





RCCE action plan guidance COVID-19 preparedness and response

Objective:

Risk Communication and Community Engagement is an essential component of your health emergency preparedness and response action plan.

This tool is designed to support risk communication, community engagement staff and responders working with national health authorities, and other partners to develop, implement and monitor an effective action plan for communicating effectively with the public, engaging with communities, local partners and other stakeholders to help prepare and protect individuals, families and the public's health during early response to COVID-19.

How to use this tool:

This guidance can be used to develop risk communication and community engagement action plan, that once completed, will constitute a basic evidence-based source for engaging and communicating effectively with identified audiences.

The resulting plan will facilitate effective RCCE, two-way communication between health authorities and atrisk populations in response to COVID-19. It includes planning for engagement with and within local atrisk communities, broader segments of the public at the country-level, and other relevant stakeholders (such as health care providers).

There are 3 sections to the "RCCE action plan guidance:

- 1. "The Key Steps" to developing a COVID-19 RCCE plan.
- 2. A related planning template for countries to fill in related to each step.
- 3. Seven annexes provide additional guidance and resources: an audience assessment questionnaire, a process for identifying objectives and audiences, a method for identifying key information needs about COVID-19, and a list of sources for existing content and messaging.

Key considerations:

- Adapt the elements according to your country needs and situation. Some elements of the action plan
 guidance may differ between countries, depending upon their risk levels, people's perceptions, needs, local capacities and current situations.
- Revise your action plan according to the situation evolution. Note that your objectives and priorities may

- change over time depending on the evolution of COVID-19 outbreak (epidemiology) and people's reactions to the response.
- Coordinate and plan together with authorities and partners. To strengthen your preparedness, ensure
 effectiveness, and avoid duplication, it is important from the start to identify, meet, plan and coordinate
 with your partners, existing community networks and government counterparts. Remember that communities should play a major role as implementers and leaders in promoting individual and collective behaviour change to prevent and respond to COVID-19.
- Proactively communicate and promote a two-way dialogue with communities, the public and other stakeholders in order to understand risk perceptions, behaviours and existing barriers, specific needs, knowledge gaps and provide the identified communities/groups with accurate information tailored to their circumstances. People have the right to be informed about and understand the health risks that they and their loved ones face. They also have the right to actively participate in the response process. Dialogue must be established with affected populations from the beginning. Make sure that this happens through diverse channels, at all levels and throughout the response.
- Reduce stigma. Regular and proactive communication with the public and at-risk populations can help to reduce stigma, build trust and increase social support and access to basic needs for affected people and their families. -).. Stigma can undermine social cohesion and prompt social isolation of groups, which might contribute to a situation where the virus is more, not less, likely to spread. Accurate information can help alleviate confusion and avoid misunderstandings. The language used in describing the outbreak, its origins, and prevention steps can reduce stigma. See WHO's Guide to preventing and addressing social stigma for more tips (https://www.epi-win.com/sites/epiwin/files/content/attachments/2020-02-24/COVID19%20Stigma%20Guide%2024022020 1.pdf).
- Conduct early and ongoing assessments to identify essential information about at-risk populations and other stakeholders (their perception, knowledge, preferred and accessible communication channels, existing barriers that prevent people to uptake the promoted behaviors...) to develop your plan. Do not assume or take for granted local understandings and perceptions. Qualitative methods such as focus groups and interviews can produce rich, contextual information from a few people. Quantitative methods such as internet or telephone surveys can help characterize larger numbers of people, but with less context. Both approaches can help you systematically ask relevant questions that will shape your intervention strategy. As the threat of COVID-19 evolves, people's knowledge and beliefs will change, so assessments will need to be ongoing to ensure that interventions remain relevant to people at-risk.
- Ensure that all people at-risk of acquiring COVID are identified, reached and involved.

Key steps

The following steps will guide you to draft your RCCE action plan

Step 1: Assess and collect - Collect existing information and conduct rapid qualitative and/or quantitative assessments to learn about the communities (knowledge, attitudes and perceptions about COVID19, most at risk population, communication patterns and channels, language, religion, influencers, health services and situation). With your team, analyse and assess the situation.

- See annex 1 for example rapid assessment tool.

Step 2: Coordinate - Use existing coordination mechanisms or create new ones to engage with RCCE counterparts in partner organizations at all levels of the response: local, regional and national. These include health authorities, ministries and agencies of other government sectors, international organisations (WHO, UNICEF,

IFRC, MSF, etc.) NGOs, academia, etc. Develop and maintain an up-to-date contact list of all partners and their focal points. Regular contact with all partners will help avoid duplication and identify potential gaps in the RCCE response.

