AMP The Alliance for Malaria Prevention

Expanding the ownership and use of mosquito nets

Advocacy in ITN campaigns in the context of COVID-19 transmission

V. 1 (September 2020)

Remember the COVID-19 infection prevention measures¹

- Maintain physical distance of at least one metre from all others, except immediate members of the family or people with whom you share accommodation
- Regularly and thoroughly clean your hands with an alcohol-based sanitizer or wash them with soap and water. WHO recommends washing hands often with soap and water for at least 20 seconds. If soap or hand sanitizer are not available, rub hands vigorously with wood ashes
- Avoid going to crowded places
- Avoid touching your eyes, nose and mouth
- Practise respiratory hygiene by coughing or sneezing into a bent elbow or tissue and then immediately dispose of the tissue² and wash your hands
- If you have fever or respiratory symptoms, you should stay home and not go to work
- Wear a fabric mask if there is widespread community transmission, and especially where physical distancing cannot be maintained
- Correctly use and dispose of any COVID-19 infection prevention materials provided. Follow national government guidance for disposal
- Maintain all other measures described even when wearing protective equipment
- Keep up to date with the latest guidance and regulations put in place by WHO and the national government

NOTE: As the pandemic evolves, WHO updates the infection prevention measures based on new scientific findings. Check for any updates on

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

Core AMP documents: Key guidance for distribution of insecticide-treated nets (ITNs) during COVID-19 transmission

Planning for safe ITN distribution in the context of COVID-19 transmission https://allianceformalariaprevention.com/about/amp-guidelines-and-statements/

Identify the role of advocacy for the ITN campaign in the COVID-19 context

Advocacy meetings are not simple information sessions, but rather an activity designed to influence, inspire, motivate and engage a particular person, group of people, organization or structure. They are, in addition, orientation sessions to raise awareness of the forthcoming ITN campaign, where, when and how the campaign is planned to occur and who the target audiences are.

Advocacy for ITN campaigns includes activities to foster political goodwill and support for the campaign, to increase financial and other resources on a sustainable basis, and to hold authorities accountable to make sure pledges are fulfilled and results are achieved. Advocacy is carried out at both the country level, to engage political leaders, national or sub-national media and funding agencies in the campaign, and at an international level to promote in-country activities and raise further support (often financial) for the planned activities³. In the COVID-19 context, political goodwill and support are even more important. At a time when malaria may not be considered a priority by

² Follow WHO and national guidance on waste disposal. Waste should be disposed of appropriately where it will not be in the environment risking contaminating others. See also: <u>https://www.who.int/publications/i/item/water-sanitation-hygiene-and-waste-management-for-the-covid-19-virus-interim-guidance</u>

³ See AMP toolkit, Chapter 6. <u>https://allianceformalariaprevention.com/wp-</u>

content/uploads/2019/01/AMP_ToolkitReport2019_Chapt6_20190124_Proof2.pdf

¹ <u>https://www.WHO.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public</u>

many people, advocacy is needed to emphasize the importance of continuing to protect the population from malaria by distributing ITNs and the dangers of co-infection with COVID-19 if they are not protected.

Advocacy is FOR something and national malaria programmes need to ensure that the ITN campaign advocacy strategy is based on a clear vision with defined objectives and achievable goals, including accessing communities and local resources and demonstrating the accountability of the programme.

Plan early for advocacy sessions

Advocacy sessions need to be properly planned so that they align with the audiences at the level at which they are held. Planning for advocacy activities should begin early as it often requires the mobilization of people who may have competing priorities, and the mobilization of resources that may be limited because they have been steered towards the COVID-19 agenda. It is critical to ensure that audience-specific agendas, tools and materials that will help the implementation of the sessions and maximize the outcomes of efforts are prepared and available in a timely manner.

Engage the right people, at the right time, to help achieve the objectives of the campaign

National malaria programmes need to influence and engage the RIGHT people in order to help achieve the objectives of the campaign to increase access to and use of ITNs.

