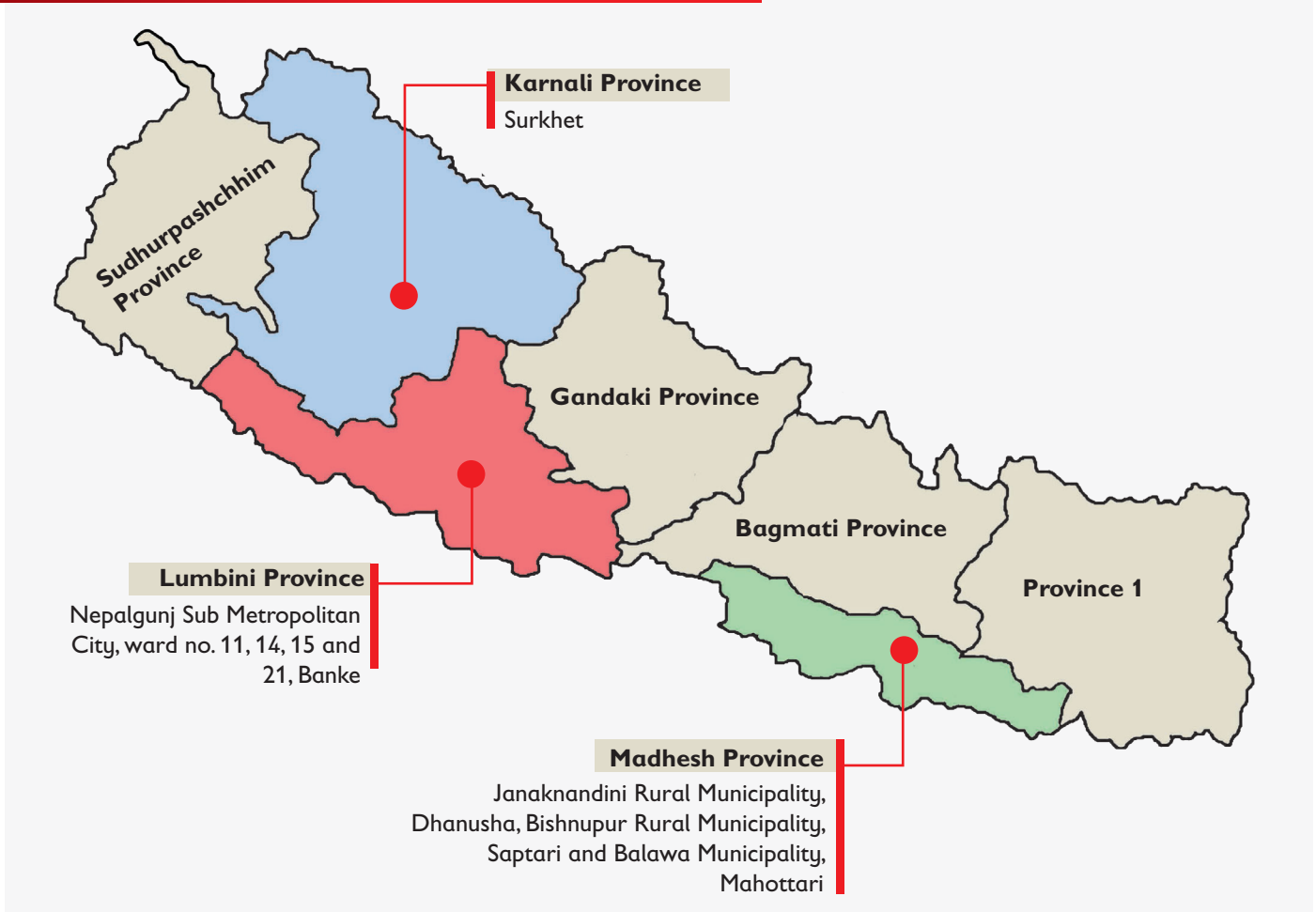




GET VAXED NEPAL
RISK COMMUNICATIONS AND
COMMUNITY ENGAGEMENT
(RCCE) PROJECT

Save the Children, along with partner organization, Aasaman Nepal and Social Development Forum (SDF) implemented the 'GET VAXED' Risk Communications and Community Engagement (RCCE) project from October 2021 to strengthen vaccine uptake, combat rumors related to vaccines, and promote COVID-19 safe behavior. The project introduced localized multi-entry points to communicate and engage most marginalized communities to increase vaccine uptake and trust in the Government's ongoing vaccination drive.