Step 3: Define – Define and prioritize your key risk communication and community engagement objectives with your team and partners. Review them regularly to ensure they are responding to your priorities as COVID-19 evolves.

See annex 2 for example of objectives.

Step 4: Identify key audiences and influencers. Identify target audiences and key influencers. These include policy-makers, influential bloggers or other social media leaders, local leaders, women and youth groups, religious and elders' groups, local and international NGOs health experts and practitioners, volunteers, and people who have real-life experience with COVID19 (those who have had COVID-19 or their family members have contracted the virus). Match audiences and influencers with channels and partners that reach them.

- See annex 3 for questions to guide you on identifying your audiences.

Step 5: Develop RCCE strategy. Based on the qualitative analysis' results, your defined key objectives and audiences, develop an RCCE strategy that fits into the country's comprehensive COVID-19 response strategy. Adapt to the local context: focus on messages that are tailored to the relevant national and local context, reflecting key audience questions, perceptions, beliefs and practices.

Define and prioritize your strategic objectives with your team and partners in alignment with the general objectives of the country's COVID-19 response. Review them regularly with partners and community to ensure they are responding to evolving priorities. Work with the different technical groups of the response to ensure alignment, coordination and internal dialogue between RCCE leadership/field staff and other response teams.

Define and describe actions/activities that will contribute to achieve the RCCE objectives. Develop messages, and materials to transmit health protection steps and situation updates in line with WHO's message guide. Messages and materials should be tailored to reflect audience perceptions and knowledge at the level to which the RCCE products are targeted (local, regional, and local (see assessment process in Step 1).

While defining the list of activities tailored to your country, simultaneously disseminate recommendations from the World Health Organization and your Ministry of Health. These sources provide accurate information that can mitigate concerns and promote prevention actions, even though they are not tailored to local communities. Create relevant I IEC materials tailored for and pre-tested with representatives of audiences for whom they are intended. Pre-testing messages and materials with target audiences ensures that messages are context specific and increases ownership from communities and at-risk populations and other stakeholders. As much as possible IEC materials should contain actions that people can take:

- a. an instruction to follow
- b. a behaviour to adopt
- c. information you can share with friends and family
- See annex 4 for template to compile actions required and information needed
- See annex 5 for list of sources where existing COVID-19 general information can be found

Step 6: Implement - Develop and implement the endorsed RCCE plan with relevant partners to engage with identified audiences and community. This should include capacity building and integration of RCCE counter-

parts from international, national, regional, local groups, ensuring participation and accountability mechanisms are co-defined. Make sure to identify human, material, and financial resource needs. Define staff and partners will do the work (number of people required in the team/organizations) and budget according to the resources. Ensure strong and regular supervision and coordination mechanisms. Close monitoring of field work is essential and mechanisms should be defined before starting implementation.

Set up and implement a rumour tracking system to closely watch misinformation and report to relevant technical partners/sectors. Make sure to respond to rumors and misconceptions with relevant technical information so all questions and doubts are lifted at every level. Adapt materials, messages and methodologies accordingly with help of the relevant technical group.

- See annex 6 for sources of feedback and guidance

Step 7: Monitor – Develop a monitoring plan to evaluate how well the objectives of the RCCE plan are being fulfilled. Identify the activities the RCCE team will perform and the outcomes they are designed to achieve with target audiences (communities, at-risk populations, stakeholders, etc.) Establish a baseline (for example, note the level of awareness or knowledge of a community at the time before the RCCE plan is implemented). Measure the impact of the RCCE strategy by monitoring changes in the baseline during and after RCCE strategy activities are implemented.

If minimal or no positive changes are achieved, find where the problems are: check if the activities are fit for purpose, check the content of the narratives, the methodologies, the quality of work conducted by the teams (it is very important to supervise the way team members conduct the activities). Develop checklists to monitor activities and process indicators for every activity.

Planning tool

RCCE objectives What are the objectives of an RCCE (at all levels of the response, including community engagement) focusing on behaviours and actions to support public health interventions and ensure participation and accountability towards at-risk and affected populations and communities? Is there an existing evidence/rapid assessment data/KAP supporting the objectives? What are the issues that need to be addressed by the RCCE strategy? **Audiences** Who are the audiences for your activities? Who do you want to communicate with? 1. Primary audience (most at risk / vulnerable population (People in affected neighbourhoods, People in atrisk areas, Migrants, Refugees, Travelers, Schools and school children, Businesses, Caregivers, Elderly, Other.) 2. Secondary audience (people who act as spokespeople or representatives, influencers, agents of change etc.)