In addition to standard guidance and considerations for ITN campaign advocacy, in the context of COVID-19 transmission, designers of the advocacy sessions should consider:

- Social, political and geographical access to communities, especially where communities are politically divided, or where there is fear and stigmatization because of COVID-19 and mistrust of external parties.
- The safety of campaign personnel, e.g. if there is insurgency or vigilante groups in areas who need to be made aware of the ITN campaign.

Participants of advocacy sessions should be representative of their society, community, group or organization and should be able to positively influence the outcome of the ITN campaign. No specific group or person/s should be deprioritized because of political or social bias. This requires careful consideration for gender equality and the inclusion of representation from all societal groups, including the disabled, elderly, youth and minority groups and in some cases (where appropriate) representatives from groups such as internally displaced persons and refugees or organized or informal opposition groups.

It is also important to engage these stakeholders at the right time. This means ensuring that advocacy sessions are implemented early, at the outset of campaign activities, to allow newly identified partners and advocates the opportunity to plan and prepare how they will support the campaign.

While early advocacy is critical for ensuring that all stakeholders and partners are informed of the campaign and understand their roles in its success, advocacy meetings may also need to be organized later in the campaign process if there are major incidents that lead to campaign activities being suspended or major shifts in strategies. In these cases, it may be important to re-engage stakeholders and partners in advance of restarting activities to ensure that the problems that led to the suspension of activities are understood and the mitigation measures put in place to complete activities are clear.

At the national level

Some examples of the right people to engage during the COVID-19 context at the national level include:

- Members of the national COVID-19 task force
- Government officials who have a stake in the outcomes of the campaign (e.g. from the ministries of health, environment, labour, security)
- Members of different political parties, particularly those that are not in power at this time
- Representatives from local, national and international non-governmental organizations (NGOs), as well as UN agencies such as WHO and UNICEF, National Red Cross Red Crescent Societies, and other organizations that are implementing public health campaigns in communities, e.g. Rotary
- Members of any partner organizations/stakeholders that are based or working in the areas targeted for ITNs
- Representatives from telecommunication companies that may be able to support advocacy and social and behaviour change activities before, during, and after the ITN campaign, e.g. by providing free SMS alerts during the campaign
- Journalists, reporters, and producers from national press and other media
- Religious leaders and representatives from religious groups (including multi-faith consortia)
- Representatives of the national police, military or army, particularly where insecurity may be a challenge during the implementation of activities
- Representatives of private sector companies
- Well-known or popular national figures (musicians, artistes, television and radio personalities, sports figures, social media influencers)

This list is not exhaustive and participants in national level advocacy sessions should be identified based on the country context. It is important that people to be engaged in the campaign are not chosen simply for a political or financial reason, but because they can bring something to the table and help ensure the successful implementation of the campaign at all levels. The challenge comes in how and when to identify the correct people, ensuring that people are not left out due to bias, but their identification should be early enough in the campaign planning process to achieve buy-in to the objectives of the campaign.

At the regional and district level

District level microplanning can be a good time to identify influential people or groups that should participate in district level advocacy sessions. Where district level advocacy sessions are being planned at the same time as microplanning workshops, national malaria programme SBC staff should engage in stakeholder mapping well before the workshops are held. This stakeholder mapping should be done in full consultation with District Health Management Teams (DHMTs), as well as partners that are operational at district and community levels and who may know key stakeholders that can support ITN campaign implementation. Consultation with the DHMT and other partners can be done by phone, virtually or (as a last resort) through physical visits to the districts while respecting COVID-19 prevention measures. These consultations will have budget implications which must be planned for during macroplanning.