PROJECT IMPLEMENTATION AREAS



LOCAL PARTNERS: Aasaman Nepal and Social Development Forum

MEDIA PARTNERS: Community Information Network (CIN) and Nepal FM Network

PRIVATE SECTOR PARTNER: Pathao

OUR REACH

DIRECT BENEFICIARIES:

96246

(October 2021 to March 2022)

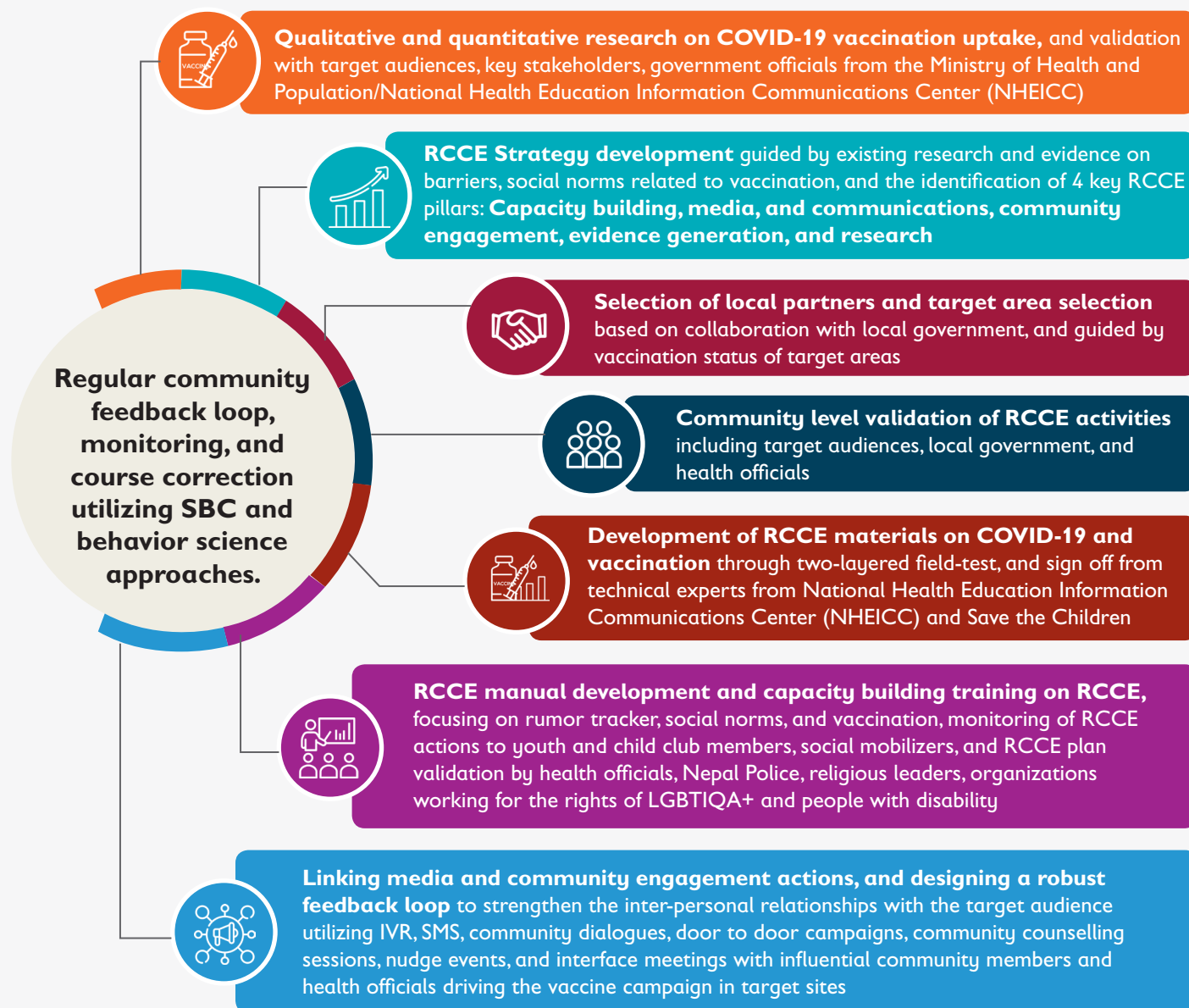
INDIRECT BENEFICIARIES:

10 million

(media and communications actions)

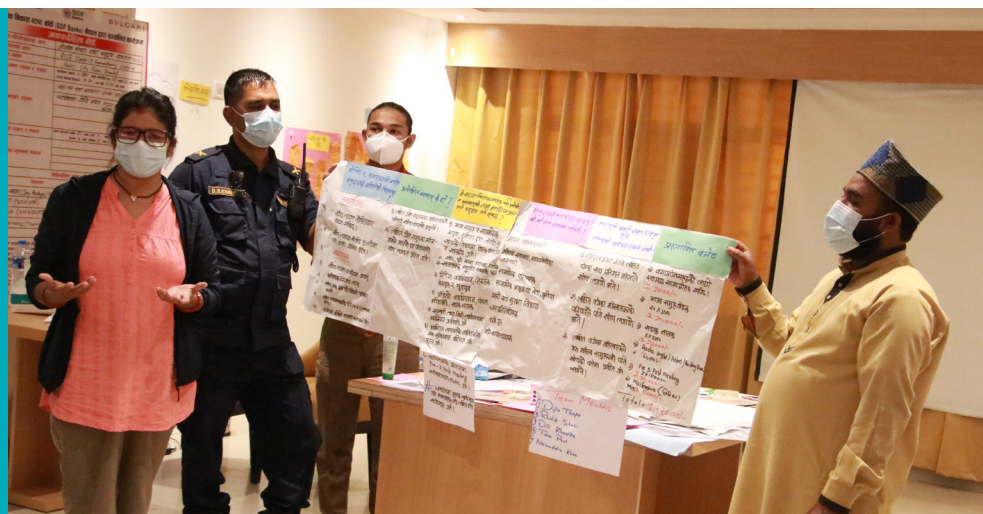


STEPS TO RCCE PROGRAMMING



RISK COMMUNICATIONS AND COMMUNITY ENGAGEMENT (RCCE) PROGRAMMATIC PILLARS

CAPACITY BUILDING: Risk Communications and Community Engagement (RCCE) training to local partners, child and youth club members, and influencers

