

MODULE 6

RCCE CROSS-BORDER TRAINING, EAST AFRICA



COORDINATION



LEARNING OBJECTIVES

At the end of this session, participants will be able to

1. Discuss the purpose and functions of a Government-led RCCE pillar during outbreaks
2. Outline the benefits of ensuring integration of RCCE efforts across the response architecture
3. Understand how communities and community actors can take the lead in coordination efforts related to RCCE
4. Reflect on the benefits of cross-border coordination for outbreak preparedness and response, emphasising the importance and implications

INTRODUCTION TO RCCE COORDINATION: ROLEPLAY

INTRODUCTION

TABLE DISCUSSION

Why is it important to coordinate on RCCE?

RCCE COORDINATION PLATFORMS

Overall aim of a RCCE coordination platform

To **drive scale, quality efficiency and effectiveness** in RCCE efforts and ensure that:

- Communities are fully engaged with and leading the response efforts
- People have timely, accurate, trusted and localised information

Key services provided by a RCCE coordination platform

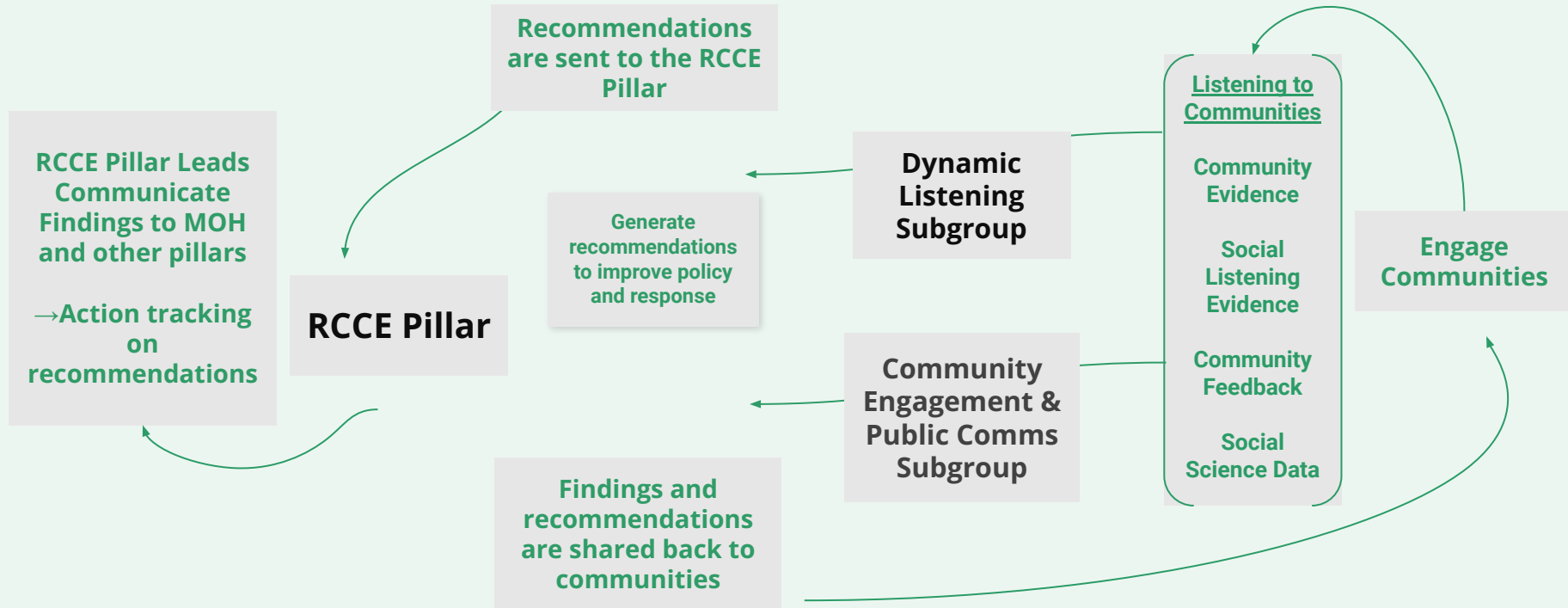
A national RCCE coordination platform should:

- a) Champion community voices and ownership of response and recovery by communities themselves.
- b) Provide services for public health pillar partners, clusters and organisational partners
- c) Mobilise resources, build capacity of partners and stakeholders.