There is a risk that certain groups are deprioritized or even openly shunned due to political, cultural or social conflicts and tensions at regional or district level. To avoid this, the national malaria programme should ensure that:

- Regional health management teams, DHMTs and implementing partners work with as many different partners and stakeholders at district level as possible, to maximize representation. This includes but is not limited to:
 - The persons representing the national COVID-19 task force at the regional and district level
 - Regional and district level administrative and political officials (including government opposition)

- Different factions that are active within the region and districts, where applicable. It may be necessary to hold separate advocacy meetings with groups representing different factions where these are important for accessing targeted groups and where their representatives will not participate in meetings with leaders of other parties
- Religious leaders and representatives of religious groups that are active in the region and district
- Popular or influential people at regional and district level, such as musicians, sports figures, television and radio personalities, artistes
- Politically neutral organizations such as National Red Cross Red Crescent Societies, UN agencies or international and national NGOs working in the district are part of the district level advocacy sessions to bring operational experience to the discussions and make recommendations on the approaches that will be used

At the community level

At the community level, participants in advocacy sessions need to be community members who are trusted and have influence over the attitudes and practices of others and who represent different aspects of the community. Their role will be to mobilize the community, keep members informed about what is happening, reassure them that the ITN distribution is being carried out in as safe a way as possible to protect both community members and campaign personnel and motivate all community members to cooperate with the campaign activities. They should also be able to alert campaign staff about community members who are disabled, marginalized, excluded or hard-to-reach, as well as about households that are in quarantine due to suspected or confirmed COVID-19 infection. A gender balance for participants is important at community level to ensure that all parts of the community are represented.

Examples of participants to include in community-level advocacy sessions are:

- Village chiefs, leaders of women's groups, traditional leaders, youth leaders, religious representatives, shopkeepers, business and trades representatives
- NGOs working in the community, whether on health programmes or other types of community support
- Persons popular with different groups in the community, such as musicians, sports figures, artistes, etc.
- As far as possible, representatives of minority groups, such as disabled and ethnic minorities

In the COVID-19 context, community leaders will have greater roles and responsibilities in ensuring the success of the ITN campaign. It is therefore recommended that advocacy meetings targeting community leaders should be turned into orientation sessions. Orientation sessions have the objective of not only advocating for the support of community leaders, but also providing them with the tools, materials, skills and knowledge to carry out their roles and responsibilities⁴.

Urban vs. rural settings

It is important to note that the right people to target for advocacy sessions will be different in urban and rural settings. Influential persons in rural settings tend to be traditional community leaders, such as village chiefs, traditional healers and religious leaders. In urban areas, especially large cities where use of mass media channels (especially social media) is prominent, influential people might take the form of celebrities such as sports, movie, television and music stars who have large social media followings.

⁴ See AMP guidance: *Engagement of community leaders in ITN distribution in the context of COVID-19 transmission*. https://allianceformalariaprevention.com/about/amp-guidelines-and-statements/

Implement advocacy activities safely in the COVID-19 context

Advocacy sessions should be adapted to prevent exposure to COVID-19. There are different options for different countries, and even for different parts of each country, depending on the COVID-19 transmission situation, the degree and reliability of connectivity, the availability of appropriate venues where physical distancing can be maintained, availability and suitability of outdoor venues, etc.

Adaptations to ensure safe advocacy activities may require:

- Holding sessions virtually. This may be necessary where there are COVID-19 hotspots or where COVID-19 transmission is high and areas are under local restrictions. Virtual sessions are often possible at the national level where internet access is good, where people are familiar with information and communication technology (ICT) and the use of virtual meeting platforms.
- Combining a face-to-face session with a virtual session, with participants who have access to good connectivity and who are comfortable with ICT joining the advocacy session virtually to meet colleagues who are present in a venue for the session.
- Adapting the levels at which advocacy sessions are held so that people from lower levels are not travelling out of their communities and districts where they may be exposed to COVID-19. It may thus be necessary to hold a series of advocacy meetings at different levels (national, regional, district, community, etc.) which will have budget implications.
- It may also be necessary to separate into multiple advocacy meetings where these are being implemented face-to-face and the number of participants targeted cannot be reduced to align with national restrictions on the numbers for gatherings without significantly affecting the campaign structure and implementation quality.
- Multiple advocacy meetings may also be necessary where political tensions or multi-party power sharing make it difficult to have all the "right" persons in the same room, but where it will be critical to ensure cooperation and full participation from all.

