
☐ To strengthen the correct wearing of masks, relevant guidelines and content should be shared with all those working on RCCE as well as with the other pillars.
    New WHO materials on mask wearing:
- To fight against the myths about wearing masks:
  https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks [ENGL]
  https://www.who.int/fr/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters [FRA]

Involve and work with groups and specific persons

☐ To address the low risk perception among youngsters:
- Analyse (U Report and other social networks) with groups of young people the reasons justifying their risk perceptions, their favourite channels, their trusted influencers, the information they need
- Strengthen **peer education**
- **Recruit and train** more young people within feedback mechanisms, social mobilization, and community engagement (throughout the entire RCCE intervention)
  Useful material: Guide on working with and for youth in the context of Covid-19

2) Rumors and mistrust related to the Covid-19 response

"The government must reach a number of cases to benefit from Western funding. This is why it declares everyone positive" Guinea-Conakry" *(IFRC)*

Recommendations to address this feedback:

PARTNERS WORKING ON RCCE

☐ Support governments in their efforts to increase the visibility of their spending and financial needs for measures to combat Covid-19:
    Examples of support
- Provide press release templates

- Support governments to use more charts to communicate in a simplified and more visual way on spending and fund needs (ex. on government websites, on social networks etc.)
- Communicate more strategically on Covid-19 activities supported by government funds (ex. on posters, or during radio broadcasts etc.)
- Compile recommendations intended to strengthen the public communication provided by various partners (ex. WHO colleagues) and make them available to public authorities

PARTNERS WORKING ON RCCE AND OTHER PARTNERS, ESPECIALLY PARTNERS WORKING ON INFECTION PREVENTION AND CONTROL

Involve and work with groups and specific persons

Recommendations to be continued

☐ Share examples and case studies to support all the pillars to work together with community representatives and support community solutions. The involvement of communities can avoid distrust in the response and will lead to more reliable interventions.
Useful link : Tips for community engagement in low resource settings

3) Challenges related to care of patients with Covid-19 by health workers /centres

"Called the hotlines for a long time and so far, nothing has been done, the response team has not arrived" - RDC (UNICEF)

Recommendations to address this feedback:

ALL AREAS OF THE RESPONSE

Strengthen observation and case management

☐ Ensure **better availability / distribution of inputs** in health centres and support the government and health units to strengthen their logistics, HR, etc.
☐ Liaise with the RCCE group and the hotline / other feedback mechanisms to communicate on the update of the situation in health centres (waiting times, availability of inputs / health personnel / available services)
➔ This allows for an updated communication that is adapted to realities on the ground

PARTNERS WORKING ON RCCE

Coordination and role of RCCE

Recommendations to be continued

☐ Put a RCCE focal point in all the other pillars allowing him/her to make interventions in latter. At the same time, allow members of the other pillars to make interventions in the RCCE pillar

☐ **Make hotlines more efficient and useful for callers and hotline operators**

- Structuring the hotline: have a main hotline that receives all incoming calls (to avoid duplication of hotlines which can create confusion among callers) → depending on demand, transfer the call to another hotline internally
- Provide the hotline staff with enough tools to respond adequately to callers and strengthen training on referral systems so that staff know and use them
- Develop SOPs to determine the role of partners who should act following feedback from the hotline, in order to return to the communities with appropriate responses
- When setting-up a hotline, determine its usefulness (cf. toolbox « Hotline in a Box »)

PARTNERS WORKING ON RCCE, ON TREATMENT AND CASE MANAGEMENT AND OPERATIONAL COORDINATION

Involve and work with groups and specific persons

- **Aimed at health personnel:** Improvement of communication techniques by sharing trainings ready to be applied
  Ex. RCCE training aimed at health personnel has already been applied in 5 WCAR countries

4) Rumors about treatment and health care services

Recommendations (to be continued) to address this feedback:

PARTNERS WORKING IN RCCE

☐ There must be a clear distinction between recovery, treatment, remedy in our RCCE activities
- Development of a glossary (in local languages) with key words and concepts
- Use of IFRC's Dr Ben and Dr Aissa to communicate about the clear distinction

☐ Clear information must be provided on where the patients are treated and whether or not isolation and treatment are free.

5) Gender dimension within feedback mechanisms

Recommendations to address this feedback:

PARTNERS WORKING IN RCCE

Involve and work with groups and specific persons
☐ Analyse (FGD, KII, U Report, CASS) with groups of women the reasons why they only marginally use certain feedback mechanisms, which are their favourite channels, which are the influencers they trust, what type of info they need
☐ Analyse the CASS study on lessons learned from Ebola and the recommendations for including more women in the response to Covid-19 (cf. CASS Brief 2 [engl] and [fra]: 1) communication resources in format accessible to women; 2) equitable representation of women at all levels of the response, 3) include women's associations and groups in the development and design of the response)
☐ Consider **KAP studies** which inquire the preferred channels of the different target groups and in particular women
☐ Identify and specify the channels less used by women than by other target groups
☐ **Recruit and train** more women in feedback mechanisms

For additional information on any products from Sub-working group community feedback, please contact Thiaba Fame (ThiabaAnais.Fame@barcelona.msf.org) or Eva Erlach (eva.erlach@ifrc.org)