Actions/Activities	
How will you engage in two-way communication with the dif-	
ferent audiences identified?	
jerent dadiences identified.	
What are the key suggested interventions?	
RCCE Capacity	
What capacity do you need on your team to implement the	
action plan? Develop terms of reference as needed.	
What materials job aids and other resources will be re-	
quired to reach needed capacity?	
Monitoring	
How will you monitor whether your RCCE plan is being	
implemented according to plan?	
Are you reaching the people you intended to reach with	
the right information, at the right time? Are they able to	
reach you? How many people have you reached?	
What type of activities have you carried out?	
Are there mechanisms in place to receive feedback from	
population?	
How are the actors of the response held accountable to	
the populations they are serving? (AAP)	
Which indicators will you measure on a daily, weekly or	
monthly basis?	
In order to answer these questions: What methods will	
you use to collect the data? Do you have the tools and	
capacity to collect the required data?	
Budget	
Make sure you develop a proper budget for the strategy.	
When financial resources are tight, plan on implementing	
the communication strategy in phases, addressing first the	
highest priority objectives and audiences.	

Annex 1A - COVID-19 Rapid Qualitative Assessment Tool.

This tool could be adapted for focus group discussions (FGD) or key informant interviews (KII). Participant observation (PO) will as well contribute to the collection of data, and then triangulated with other sources.

ATTENTION: review with partners, adapt and pre-test the questionnaire to your local context

QUESTIONS	here. Or using recording of the focus group records answers in detailed notes here
mation about the interviewee/group	
 Location: Sex of the interviewee: Interviewee age: Interviewee occupation: Level of education: 	To be filled in from intake forms at the site of the focus group.
stions asked to the group by the facilitator about COVID-	19—Answers to be created in detailed notes
recording or during the focus group session or interview	rs.
Have you ever heard about the new coronavírus disease?	
clarification question: It is also called COVID-19 Have you heard of that?)	
What do you know about the new coronavirus disease?	
(Facilitator prompts participant responses related to what they know about relationship to disease, government involvement, what they have seen on TV, etc., ensuring that all participants share their understanding)	
the disease?	
ing them out on whether they have heard about protection steps, symptoms, transmission, self-care, risks/complications, etc.)	
Where are you getting your information from? (Facilitator prompts participants' responses, drawing out comments about radio, TV, social media, health care workers, family, friends, NGOs, etc. Facilitator can prompt them about any/all of the below depending on time and specifics of participants' responses. Radio TV WhatsApp	
	mation about the interviewee/group 1. Location: 2. Sex of the interviewee: 3. Interviewee age: 4. Interviewee occupation: 5. Level of education: stions asked to the group by the facilitator about COVID-irecording or during the focus group session or interview. Have you ever heard about the new coronavirus disease? (If the attendees are unresponsive, facilitator asks clarification question: It is also called COVID-19 Have you heard of that?) What do you know about the new coronavirus disease? (Facilitator prompts participant responses related to what they know about relationship to disease, government involvement, what they have seen on TV, etc., ensuring that all participants share their understanding) What kind of information have you received about the disease? (Facilitator prompts participant responses drawing them out on whether they have heard about protection steps, symptoms, transmission, self-care, risks/complications, etc.) Where are you getting your information from? (Facilitator prompts participants' responses, drawing out comments about radio, TV, social media, health care workers, family, friends, NGOs, etc. Facilitator can prompt them about any/all of the below depending on time and specifics of participants' responses. □ Radio

	□ Social Media (no WhatsApp)	
	☐ Health unit/Health care worker	
	☐ Family members	
	☐ Friends	
	☐ Community health workers	
	☐ Red Cross Red Crescent volunteers	
	 Other community mobilisers 	
	☐ Community leaders	
	☐ Religious leaders	
	☐ Traditional healers	
	☐ Traditional midwives	
	☐ Any person from the community	
	Other)	
6	Are there some people or channels that you trust	
	more than others to give you good information	
	about the coronavirus?	
	(Facilitator prompts participants' responses,	
	probing on whole range of channels/sources as	
	relevant and why they trust one source more than	
	another, etc.).	
6	What channel is the easiest for you to get infor-	
	mation from?	
	(Facilitator can probe the participants on specific	
	channels, programs, when they are able to get to a	
	source etc.)	
7	How dangerous do you think the new corona virus	
'	is?	
	101	
	(Depending on responses, facilitator probes the	
	participants' responses for why they rate the dis-	
	ease as they do.)	
8	Who do you think is at highest risk of catching the	
	new corona virus?	
	(Depending on responses, facilitator probes who	
	else? Or who might have the most serious dis-	
	eases, asking about the below, depending on re-	
	sponses:	
	Young children	
	Teenagers	
	Adults	
Older people		
	Pregnant women	
	Health care workers)	
9	Do you think you are at risk of getting sick with the	
	new corona virus?	
	(Parthur and the	
	(Facilitator solicits responses and asks: Why or	
	why not?)	
1		