If separate advocacy meetings are required, make sure that:

- Everyone receives the same information. This means ensuring a robust agenda with facilitators who know the ITN campaign exceptionally well.
- Everyone receives the same materials in the advocacy kit (although they may be in different languages) and that they are culturally appropriate for all intended parties.
- Sufficient financial resources have been budgeted for multiple advocacy sessions and that these have been clearly justified in the SBC plan of action and risk assessment and mitigation plan.
- All different political parties are aware that everyone is getting the same information and that no one party is being given any advantage over the other(s).

If advocacy sessions need to be held face-to-face (most likely at lower levels where internet connectivity is less reliable, if it exists at all), ensure that the following COVID-19 prevention measures are planned, budgeted and implemented:

- Venues should allow for physical distancing to be maintained (e.g. selecting a venue for twice as many participants as are being invited) or meetings should be held outdoors, which may require a budget for renting of a tent covering, chairs, etc.
- Handwashing stations are made available and participants instructed to wash their hands before entering the meeting. Alternatively, hand sanitizer should be made available for all participants to disinfect their hands before entering the venue.
- Make sure the venue has been disinfected before the meeting and is disinfected after the meeting (include this aspect in the budget for rental of venue, as well as in the request for quotations from vendors).
- Covered bins are available for proper waste management.

- Depending on national policy, participants may be required to wear a face covering. If this is the case, ensure that they are informed in advance as part of the invitation to the advocacy session.
- If planned during macroplanning in conjunction with the national COVID-19 task force, health checks may be conducted (such as checking for fever) and participants that are showing any COVID-19-like symptoms should not participate in the session.
- If catering is planned, ensure that all personnel working for the vendor observe COVID-19 infection prevention and, where possible, have meals packaged in advance to avoid many contacts during the tea/lunch break periods.

All participants should be made aware in advance what the COVID-19 prevention measures of the session will be, and that they will be strictly maintained. All agendas should include a session on COVID-19 infection prevention, including proper use, management and disposal of personal protection equipment.

Many countries have net ambassadors who become the "face of the campaign" either at the national or district level, and who disseminate information and mobilize communities so that they participate in the campaign and encourage them to adopt positive ITN behaviour. During the COVID-19 pandemic, this should be done solely on mass or mid media through prerecorded messages, as it is important that the net ambassador is not only heard and seen to implement malaria prevention measures, but also demonstrates respect for COVID-19 prevention measures.

Advocate at the national, regional and district level

At the national, regional and district levels (depending on the administrative structure of the country), there are several objectives of advocacy, including:

- Awareness: It is important to note that some of the participants will know the malaria and COVID-19 context well in the area where they live and work, perhaps better than staff at the central level of the national malaria programme. It is therefore important that advocacy sessions are interactive, and that participants are able to share their knowledge and experience of what is happening in their area. Topics covered should include:
 - $\circ~$ The malaria and COVID-19 situation in the country and the impact on the local population
 - The specific challenges faced by the country, region or district which may affect implementation of the ITN mass campaign, or which may prevent household access to and/or use of ITNs. For example, participants could help with identifying areas facing food insecurity where neither malaria nor COVID-19 is a priority, or very hardto-reach areas where special attention will need to be paid for distribution teams to gain access
 - Why it is important to undertake the ITN mass campaign during COVID-19 transmission and how the campaign differs from previous campaigns to ensure that infection prevention and control measures put in place by the government are respected
 - \circ Coordination of the campaign and the key actors (including the national COVID-19 task force)
 - An explanation of what is being asked of participants so that everyone understands their role and responsibilities to achieve the campaign outcomes
- Political engagement and cooperation to ensure that people put aside political differences and align with the objective of providing ITNs to all households in a safe and secure manner. This is often one of the main objectives of advocacy sessions, in particular in areas with conflict and multi-party factions.