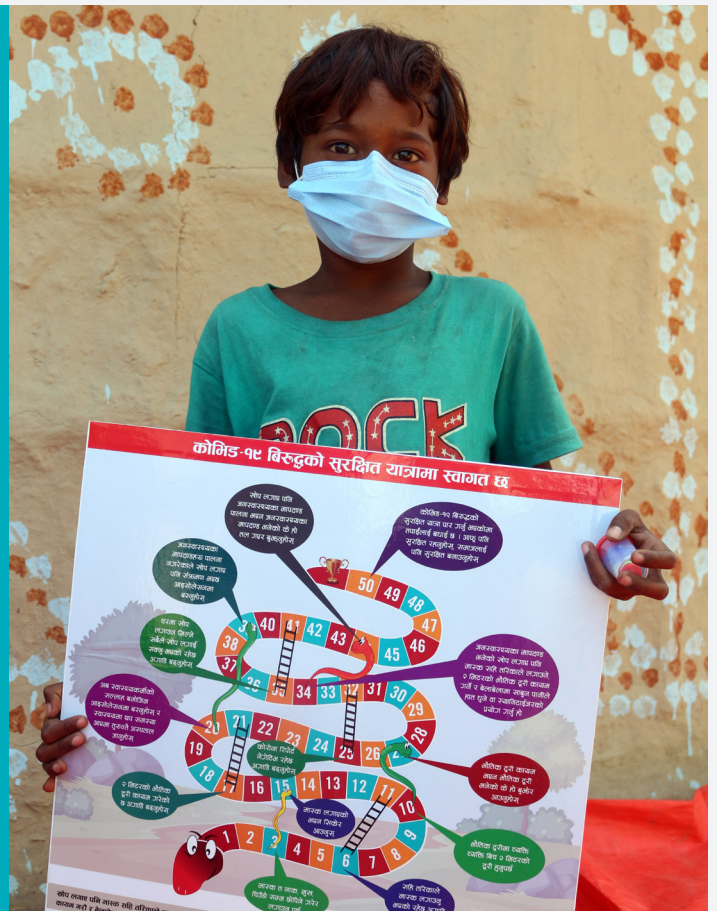




After participating in the RCCE training provided by Save the Children, and SDF, I along with my friends became a part of the door-to-door ‘nudge’ campaign to promote COVID-19 safe behavior and strengthen vaccine uptake in the community. We took part in the household mapping process and identified the unvaccinated households. After which, we visited the unvaccinated households and oriented them on COVID-19 safe behavior and initiated discussion on importance of vaccination. The FCHVs and health officers who were a part of the campaign answered questions related to COVID-19 and vaccines, which further helped address rumors and motivated people to get vaccinated. During these visits, I realized that rumors related to the COVID-19 and vaccines are the reason why people are hesitating to take the jab, and it is important to provide them with critical evidence-based messages and share real life stories to help them make a decision. As a youth volunteer, I am doing my part to encourage people to get vaccinated, and I am confident that our joint efforts will succeed in achieving 100% vaccination and put an end to the COVID-19 pandemic.”

MEDIA AND COMMUNICATIONS ACTION:

- SBC/RCCE informed radio programs (Hamro Palo, Khelo Dohori)
- Radio Public Service Announcements (PSAs), TV, and web series
- Social media
- IVR & SMS push (Targeted)
- RCCE materials and games on COVID-19 and vaccination
- Private sector partnership for message development and diffusion



Interactive Voice Receiver (IVR) service to promote Knowledge, Attitude, Practice (KAP) level change

Save the Children used Interactive Voice Response (IVR) service to diffuse critical messages on COVID-19 and vaccination to communities most at risk. Evaluation of the recent IVR campaign featuring the Chief Minister of Madhesh Pradesh, Lal Babu Raut suggests that 56.85% of the respondents shared that they have decided

to get vaccinated after listening to the IVR push message from the Chief Minister. Similarly, 50% of respondents stated that they shared the COVID-19 safety practices and vaccine information with friends and family, and 44.52% stated that they will embrace safe practices to protect themselves and others from COVID-19. 6000 calls were pushed as part of the IVR campaign to unvaccinated individuals, and the effectiveness survey was conducted with 200 sample individuals.

SBC/RCCE APPROACH INFORMED RADIO PROGRAMS

'HAMRO PALO' (IT'S OUR TIME NOW!):

A capsule model Social Behavior Change Communications (SBCC) radio program designed with the aim to leverage children's voices and concerns during COVID-19 pandemic. Children participated in the program using the Interactive Voice Response (IVR) and posed questions that directly and indirectly affected their well-being to influential policymakers and stakeholders. Feedback loops introduced in the program strengthened the child generated content (CGC) process.



I have heard that after being vaccinated some people have heart attack. I have also heard that vaccinated people develop magnet-like effect in their bodies. Is that true?

Sabu (from Gaighat, Episode 10)

This is false. Many people have been vaccinated and such problems have not been detected in Nepal so far. One should not be afraid. There's no evidence of people getting heart attack after vaccination. You can be rest assured and go for vaccination.

