



EXECUTIVE SUMMARY:

REPORT ON COMMUNITY COMMUNICATION CAMPAIGNS

Local Health System Sustainability Project

Task Order I, USAID Integrated Health Systems IDIQ

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Local Health System Sustainability Project

The Local Health System Sustainability Project (LHSS) under the USAID Integrated Health Systems IDIQ helps low- and middle-income countries transition to sustainable, self-financed health systems as a means to support universal health coverage. The project works with partner countries and local stakeholders to reduce financial barriers to care and treatment, ensure equitable access to essential health services for all people, and improve the quality of health services. Led by Abt Associates, the five-year, \$209 million project will build local capacity to sustain strong health system performance, supporting countries on their journey to self-reliance and prosperity. In Colombia, this project is known as “*Comunidades Saludables*”.

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EXECUTIVE SUMMARY

I. DESCRIPTION

OBJECTIVE

To describe the communication activities performed at the community level to prevent the spread of infection and to promote COVID-19 vaccination.

METHODOLOGY

This document includes two complementary dimensions: the first summarizes a review of the literature on community communication activities and strategies as carried out in several countries, which demonstrated favorable results for deploying COVID-19 vaccines, considering vaccine hesitancy among the population. The second describes the actions developed by the LHSS Colombia Activity in agreement with health authorities at the national and local levels to generate an appropriate response to vaccine misinformation, and to strengthen both the resilience of the health system and the community's trust in the system to increase COVID-19 vaccination.

DIMENSION I: LITERATURE REVIEW

Although researchers from a variety of scientific disciplines have published a myriad of studies in favor of COVID-19 vaccination, studies show that social media misinformation could hinder vaccination efforts and increase vaccine hesitancy (Alamoodi AH, 2021). The World Health Organization (WHO) defines vaccine hesitancy as a delay accepting safe vaccines or the rejection of such vaccines despite the availability of vaccination services (WHO, 2015). Hence, the WHO recommends further investigating the reasons behind vaccine hesitancy, its determining factors, and resulting challenges.

Experts indicate that certain determinants of hesitancy may cause both vaccine acceptance and rejection, thus, a higher level of education does not necessarily presuppose acceptance. For examples, some Countries have both rural ethnic minorities and isolated communities and high-income residents in urban areas expressing concern regarding the safety of the vaccines (WHO, 2015).

To respond to the factors triggering such hesitancy, governments and health authorities in different countries have been developing community engagement strategies since the beginning of their COVID-19 vaccination programs. The United Kingdom provided support to local public health teams to work with communities in addressing existing beliefs and access barriers. This work was performed through a strategy involving the design and delivery of customized communications and the monitoring of local information (National Health Service, 2022). As a result of implementing similar initiatives in a variety of countries, vaccine uptake increased in the populations under study: in Pakistan, in the over 50 age group, vaccine uptake increased from 73.1% to 81.7%, in Bangladesh from 83.1 to 89.1%, in the Caribbean from 61.6% to 67%, and in African groups from 64.9% to 73.5% (National Health Service, 2022).

Table I outlines some of the most important recommendations.

Table I. Recommendations for designing community intervention strategies aimed at increasing COVID-19 vaccination uptake and reducing vaccine hesitancy.

- Develop communication campaigns and messages about vaccination, emphasizing the risk of COVID-19 for the population, and the need for mass vaccination to improve vaccine effectiveness and control infection.
- Adopt differential approaches within and among different population groups, being transparent in recognizing causes of concern, and taking into account cross-sectional social status.
- Vaccination programs must deliver a localized and empathetic response to counter misinformation.
- Additional work is needed to investigate the most effective approaches regarding the delivery of communication strategies addressing ethnically diverse communities.
- Focus on understanding both target audiences and the manipulation tactics used by anti-vaccination campaigns. The above can be helpful in protecting people from the impacts of such campaigns.
- Community and religious leaders are valuable facilitators regarding the delivery of knowledge exchange processes among marginalized communities, health care providers, and policymakers, and can also facilitate the participation in and dissemination of response strategies.

Considering the recommendations identified through the literature review, the Ministry of Health and Social Protection's (MSPS, as per its acronym in Spanish) communication and social mobilization component, within the framework of the Expanded Program on Immunization (PAI, as per its acronym in Spanish), is considered to be especially important. It links together the cultural characteristics of the target population, the creation of strategic alliances to train community leaders, and the participation of the family and community in processes addressing health promotion and protection. Hence, the findings from the current literature review provide additional information that is key to improving the institutional response and enhancing the capacity of this component in relation to COVID-19 vaccination.