- **Resource mobilization** to either improve the efficiency and effectiveness of the campaign, or to fill gaps already identified. These can include:
 - Identification and communication of specific areas where participants are requested to provide support to ensure successful outcomes. Different audiences will be engaged for different types of support, e.g. resource mobilization for government and the private sector, social mobilization for community representatives.
 - Financial or in-kind contributions such as mobile phone airtime or storage space free of charge or at reduced cost
 - Technical expertise that may be required and which the MoH cannot fulfil because it is outside staff's scope of work, or the existing technical resources are overwhelmed with other priorities (for example, marketing and social media campaigns)
 - Tools and materials (such as audiovisual equipment, lighting or studios to make or edit short videos for use on social media)
 - Community level personnel (CHWs, volunteers) for post-distribution SBC, particularly those involved in other health programmes being delivered on a continuous basis and where key messages and activities could be integrated with existing work

Advocate at the community level

In the COVID-19 context it is more important than ever to engage people at community level to support operations and ensure campaign success. At the community level, local leaders and influencers are engaged to support:

- Planning for safe and secure community access for campaign personnel
- Identification of community members that may require an adapted approach for the distribution to ensure they receive ITNs (e.g. households with people in quarantine or people who are disabled, etc.)
- Mobilization of communities to ensure that community members follow COVID-19 infection prevention measures
- Finding rapid and efficient local solutions to local crises and emergencies, including mitigating negative or dangerous rumours or information
- Continuing the promotion of positive ITN behaviour, monitoring and reporting on ITN misuse, rumours etc. once the distribution is complete

Many of the participants at community level will know about the malaria and COVID-19 context in their community and neighbouring communities. Campaign staff need to understand local priorities and concerns. It is therefore important that the session is interactive, and that participants are able to share their knowledge and experience of what is happening in their area, as well as their concerns and the risks they see inherent in the ITN campaign strategy and approach.

Topics covered should include the same information on the ITN campaign and the COVID-19 situation as for the national level advocacy sessions. In addition, advocacy at this level reinforces:

- **Buy-in and local ownership** of campaign processes. This will require cooperation and coordination, which are more likely to be provided where clear information is available that addresses community concerns.
- Identification of hard-to-reach or problem areas and populations, and local solutions on how to access these populations so that they are provided with ITNs.
- Identification of and access to key areas and populations.
- **Resource mobilization**, such as the identification of local transport that can be adapted for last mile transport and for reaching isolated and hard-to-reach community members, and also for resupply of ITNs to door-to-door distribution teams.

• Identification of local human resources with previous campaign or public health experience who will meet the selection criteria and be able to implement household registration and distribution with limited training.

At the community level, advocacy should aim at ensuring support from local leaders and influencers. These can be local political figures, traditional leaders, village chiefs, religious leaders, representatives from women's and youth groups, etc. As at the national level, consider the gender balance and the inclusion of representatives from minority groups, elderly, disabled, refugees, etc. All of these stakeholders can influence the successful implementation of the campaign by providing access to resources, mobilizing communities and influencing positive behaviour. Communities are not uniform and it is important to conduct a segmentation of stakeholders to ensure tailored engagement.

Given the additional roles and responsibilities that community leaders will have for the ITN campaign during the COVID-19 pandemic (e.g. storing ITNs in their homes, responding to rumours, monitoring household and campaign personnel respecting COVID-19 prevention measures, etc.), consider modifying advocacy sessions at community level to become detailed orientation sessions. The objective of these orientation sessions is not only to advocate for the support of community leaders, but also to give them the tools, knowledge, skills and materials needed to implement practical activities in support of the campaign⁵.