10	Do you know how the coronavirus is spread?	
	(Depending upon responses, the facilitator	
	prompts for other responses, probing for any of	
	the below):	
	☐ Blood transfusion	
	☐ Droplets from infected people	
	□ Airborne	
	☐ Direct contact with infected people.	
	☐ Touching contaminated objects/surfaces	
	☐ Sexual intercourse contact	
	☐ Contact with contaminated animals	
	☐ Mosquito bites	
	☐ Eating contamined food	
	☐ Drinking unclean water	
	Don't know	
11	What are the main symptoms?	
	(Depending upon answers, the facilitator probes	
	for other symptoms including:	
	□ fever,	
	□ cough,	
	□ shortness of breath and breathing difficul-	
	ties.	
	☐ Muscle pain,	
	□ headache and	
	☐ diarrhea.	
	□ Don't know	
	□ No symptoms□ Other)	
12	Do you know how to prevent becoming sick from	
	the new coronavirus?	
	(Depending on answers, facilitator probes to see	
	if other measures are circulating as prevention	
	steps)	
	☐ Sleep under the mosquito net	
	☐ Wash your hands regularly using alcohol or soap and water	
	□ Drink only treated water	
	Cover your mouth and nose when coughing	
	or sneezing	
	Avoid close contact with anyone who has a fe-	
	ver and cough	
	☐ Eliminate standing water	
	☐ Cook meat and eggs well	
	□ Avoid unprotected direct contact with	
	live animals and surfaces in contact with ani-	
	mals.	
	□ Don't know	
13	□ Other:) What kind of measures have you or your family	
13	taken to prevent coronavirus in the recent days?	

	 (Depending on answers, facilitator might probe one or more the below: Washing hands regularly using alcohol-based cleaner or soap and water Covering mouth and nose when coughing or sneezing Avoid close contact with anyone who has a fever and cough Eliminate standing water Cook meat and eggs well Avoid unprotected direct contact with live animals and surfaces in contact with animals. Don't know Others) 	
14	Do you consider important to take actions to prevent the spread of coronavirus in your community? (Depending on answers the facilitator asks why	
	and what actions they are thinking of)	
15	What would you do if you or someone from your family gets sick with the new coronavirus? (Depending on answers, facilitator might probe on some of the below: I will look for a more experienced relative to advise me on what to do I would go to the hospital / health unit I would go to the neighborhood nurse I would go to buy medicines at the market I'm going to look for the traditional healer I would stay in quarantine Other)	
16	What more would you like to know about the disease? (Depending on the answer, facilitator probes to see what kind of material would be helpful (radio talk shows? Posters? Also can probe if they would like more information on any of the below: How to protect yourself from the disease? Symptoms of the new coronavirus disease How it is transmitted What to do if you have the symptoms Most at risk groups How to treat it Other:	
17	Do you think the coronavirus disease is generating	
17	stigma against specific people? To whom?	

	(If yes, facilitator asks: Which group is being dis-	
	criminated in your community because of corona-	
	virus? The facilitator might probe for specifics:	
	□ Chinese	
	□ Asian	
	□ Italians	
	Other, specify)	
	Facilitator now announces a shift in topic and why they	
	you about a disease that is similar to corona virus that y	ou might be more familiar with, seasonal flu. "
18	Have you ever been sick with seasonal or regular	
	flu?	
	(Depending on the answer, facilitator might ask if a	
	member of the participants' families have been sick	
10	with flu.)	
19	What do you usually do if you have a regular flu?	
	(Depending on response, facilitator probes any of	
	the below:	
	the below.	
	Have they ever	
	□ done nothingcontinue with normal life	
	stay at home, to avoid infecting others	
	wear a mask	
	drink tea until recovery	
	seek advice from my neighbors	
	seek advice from local healers	
	go to the health unit	
	Other)	
20	Where do you usually get information abou the	П
	regular flu?	
	O .	
	(Depending on responses, facilitator can probe on	
	other sources or combination of sources:	
	□ Radio	
	\Box TV	
	☐ Health unit	
	☐ Family members	
	□ Friends	
	☐ Community leaders	
	☐ Religious leaders	
	☐ Community heath workers	
	□ Other community mobilisers	
	☐ Traditional healers	
	☐ Traditional midwives	
	☐ Any person from the community	
	Othor	

Annex 1 – COVID-19 Rapid Quantitative Assessment Tool.