Dr. Sujan Bhusal Neupane, Public Health Expert (Episode 10)

'KHELO DOHORI' is an innovative, Social and Behavior Change Communications (SBCC) radio series, promoting one of Nepal's most popular folk music 'Dohori' (back and forth exchange of lyrical phrases between singers) to promote critical life-saving messages on COVID-19 and vaccines. A robust feedback loop is also designed to track rumors, and channel information to government led Risk Communications and Community Engagement (RCCE) networks to design strategic, need-based, and solution-oriented health promotional materials on COVID-19 and vaccines. The radio series utilizing pop culture supports with behavioral nudging by building rapport with local communities and strengthening ownership towards the messages related to COVID-19 and vaccination discussed by trusted voices in the communities, leading to promotion of role models, and achieving desirable action level goals.



COMMUNITY ENGAGEMENT:

- Awareness on the Wheels (AoW)
- Door-to-door campaigns in collaboration with youth and child club members, social mobilizers, Female Community Health Volunteers (FCHVs) and health officials
- VAX-UP groups and collaborative campaigns (Seed grants)
- Point of Entry (PoE) campaigns with Nepal Police and health officials
- Community Information Point (CIP)
- Mobile vaccine clinics in collaboration with health officials



MOBILE COVID-19 VACCINE STATIONS:

With the aim to strengthen vaccine uptake in the most marginalized communities, and to address the challenge of access and accessibility, Save the Children, and local partner, Aasaman Nepal coordinated with the local government, health units, health officers, and FCHVs to set up mobile vaccine clinics in targeted rural municipalities. Individuals reached via door-to-door campaigns are referred to the mobile vaccine clinics by the FCHVs, youth volunteers and social mobilizers under the RCCE project. According to Bharati Karki, vice-chairperson of *Janak Nandini* Rural Municipality (RM), one of the working RMs of the RCCE project, “the mobile vaccine clinics supported by Save the Children and Aasaman Nepal have not only brought vaccines near to people in need but has also supported with renewing trust and confidence towards government health systems.” Furthermore, supporting local government’s vision to achieving 100% vaccination status in their respective RM.

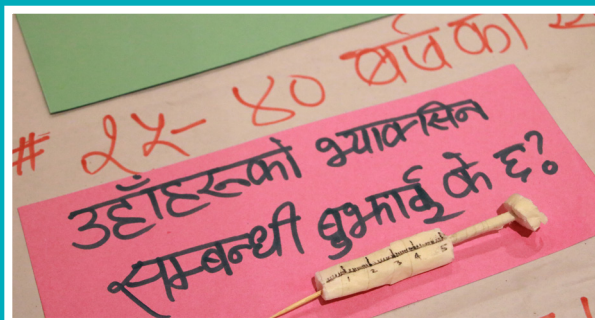


“The mobile vaccination clinic has helped us get the vaccine easily, and the counselling service provided by FCHVs and youth volunteers in the clinics have helped address our fear of getting the vaccine, and reinforced critical life-saving messages to protect ourselves from COVID-19,” opined one of the beneficiaries.



EVIDENCE GENERATION AND DOCUMENTATION:

- Most Significant Change (MSC) stories
- Vignettes (Social norms nudging)
- Interface dialogues with key stakeholders and target beneficiaries



THE NEPAL LITTLE JAB BOOK:

Save the Children, along with Busara Center for Behavioral Economics, and Common Thread launched the Nepal 'Little Jab Book', a playbook focusing on six key behavioral challenges which restricts vaccine uptake and presents contextual and hackable behavior change actions to strengthen vaccine uptake and confidence in Nepal. The playbook is designed to inspire behavior change actions which are need-based, driven by evidence, and guided by principles of social norms to address pressing issues and concerns related to vaccine uptake and confidence.



The Nepal Little Jab Book details down evidence and solutions to inspire vaccine uptake in people who are concerned about the side effects of the vaccine, challenged by trust towards available vaccines, or those looking for social endorsement in behest of various empirical and normative expectations.