Advocate at the international level

It is important to document and showcase the successes, challenges and lessons learned in implementing the ITN campaign during the COVID-19 pandemic as a base to advocate for resources (whether financial or technical) with international partners for future campaigns. In this respect, it is highly recommended that national malaria programmes develop case studies and use international platforms (such as AMP and the RBM Partnership to End Malaria) to share their case studies with other countries undertaking campaign planning in similar circumstances, as well as with the global public.

Advocate in the private sector

It is important that the private sector is also engaged in the campaign and this should be encouraged very early in the planning process. Currently, in the COVID-19 context, many private sector institutions are facing additional challenges and may not be working normally or at full capacity. Companies may take longer to make decisions, and some will have issues of their own with COVID-19 infection prevention measures reducing their business functions. Other companies are booming at this time, such as those working in ICT, mobile phone makers and service providers, and those companies that have a largely online presence.

When engaging the private sector, concentrate on those companies that are functioning and have the financial resources to respond in spite of COVID-19, e.g. advocate for free airtime for bulk SMS with telecommunication service providers. At the same time, remember that other companies may also be able to meet the needs of the campaign, e.g. transport companies or those that are in advertising. Ensure that the campaign team works with these companies and their representatives, to determine how they can best support the campaign given the challenges of COVID-19. Ensure that no undue pressure is placed on the company and its potentially limited resources. This will mean having an interactive advocacy meeting, which will need to be followed up with individual meetings as activities are planned, developed and perfected.

⁵ For more detail, see AMP guidance: *Engagement of community leaders in ITN distribution in the context of COVID-19 transmission*. <u>https://allianceformalariaprevention.com/about/amp-guidelines-and-statements/</u>

Develop advocacy kits that are audience specific

The most important thing about developing an effective advocacy toolkit is to ensure that materials developed as part of the kit are tailor-made to the specific audiences. Generic Frequently Asked Questions (FAQs) and other information sheets are a weakness of many ITN campaigns as they leave audiences confused about their specific roles and responsibilities. When developing advocacy materials (such as information sheets or FAQs) take into account:

- Academic levels of the audience. As an example, for advocacy sessions with local leaders who may not be comfortable with detailed written information, ensure that the information sheet is more visual and practical
- The support that you are asking from the audience. The information sheet states clearly the support that is needed from the particular audience, e.g. mobilizing the community or helping community health workers gain access. Asking local leaders to donate funds or in-kind contributions when they are already facing food shortages may be regarded as a negative aspect of the campaign
- Audience insights and influence. Time permitting, consider including influencers in the development of advocacy materials.

During the COVID-19 pandemic, advocacy kits should have:

- An information sheet (tailored to the audience) which also describes the COVID-19 infection prevention measures planned
- One or several campaign posters that visually demonstrate proper ITN use and care. Participants should be given clear instructions to have them displayed in areas that are still accessible to the public (such as pharmacies or shops)
- Visibility materials such as t-shirts, caps or bracelets that can be worn by participants (especially local leaders) to promote the campaign, such as a t-shirt with a slogan "I support the ITN campaign" or "Zero Malaria Starts With Me". This visibility material also represents compensation for local leaders and influencers, who may be giving their time for free.

It is very important that all materials are pre-tested to ensure that they are understood and appreciated by the intended audience⁶.

National malaria programmes should not assume that participants of advocacy sessions and meetings already have the knowledge and skills to be effective advocates for an ITN campaign. So while advocacy seeks to gain the support of others to implement a successful campaign, national malaria programmes and their partners should make sure that they are developing the appropriate activities, tools and materials that ensure the right support is provided at the right time. This will require careful planning, an advocacy session that is backed up with strong SBC materials and a thorough monitoring of activities being implemented by advocates. This should be done by maintaining two-way communication channels with advocates whereby they can report on issues and challenges as well as successes, while receiving feedback from campaign personnel on their activities.

⁶ For further guidance on pre-testing, see AMP guidance: *Messaging for ITN distribution in the context of COVID-19 transmission* for further guidance on pre-testing. <u>https://allianceformalariaprevention.com/about/amp-guidelines-and-</u> <u>statements/</u>