This tool, which is similar to the questions asked in qualitative form in Annex 1A could be used in an online survey in different social media platforms and hotlines. The combination of qualitative and quantitative versions would allow for breadth and depth and triangulation of results.

ATTENTION: review with partners, adapt and pre-test the questionnaire to your local context

No	QUESTIONS	ANSWERS
Infor	mation about the interviewee/group	
1	Location: Sex of the interviewee: Interviewee age: Interviewee occupation: Level of education:	To be filled in from forms at participant registration.
Infor	mations about the disease	
2	Have you ever heard about the new coronavírus disease (COVID-19)?)	Choose one answer : Yes No
3	What do you know about the new coronavirus disease? (Only one option)	Choose one best answer: I don't know anything It's a virus that can cause a disease It's a government's programme It's a TV/radio campaign Other:
4	What kind of information have you received about the disease? (Legends to be added to the questionnaire	Mark all answers that are true: How to protect yourself from the disease? Symptoms of the new coronavirus disease How it is transmitted What to do if you have the symptoms Risks and complications Other:
5	Where did you hear about the new coronavirus from? What channels or sources?	Mark all channels that you heard about the disease from: Radio TV WhatsApp Social Media (not WhatsApp) Health unit/Health care worker Family members Friends Community health workers Red Cross Red Crescent volunteers Other community mobilisers Community leaders Religious leaders Traditional healers Any person from the community Other
6	Which channel/who do you trust the most to receive information	Mark all channels that you trust: Radio TV

		related to coronavirus? (one or		WhatsApp
		more options)		Social Media (not WhatsApp)
				Health staff
				Family members
				Friends
				Community health workers
				Red Cross Red Crescent volunteers
				Other community mobilisers
				Community leaders
				Religious leaders
				Traditional healers
				Traditional midwives
				Any person from the community
	-	TATIL At a back and a since along		Other
	6	What's the best and easiest chan-		Check the best channel for you to receive coronavirus information from:
		nel for you to get information from?		
		ii oiii:		Radio TV
				WhatsApp
				Social Media (no whatsapp)
				Health unit/Health care worker
				Family members
				Friends
				Community health workers
				Red Cross Red Crescent volunteers
				Other community mobilisers
				Community leaders
				Religious leaders
				Traditional healers
				Traditional midwives
				Any person from the community
				Other
	7	How dangerous do you think the		Choose the best answer that matches your belief about
		new coronavirus risk is?		the disease:
				Very dangerous
				More or less dangerous
				Is not dangerous
				Other:
		747		76 1 Del 10 10 10 10 10 10 10 10 10 10 10 10 10
	8	Who do you think is at highest		Mark all those you think are likely to become sick:
		risk to get the coronavirus?		Children under 5 years old
				Adolescents up to 15 years old
				Youth
				Adults
				Elderly persons
				Pregnant women
				Health workers
		D 11.1		••
	9	Do you think you are likely to be-		Yes
		come sick with the new corona-		No S. A. I.
ļ		virus?		Don't know
Į			1	

10	How does the coronavirus		Mark all the ways you think the disease spreads:			
	spread?		Blood transfusion			
	- P Common		Droplets from infected people			
			Airborne			
			Direct contact with infected people.			
			Touching contaminated objects/surfaces			
			Sexual intercourse contact			
			Contact with contaminated animals			
			Mosquito bites			
			Eating contamined food			
			Drinking unclean water			
			Don't know			
11	What are the main symptoms?		Mark all the symptoms you think are caused by the new			
11	what are the main symptoms:		coronavirus:			
			fever,			
			cough,			
			shortness of breath and breathing difficulties			
			Muscle pain,			
			headache			
			diarrhea.			
			Don't know			
			No symptoms			
			Other:			
10	B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
12	Do you know how to prevent it?		Choose all the prevention steps you know about:			
	(One or more options)		Sleep under the mosquito net			
			Wash your hands regularly using alcohol or soap and			
			water			
			Drink only treated water			
			Cover your mouth and nose when coughing or sneezing			
			Avoid close contact with anyone who has a fever and			
			cough			
			Eliminate standing water			
			Cook meat and eggs well			
			Avoid unprotected direct contact with live animals and			
			surfaces in contact with animals.			
			Don't know			
	747		Other:			
13	What have you and your family		Mark all steps that you have taken:			
	done to to prevent becoming sick		Washing hands regularly using alcohol-based cleaner or			
	with coronavirus in the recent		soap and water			
	days?		Covering mouth and nose when coughing or sneezing			
			Avoid close contact with anyone who has a fever and			
			cough			
			Eliminate standing water			
			Cook meat and eggs well			
			Avoid unprotected direct contact with live animals and			
			surfaces in contact with animals.			
			Don't know			
			Others			

