Collective | Risk Communication and Service | Community Engagement



MONITORING & EVALUATION & LEARNING



LEARNING OBJECTIVES

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

- 1. Discuss how to define and monitor indicators for measuring progress and impact of our work across response pillars
- 2. Ensure community data is prioritised for inclusion in M&EL processes
- 3. Evaluate existing country capacity for community-centred responses and prioritise next steps for strengthening.



Monitoring



MONITORING DATA: WHY?

Why should rapid social data (incl. community feedback) be used for monitoring the effectiveness and impact of an outbreak response?

- Inform social and behavioural change that supports outbreak prevention and control across all pillars
- Ensure people-centred response are we accountable to community needs and expectations? Are we building their confidence in the response?
- Comprehensive understanding of progress and impact





MEANINGFULLY MONITORING COMMUNITY DATA

IMPACT INDICATORS FOR THE RESPONSE

- What are communities' views? Do they feel heard and included in decision-making?
- Has an enabling environment been created for positive behaviour change?
- Has the data led to action across all pillars? If not, why?



WHAT ARE WE MONITORING AT PILLAR LEVEL?

Case Management

- Is community feedback data being leverage for the design of active case management protocols?
- Do communities feel they can adopt public health recommendations to stop transmission?
- Are community members actively participating in public health decision making processes?

RCCE

- · Are we helping the right people?
- Do people feel listened to? Are there opportunities for participation? Do they feel meaningfully engaged and respected?
- Do people feel informed about the response? Can they access trusted and accessible information?
- Do people know how to share feedback? Do they get a response? Are we making changes?



WHAT ARE WE MONITORING CONTINUED...

Surveillance

- Do communities know how to report suspected cases to local health authorities? Are they engaging with these processes?
- Are trained community based surveillance volunteers active in hotspot communities? Are the systems adequate for the community needs?

Immunisation

- · Are community members in target areas actively participating in vaccination plans?
- Do communities feel satisfied with their level of participation in planning and roll out of vaccination campaigns?
- Are we measuring the behavioural and social drivers of vaccination (BeSD) indicators?

Infection, Prevention and Control

- Are communities being supported to establish and implement community-led action plans for identifying transmission risks and implementing mitigating actions?
- Do people know how to protect themselves from the disease?



PLENARY

What recommendations could you make to address these findings from community insights?

1: Communities are frustrated they have not been consulted on the location of ORPs

2: A minority ethnic group believes that they are being discriminated against when decisions are being made about who is eligible for the vaccine

3: Parents are struggling to identify the symptoms of the disease in their children and are using home remedies instead of bringing them to the clinic

4: Communities don't know how to report suspected cases.



Evaluation & Learning



EVALUATING RESPONSES TO COMMUNITY DATA INTRA AND AFTER ACTION REVIEW (IAR/AAR)

How can we ensure that community data and actions taken to respond to feedback are prioritise in Evaluation and Learning processes?

1. What works/ed well? Why?

- Did the community receive the support they needed?
- Was the support provided in an effective, timely and appropriate way?
- · Did people feel treated with dignity, respect and dignity?
- Were people satisfied with the quality, participation and influence they had?
- Were the community engagement approaches chosen effective and appropriate?
- · Did response activities contribute to community-led behaviour change?

2. What works/ed less well? Why?

• What would community members change or improve for future outbreaks?

3. What is the way forward?

- · How can communities be involved in implementation of agreed actions?
- How can response activities be transitioned to recovery?



JOINT EXTERNAL EVALUATION (JEE)

- How do we carry forward the lessons we learned from each outbreak?
- A JEE is a voluntary, collaborative, multisectoral process to assess country capacities to prevent, detect and rapidly respond to public health risks whether occurring naturally or due to deliberate or accidental events.
- The JEE includes a framework for assessing national RCCE capabilities.
- We can use the JEE framework to assess national capacity to use RCCE in epidemic responses, and focus our efforts on strengthening.

THE RCCE JEE includes:

- RCCE System for Emergencies
- Risk Communication
- Community
 Engagement



GROUP EXERCISE: USING THE JEE AS A TOOL FOR REFLECTION

- 1. In country groups, review each of the JEE RCCE targets:
 - a. RCCE System for Emergencies
 - b. Risk Communication
 - c. Community Engagement
- 2. Discuss the levels. Choose [1] the national capacity level that you believe applies to your country for each target.
- 3. Consider these questions for discussion:
 - a. What "next level up" capacities are in reach for your country?
 - b. What capacities does your country have that are not reflected here?





- 1. Risk Communication and Community Engagement is the ongoing process of listening, acting, communicating, and adapting
- 2. If we do not regularly monitor and adapt response activities based on community insights we risk losing the trust of the community and responding effectively
- 3. All pillars of the response should be monitoring the extent to which they are meaningfully engaging with, listening to and acting on community perspectives
- 4. Community data must be systematically integrated across pillars into outbreak response review and evaluation processes ie IAR, AAR, JEE for system strengthening