RCCE COORDINATION OBJECTIVES

- 1. Catalyse Collaboration, Strengthen Coordination and Advocate for RCCE**, to increase quality, harmonisation, optimisation and integration.
A good RCCE coordination platform convenes, enables, promotes and catalyses.
- 2. Be Evidence Driven, Use and Manage Information and Knowledge:** promote, analyse and use data, information about community contexts, capacities, perceptions and behaviours. Support real-time monitoring and evaluations. All data and information should be used for decision-making.
- 3. Be Community-Led and Drive Quality and Consistency:** push for adoption of minimum standards for communications and community engagement. Counter infodemics, and amplify timely, accurate, trustworthy and actionable information. Coordinated investment into community participation through design and processes to communities and local stakeholders own the response.
- 4. Reinforce capacity and locally-driven solutions** to empower frontline organisations, networks and communities to lead disease control. Assess local and partner capacity needs coordinate capacity-building, development and adaptation of technical guidance and tools for implementing minimum standards.

How does information move through an RCCE Pillar?



Adapt for local context and outbreak response needs.

PILLAR GROUP WORK: HOW CAN RCCE SUPPORT OVERALL COORDINATION AND THE OTHER PILLARS?

Non-RCCE Pillars

1. What can the RCCE pillar and partners do to support your pillar? Which of your pillar activities would benefit from RCCE approaches?
2. What are the current gaps or challenges do you see in this support in your countries? ie capacities, resources
3. What do you recommend as next steps for supporting RCCE integration in your pillar's response?

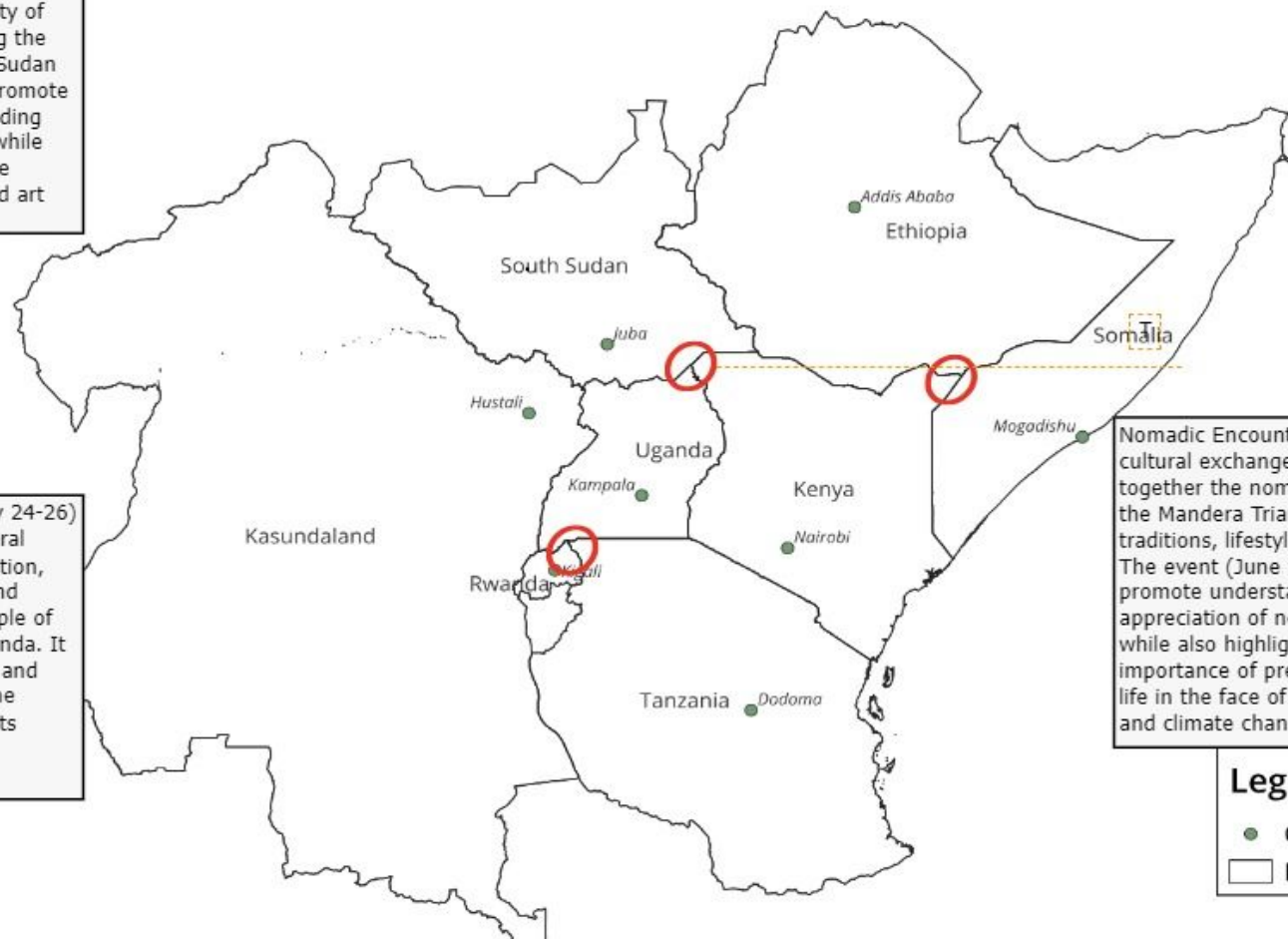
RCCE Pillar Focal Points

1. What does your country's RCCE Pillar look like. Draw the structure on a flipchart.
 2. Add information flows in GREEN.
 3. Add gaps and bottlenecks in RED.
- Share with the other RCCE pillar focal points and discuss.