14	Do you consider important to take actions to prevent the spread of coronavirus in your community?	 ☐ Yes ☐ No ☐ Don't know ☐ Other 			
			Other		
15	What to do if you or someone from your family has symptoms		Mark all the actions you would take: I will look for a more experienced relative to advise me		
	of this disease?		on what to do		
			I will go to the hospital / health unit		
			I will go to the neighborhood nurse		
			I will buy medicines at the market		
			I will look for the traditional healer		
			I would stay in quarantine		
			Other		
16	What more would you like to		Choose all topics that you would like to know about;		
	know about the disease?		How to protect yourself from the disease?		
			Symptoms of the new coronavirus disease How it is transmitted		
			What to do if you have the symptoms		
			Most at risk groups		
			How to treat it		
			Other:		
17	Do you think the coronavirus dis-		Yes		
	ease is generating stigma against		No		
	specific people? To whom?				
18			Chinese		
	criminated in your community because of coronavirus?		Asian		
	cause of corollavirus?		Italians Other energy		
	Now we would like to ask you som	le dii	Other, specify estions about a similar disease: seasonal or regular flu,		
	influenza.	ic qu			
19	What do you usually do if you have		Mark the 1-2 most typical actions you take:		
	a regular flu?		I have never had the flu		
			Nothing, I continue with my normal life, after some time the flu goes away		
			I stay at home, so I don't infect others		
			I wear a mask		
			I drink tea until I recover		
			I seek advice from my neighbors		
			I seek advice from local healers		
			I go to the health unit Others		
20	From where/who do you usually		Choose as many channels as you have heard about reg-		
20	receive information on flu and		ular flu from:		
	other diseases?		Radio		
			TV		
			Health unit		
			Family members		
			Friends		
			Community leaders		
			Religious leaders		
			Community heath workers		
			Other community mobilisers		

	Traditional healers Traditional midwives
	Any person from the community
	Other

Annex 2 - Defining and prioritising your RCCE objectives

What are your RCCE objectives?

Identify your objectives: Consider reviewing all the objectives below. Circle those that apply to your country's current epidemiological situation, the response priorities and public reactions. Note that many of the objectives are interdependent, so broad objectives may require fulfilling some that are more focused.

Please add other objectives if needed for your country situation.

Just circle all that apply to your situation:

- To ensure that people have the life-saving information they need to protect themselves and others (from the virus and to reduce its impact on health, social life, and the economy)
- To ensure effective feedback mechanisms are in place and used to ensure two-way
- communication between health/response authorities and communities, the public and stakeholders.
- To ensure that healthcare workers know how to engage with patients and care givers, detect possible cases, communicate with patients about COVID 2019, and report to the relevant health authorities and also to protect themselves in context of their exposure to the disease.
- To position country health officials as the main/first trusted source of information about COVID 2019.
- To ensure consistency in information and language from all partners and avoid misinformation/rumours.
- To inform the general public how the public health response is being conducted and health authorities are being pro-active in monitoring, detecting, and preventing the spread of COVID 2019.
 To ensure participation of and engagement with relevant communities to work out barriers to the implementation and uptake of public health measures.

Prioritise your objectives: Look at the objectives you have circled and prioritise them in order of their importance in your country. Remember your objectives need to be SMART (specific, measurable, actionable, realistic and time bound).

Review objectives regularly, asking if the communication products and activities you are developing are serving these most important priorities. If they are not, consider expending more energy on high priority objectives or changing your objectives (if circumstances have changed). A phased-in approach to your plan should also be considered.

Annex 3 – Defining and prioritising your RCCE audiences and other stakeholders

Who are your audiences, partners and other stakeholders?

Consider the categories of people who must be engaged in order to achieve outbreak control.

- What are the at-risk groups?
- Who are the influencers, gatekeepers, decision makers and practitioners in the different communities that must be engaged to mobilize interventions?
- What other government sectors need to coordinate engagement and communication activities with your health authorities?
- What local partners will need to respond to requests for support?