In summary, this first dimension creates a conceptual reference framework aimed at developing the second dimension, which discusses the activities performed by LHSS Colombia and national and local health authorities in managing COVID-19 vaccination communication campaigns at the community level.

DIMENSION II: ACTIVITIES AIMED AT MANAGING COVID-19 VACCINATION COMMUNICATION CAMPAIGNS AT THE COMMUNITY LEVEL

The communications activities that were delivered to effectively implement the National Vaccination Plan (PNV as per its acronym in Spanish) were the product of a rigorous exercise to identify needs, coordinated with health authorities and the community at the national and local levels. As a result, LHSS and local actors designed and executed a set of activities described as follows.

Table 2. Community communication activities developed between LHSS Colombia and the national and territorial health authorities.

Activity	Content	Description
Creating a toolbox	Dimensions implemented: <ul style="list-style-type: none"> - Press release - Interviews - Strategic planning - Focus groups - Traditional and digital media - Storytelling - Spokespersons 	This process was delivered through trainings to both the community and the local media.
Evaluation for communication campaigns (Checklist)	Dimensions or minimum criteria that an effective communication campaign shall meet at both a national and local level.	Development of an evaluation format or checklist for communication campaigns. This checklist was designed by taking into account the strategic focus, content, and impact of the campaigns.
Creation of a communications kit aimed at strengthening communication strategies at the national and territorial levels (Deliverable: communications kit submitted in Q3)	Design, production, and distribution of the communications kit, which includes: <ul style="list-style-type: none"> - Infographics (banners and flyers) - Animated videos and radio spots. 	The contents were drafted together with technical teams from the MSPS and LHSS Colombia.
Provide support for developing Information and Community Education activities and implementing the PNV at the territorial level.	PAI-COVID teams comprised of health professionals were deployed to provide support for strengthening communication strategies within the framework of the PNV.	This process was delivered through training activities addressing the community and the dissemination of clear and timely information on COVID-19 vaccination to strengthen trust in vaccines and promote uptake.
Provide support for community communication initiatives (Grants)	Implementation of a request for applications process targeted to institutions interested in developing and implementing a behavior change strategy.	Provide support to the proposals in compliance with the program requirements to strengthen the request for applications and receive applications from different institutions. The request was performed through social networks.

Source: LHSS Colombia

2. COORDINATION

The PNV is led at the local level by the coordinator of the Expanded Program of Immunizations PAI-COVID-19, who directs and plans actions that must be implemented in coordination with not only the communications sector and local media, but also with grassroots groups and community leaders in order to reach the entire community in both urban and rural areas. Particularly, to coordinate communication activities with local stakeholders, LHSS Colombia has been facilitating the organization of permanent working groups, with a prior identification of needs using top-down and bottom-up approaches, in a process that has incorporated both the MSPS and the Territorial Entities.

3. RECOMMENDATIONS

The following recommendations have been drawn from dimensions I and II and are described in the COVID-19 vaccination uptake methodology, and come from the community communication campaigns and activities performed by LHSS Colombia:

1. The community communication strategy at the national level can be strengthened by integrating different local entities and inviting other stakeholders to join the discussion. This will be done by demonstrating unity around a single cause: saving lives. This process shall lean on influencers with a national reach to convey the message of care and trust in vaccines, which can motivate others to follow the example based on their experiences.
2. Increase the spaces led by communities of experts to continuously disseminate information and avoid the spread of misinformation. This is essential for helping distribute expert voices across a variety of platforms (digital and traditional). Citizen concerns may be addressed using simple language and data that can be discussed in schools, working spaces, close groups, and with children, young people, and adults alike.
3. The Territorial Entities must identify community communication strategies to address factors in the community which are impacting trust of COVID-19 prevention and vaccination processes.

4. SUSTAINABILITY

The deliverable aims to document community communication strategies and activities to release and disseminate high quality and reliable information to communities, which may be used in a public health emergency. It is worth noting that the activities delivered at the territorial level should differ and be adjusted periodically as the stance, perception, and milestones at the national level evolve. An ongoing analysis shall be performed of the scope of existing myths to strengthen content aimed at reducing the number of people denying the existence of the virus or undermining the veracity of vaccine effectiveness. This document facilitates the creation, development, and measurement of strategies tailored to each territory. This document also helps the MSPS to reassess, based on existing content, its approach regarding vaccination processes and how messages are disseminated and consolidated in each territory.

5. ANNEXES

1. Poster on the creation of community campaigns
2. Report on training addressing local media
3. Toolbox for local communicators