Unknown Viral Haemorrhagic Fever Outbreak

Border Harmony is a cultural festival that celebrates the shared heritage and cultural diversity of the communities living along the Uganda, Kenya, and South Sudan border. The event aims to promote peace, unity, and understanding among these communities while also showcasing their unique traditions, music, dance, and art

Trifecta Fusion Festival (May 24-26) aims to promote cross-cultural understanding and appreciation, fostering a sense of unity and cooperation among the people of Tanzania, Uganda, and Rwanda. It also seeks to boost tourism and economic development in the border region, highlighting its cultural significance and natural beauty.



Nomadic Encounters is a unique cultural exchange event that brings together the nomadic communities of the Manderia Triangle to share their traditions, lifestyles, and challenges. The event (June 1-7) aims to promote understanding and appreciation of nomadic cultures while also highlighting the importance of preserving their way of life in the face of modernization and climate change.

Legend

- Capital Cities
- Regional Map

UPCOMING CULTURAL EVENTS IN THE REGION

The regional IMS lead emails to say there are 3 big cultural events happening in the region in about one month's time and that he is very concerned that these could be superspreader events for the VHF regionally and beyond.

The cultural event in each location will involve thousands of people coming together to celebrate and be as one for four days before they return to their homes.

Ministries of Health have collaborated across borders to make sure the people are able to practice safe behaviours by providing handwashing stations and toilets at the festivals and POE, agreeing that health services can be provided for free to all during the event who people with symptoms and agreeing that borders will remain open so people going to the events from different countries can access. Trainings for health workers, food handlers and the cultural festivals will be taking place in the coming days.

1) Trifecta Fusion Festival (May 24-26) Tanzania, Uganda, Rwanda.

2) Nomadic Encounters (June 1-7): Kenya, Somalia, Ethiopia

3) Border Harmony (June 1-4). Kenya, Uganda, South Sudan.

UPCOMING CULTURAL EVENTS IN THE REGION



The Regional IMS lead wants all pillars to work together to agree on development of a cross-border RCCE plan for the cultures event in your country. The plan should include the RCCE activities for each of the pillars.

Teams have to work with neighbouring countries to agree on key strategies including how they will work with communities and community leaders and other critical stakeholders, including those involved in organising the cultural event, to reduce transmission during and after and increase uptake of health services for those with symptoms.

UPCOMING CULTURAL EVENTS IN THE REGION

Pillar	Audience/Stakeholder	Desired Behaviour	Determinants	Activities/Interventions
RCCE				
Case Management				
Infection Prevention Control				
Surveillance				
Points of Entry				
Coordination				
Other				

UPCOMING CULTURAL EVENTS IN THE REGION

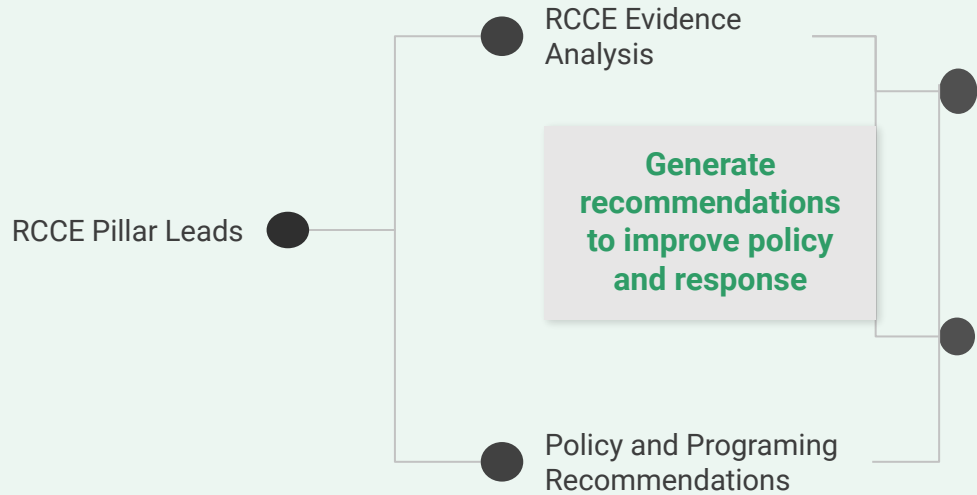
A donor has announced that they will provide funding for one of the cultural events' strategy but only if it tracks evidence of the impact of RCCE activities on the cross-border response to the cultural event.