Under each category, identify specific groups, government units, types of individuals in your country who you will need to engage to achieve your objectives.

Add categories for key audiences, partners, and stakeholders who are important to your country that may not be included in the list below.

- All people at-risk of acquiring COVID-19, for example: elderly, people with underlying health conditions, health care workers, travellers, etc.
- Stakeholders and partners:
 - key policy-makers (who provide funding or create legislation related to public health)
 - other relevant government sectors (such as education and transportation)
 - NGO partners (who may have strong relationships with at-risk groups)
 - Community leaders and organizations
 - International organizations
- Health-care providers (e.g. physicians' organizations, hospitals, community health centers)
- Others

Annex 4: Choosing Channels:

What channels or engagement strategies can you use to share important information and guidance?

Identify channels and fora that audiences use to seek health information and partners who regularly communicate with these groups.

For example:

Some channels that might reach broad national audiences: mass media: radio listeners club, daily emissions addressing different topics with open mike for public calls, social media platforms such as Twitter and Facebook

Policy-makers and influencers might be reached through weekly engagement meetings with religious, administrative, youth, and women's groups

Individual communities might be reached through theatre performances engagement meetings with women groups, edutainment, H2H activities, youth groups, training of peer educators etc.).

Ensure your health agency has relationships and agreements with relevant partners and access to identified and trusted media channels including:

- Broadcast media: (television and radio)
- Trusted organizations' websites
- Social media (Face Book, Twitter, etc.)
- Text messages for mobile phones
- Hand-outs and brochures in community and health centers
- Town forums
- Community health boards
- Billboards

Plan to tailor key information and guidance to stakeholders and disseminate it through their preferred channels and trusted partners

Audience	Preferred channels of communication	Partners who have trusted relationship with this audience	Desired Behav- iors	Barri- ers	Enablers
At-risk groups (ex- amples below)					
• Senior citizens					
Individuals with Chronic immune system diseases					
Travellers					
•					
Health care providers					
Policy-makers					

Add more rows and stakeholders below			
10 vv			

Annex 5 - Required actions and information needed

What information or guidance will each stakeholder need to know and accept in order take required steps or actions?

Identify the information or guidance each group will need to know and accept in order to take actions for public health goals to be fulfilled. Fill in the far box on the right. For example if health care providers need to understand the importance for their life and patients' lives to wear protective gear when treating patients with COVID 2019-type symptoms, they will need to be aware of the COVID 2019 situation in your country (level of risk), COVID 2019 symptoms, and understand the severity of the disease. They also need to be trained in how to use protective gear. At the same time supply must ensure protective materials are available.

Add the objectives for each group identified as high priorities and identify the type of information and guidance required. See the first box as an example.

Audiences, stake- holders, partners	Action/Steps Required	Information or guidance needed
Health care providers	Wear protective clothing, masks and gloves to protect themselves from COVID 2019 infection. Report cases with COVID 2019 symptoms for testing Other	Needed: awareness of COVID 2019 threat and situation in your country, information on COVID 2019 prevention equipment, guidance on how to report cases for testing. Information related to perceptions of risk and possible barriers to the uptake of these actions is required to be able to engage with the audiences and negotiate change of practices.
Insert next audi- ence, stakeholder or partner below	Add related actions/steps below	

General content needed by all stakeholders: you are likely to see that many types of content are needed by all groups to:

- raise awareness of COVID-19 signs, symptoms, and severity.
- communicate status of COVID-19 in your country and globally.
- promote understanding of what health officials and partners are doing to prevent spread and reduce disease harms.
- identify sources of credible, updated information.
- Identify behaviours, perceptions and information needs.
- increase knowledge of steps to prevent COVID-19 infections.

Annex 6 – List of general information

Obtaining content for communication messages, products, and activities

Much of the general content needed by all stakeholders and specific guidance needed by different groups can be found on WHO's website:

https://www.who.int/emergencies/diseases/novel-coronavirus-2019

Make sure to visit the WHO COVID-19 web content often, since it will be regularly updated so you can edit your materials to stay up-to-date.

Below is a list of content needed to fulfil most of your needs for creating messages communication products and activities. As you consider each topic, note whether content is available and where it can be found. Some relevant WHO resources are filled in as examples. This content was developed for global audience and needs adaptation for country and community contexts where relevant and possible.