INNOVATIONS IN RISK COMMUNICATIONS AND COMMUNITY ENGAGEMENT (RCCE):

COMMUNITY INFORMATION POINTS (CIPS):

Barbershops in the hardest to reach areas have been identified as, 'Community Information Points' (CIPs), where non-traditional stakeholders are oriented on COVID-19 and vaccination, supporting the diffusion of critical evidence-based information, and real-time addressal of myths and rumors related to COVID vaccination. Barbers herald dialogues and discussions related to COVID-19 and vaccination with their clients and provide RCCE materials developed by MoHP and Save the Children. CIPs is one of the innovative concepts designed under the 'GET VAXED' project and has been effective in conducting non-adversarial dialogues utilizing common and trusted voices as 'role models'. Local partners conduct follow-up visits in CIPs to assess the knowledge and behavior level impact and collect insights from the CIP focal points.



AWARENESS ON THE WHEELS (AOW):

To diffuse critical life-saving messages and to inform most-at-risk communities about the importance of COVID-19 vaccination, Save the Children and local partners conducted a series of 'Awareness on the Wheels' (AoW) campaign. AoW is Save the Children's flagship community engagement model utilizing community-based approach to herald dialogues and discussions related to COVID-19 and vaccination in the community. 'Tempos' or 'Tuk Tuks' are decked up in life-saving messages, and public miking's are conducted by social mobilizers, who conduct public demonstrations and answer questions related to COVID-19 and vaccination.



These campaigns are supported by local government units, health officials, Nepal Police, child, and youth club members, and have been regarded as a creative approach to reach most at risk communities and promote evidence-based information related to COVID-19 and the vaccination program.

DOOR-TO-DOOR 'NUDGE' CAMPAIGNS:

Save the Children and local partners developed a community level 'nudge' campaign to encourage people from the communities hard to reach to get vaccinated. Youth volunteers with support from local partner social mobilizers conduct weekly household visits, and discuss the importance of COVID-19 vaccination, and provide evidence-based information regarding COVID-19 and vaccination to support family-level decision-making process. These 'nudge' campaigns were jointly implemented by local volunteers, social mobilizers, Female Community Health Volunteers (FCHVs) in rural municipalities with low vaccination rates.



Volunteers provide red, green, and yellow stickers to houses based on their family's vaccination status. Red indicating that the family has not been vaccinated, yellow to suggest single dose vaccination in the family, and green sticker for full vaccination. Follow-up and vaccine referral sessions have also supported with motivating people to get vaccinated, and the peer-to-peer approach in the nudge campaign has also created a positive competition between households to get vaccinated.

“ I was scared to get vaccinated because my neighbors said that the vaccines would turn breastmilk into poison. I was afraid and scared for my newborn child. But when the FCHVs told me that this was a rumor, I was relieved, and got vaccinated. I also shared the information provided by the FCHVs during the door-to-door visit to the local 'Kishori Samuha' (Girls Group). We need to get vaccinated, for ourselves, our children, and for their future. ”

Mala Sada



KEY INSIGHTS:

WHAT WORKS?

Given the fluid and ever-changing nature of COVID-19, it is important to demonstrate an adaptive and flexible RCCE implementation model based on the changing socio-political context. Therefore, retrofitting of actions was prioritized to better suit the changing context to achieve the desired behavior level change. Regular insights from the field, robust community targeted feedback mechanism, stronger collaboration with local government, and partnership on both national and local level supported with course-correction, and implementation of an agile model of implementation.

1

Partnership with communities and stakeholders while designing RCCE activities supports in increasing ownership and trust towards proposed behavior level change actions.

2

Community feedback designed as an integral part of the RCCE actions supports in course corrections, identifying need and gaps, and recognizing community led solutions from a social norming perspective.

3

Engaging with 'trusted' voices in the community supports with non-adversarial conversations and helps navigate complexities from a 'do-no-harm' lens and increases trust towards existing services and information.

4

Celebrating community members as 'champions' or 'role models' provides 'social proof' and encourages people to accept a new behavior, or desired action, and establishes it as a norm.

5

Localized voices and field-tested messages highlighting local concerns and issues, twinned with relatable solutions helps contextualize the issue, and increases reach, resonance, and impact of the RCCE messaging.



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