All countries are asked to consider how this can be included. Present this back in 3 min pitch to the donor.

PLENARY

Group activity with reflection on on different approaches to preparedness and response across countries

What is the structure of an RCCE Pillar?



Dynamic Listening Subcommittee

- Social media and digital communication sub-group
- Call Centres

Community Engagement and Public Communication Subcommittee

- Social Behavior change sub-group
- Radio and TV sub-group
- Civil society organization sub-group
- Social Media and Digital Communication Subgroup

RCCE Membership and Partners

Adapt for local context and outbreak response needs.

CATALYSE COLLABORATION, STRENGTHEN COORDINATION AND ADVOCATE FOR RCCE

1. Align, Coordinate and Advocate Strategically with partners, donors, experts, national and local stakeholders, and catalyse collaboration and funding.
2. Identify and nurture the right membership and structure for an inclusive and locally diverse platform or multi-stakeholder network and use their networks and engagement channels.
3. Facilitate joint assessments, planning, monitoring, advocacy
4. Develop national plans, objectives and indicators collaboratively.
5. Champion and enact the inclusion of women, youth, disabled, minority and marginalised populations.
6. Map those involved in the response (4Ws), including from the humanitarian, development, media, academic, and private sectors.
7. Manage gaps and duplication with a focus on reaching disease hotspots through innovative channels.
8. Integrate RCCE into all public health response efforts, humanitarian operations, private sector operations and media operations.
9. Provide strong technical leadership, ensuring RCCE country strategy is relevant, practical and effectively implemented.
10. Prepare for future outbreaks with planning, tools, and skills.

BE EVIDENCE DRIVE, USE AND MANAGE INFORMATION AND KNOWLEDGE

1. Advocate for, and use, data for decision-making based on community priorities.
2. Encourage data collection, analysis, and use of national trend analysis in perceptions, while conscious of subnational and hyper-local realities.
3. Identify gaps in: existing disaggregated evidence; information; data about community context; perceptions; and needs.
4. Develop plans to fill gaps in information, evidence, data about community context, perceptions and needs.
5. Enhance media monitoring, social listening and community feedback systems.
6. Identify recommendations for gaps and obstacles, e.g. face mask-wearing, disease stigma, or targeted advice for vulnerable groups. Advocate for communities to develop solutions.
7. Collaborate with academia, local researchers, Monitoring and Evaluation and/or third party data collection services.
8. Coordinate development of guidance and tools for implementing minimum standards, and use of RCCE indicators for measuring progress and effectiveness.
9. Share and provide a platform for insights, innovations, best practice, and knowledge.
10. Adapt and use existing social science research frameworks globally, regionally and nationally.

BE COMMUNITY-LED AND DRIVE QUALITY AND CONSISTENCY

1. Coordinate support for community participation to encourage community-centred approaches and ownership by local groups.
2. Drive adoption of minimum standards in people-centred communications and community engagement.
3. Develop strategies on priority issues e.g., stigma, service equity
4. Advocate for inclusion of women, youth, disabled, minority and vulnerable groups.
5. Support people-centred information campaigns that resonate with key target audiences and are exchanged through diverse trusted channels - discourage top-down delivery of one-way messages.
6. Advocate and support two-way engagement that answers people's questions and concerns.
7. Use social research and behaviour change strategies to guide RCCE approaches.
8. Coordinate management of infodemic in real-time (support rumour tracking, social listening efforts and innovation in response).
9. Unify and boost timely practical information, update FAQs for communities and SOPs for frontline staff.
10. Collaborate with other public health and humanitarian responses to ensure a holistic response. Encourage vaccine uptake planners to include RCCE approaches through programme design, budgeting funds and offering technical support.

REINFORCE CAPACITY AND LOCALLY-DRIVEN SOLUTIONS

1. Champion, support and seek resources for a vision for localisation and community leadership in disease response.
2. Assess skills and support existing local community structures to take ownership of the response.
3. Support relevant local parties to use their unique channels, resources and networks.
4. Identify core RCCE skills and competencies needed by all partners.
5. Map partner and stakeholder capacity needs for RCCE and CEA/AAP.
6. Facilitate participatory capacity assessments, (frontline workers interpersonal or deep-listening skills, and disease knowledge).
7. Develop, implement, monitor capacity building strategies.
8. Design training and capacity opportunities for RCCE members, frontline staff, local media and community networks.
9. Facilitate peer-to-peer learning exchanges at different levels to identify the local solutions and share best practices.
10. Develop, adapt and test RCCE training resources, linking to vaccine uptake and CEA/AAP training.