General information needed by most audiences about COVID-19		
Topics for multiple audiences	Location of content	
What is COVID-19?	https://www.who.int/news-room/q-a-detail/q-a-corona- viruses	
How is it transmitted?	https://www.who.int/news-room/q-a-detail/q-a- coronaviruses	
What are its symptoms?	https://www.who.int/news-room/q-a-detail/q-a- coronaviruses	
How severe is it?		
How contagious is it?	https://www.who.int/news-room/q-a-detail/q-a- coronaviruses	
How can I prevent becoming infected?	https://www.who.int/news-room/q-a-detail/q-a- coronaviruses	
What is happening now in the	e COVID-19 outbreak?	
How many cases are there?	Regularly updated information can be found at https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/	
Where are the cases occurring?	Regularly updated information can be found at https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/	

How many deaths have occurred because of COVID-19?	Regularly updated information can be found at https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/
What are health authorities a	nd other partners doing to respond to the outbreak?
(these topics will need to be	continuously updated)
What international agencies are doing	Regularly updated information can be found at
	https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/
	https://www.unicef.org/stories/novel-coronavirus-outbreak-what-parents-should-know
	https://media.ifrc.org/ifrc/press-release/red-cross-scales- preparedness-global-response-novel-coronavirus-declared-in- ternational-health-emergency/
What are your country's national and local health authorities and partners doing?	Seek this information during COVID-19 management meetings or from national situation reports
_	nerging about the outbreak and what needs to be done? versial because they often have policy implications or fo-
Vaccine development and challenges	https://www.who.int/news-room/q-a-detail/q-a- coronaviruses
Risks and advice to travellers	https://www.who.int/ith/2019-nCoV advice for international traffic/en/
Availability of medical supplies and personnel	Seek this information during COVID-19 management meetings or from national situation reports
Capacities of health facilities to meet COVID-19 demand	Seek this information during COVID-19 management meetings or from national situation reports
Specific Content Needed for	r Varied Stakeholders
Health care providers	
Laboratory testing for COVID-19	https://www.who.int/emergencies/diseases/novel- coronavirus-2019/technical-guidance/laboratory- guidance
	WHO has international protocols, but local guidelines and locations need to be communicated as well
Travelers	
Screening protocols at airports and borders	

Recommended precautions for travelers	

Annex 7 – Sources of feedback and guidance

How can you learn what your audiences and stakeholders are wondering about, worried about, and misunderstand?

Knowing what your audiences don't understand is necessary so your team can respond to those questions. Two other issues require similar activities in which you need to actively "listen" to audiences: what are they worried about and what information do they believe but misunderstand (misinformation, questions, concerns and rumors).

In the same way that those health authorities must identify and address new questions, they must also know about and address worries, questions and rumors. The mechanisms for gathering information about concerns, questions, believes and rumors can be the same as those for identifying new stakeholder questions. Some common sources include:

- Media monitoring (traditional news and social media)
- Key informant interviews and focused groups
- Rapid assessments and surveys
- Community leaders and mobilizers
- Partners who are trusted by communities and at-risk groups
- Monitoring radio talk shows
- Tracking calls and content of health "hotlines"
- Feedback mechanisms

Health authorities will want to make use of as many sources as possible to understand their audiences' and stakeholders' understanding of COVIDS-19.

Identify sources above that the health authority and/or your partners have ready access to. Choose a source or a combination of sources that will yield information about concerns from all your stakeholders. If partners have intelligence on communities or at-risk groups that your health authority lacks, create an agreement to share what you are each learning about questions, believes, rumors and concerns.

Reviewing and responding to public/community concerns, misinformation and rumors.

Regularly review the information that you gather about public/community rumors and concerns (daily at the height of an outbreak) to determine:

- □ What rumors or misinformation is circulating? For each rumor, ask:
 - Is the misinformation harmful? Will it lead to harmful action? If so, your health authority must address it and correct it.
- □ Are people worried about issues that aren't considered big threats nor realistic risks? Are they not worried about COVID-19 risks that health authorities consider the biggest threats? If so:

- Address public/community worries with respect,
 - Communicate the factual information that points to more accurate risk perception.

- □ Does the monitoring reveal questions that your health agency hasn't answered? If so:
 - Find or develop answers, even if questions are unresolved
 - Add answers to talking points, post them on the health authority's web site, and disseminate them through social media and other channels.
 - Monitoring can help you create a relevant O&A list that, overtime can address a broad range of audience and stakeholder concerns.

Identify a staff member or team whose job it is to gather information on stakeholders' questions, **concerns, and circulating rumors.** Create a checklist from the review questions above and use these to analyse information that is circulating on the sources you are reviewing. Report out high level findings of these analyses in briefings with your emergency leadership, communication coordination meetings, and in communication operation meetings