



Community mobilisers to help increase access in Kosi region of Bihar

PATNA/BEGUSARAI

Programme efforts – including communication – are being tightened in one of the most sensitive areas of Bihar for the polio programme. With less than 100 days to go before the onset of rains, a multi-partner state-level polio eradication task force for the Kosi River area began meeting recently to lay out detailed plans for accessing families not regularly reached because of geographic isolation, flooding and shifting settlements along Bihar's many riverbanks.

One of the fundamentals of the strategy is getting microplans updated, especially where districts intersect – such as riverine areas. It is not uncommon for certain areas to get cut off from the rest of the district during monsoon months and have to be approached from a neighbouring district. When



The operations group of the Kosi Task Force studies details of the region on a map in Begusarai district of Bihar.

flood water recedes, leaving a rich topsoil, communities also spring up overnight. Therefore, a grid approach is now being used to plan, implement and monitor the programme in this sensitive area. This premise will also guide the communication and social mobilization component of the programme within this area.

A typical grid will be a cluster of

villages within an “access compromised area”. The area within one grid may possibly belong to more than one administrative block and therefore be administered by more than one medical officer-in-charge. This means a certain amount of co-ordination will need to be done to conduct activities smoothly. The plan is also to create “nodal centers” in the areas that are not accessible from their block headquarters. Staff from the government and partner agencies will be posted to the nodal centres to ensure that immunization activities do not suffer during difficult months.

Satellite maps, such as the one featured here, are being used to identify and locate areas that get cut off.

The topography of the Kosi region, its susceptibility to inundation and a large number of rivers that flow from Nepal carrying large volumes of water – particularly in the monsoon months – disrupt life every year. At the same time, the access of vaccinators is reduced while giving an opportunity to the virus to travel and multiply. Bihar had 46 Type 1 cases last year most of which were reported in the 72 identified blocks.

UNICEF is recruiting approximately 200 community mobilisers (CMCs) to carry out a range of functions in the Kosi River area – with 98 deployed to date. These CMCs will mobilize local support for the programme and help in ensuring that households and settlements are listed in the micro-plans. The community mobilisers are being deployed in 20 Primary Health Centres/hospital areas of all the districts

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An initiative that began as part of USAID-funded polio communication activities in Lucknow two years ago goes national in April as part of the overall communication strategy for India's flagship health programme – the National Rural Health Mission.

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Quarterly work-planning to help increase focus

LUCKNOW

A strengthened work-planning strategy at the sub-regional level in Uttar Pradesh will help the SMNet better monitor progress and strengthen the overall social mobilisation initiative. As every effort is being made to remain on track to stop P1 transmission by mid-2008, the SMNet in U.P. has recently introduced quarterly work plans for all districts and blocks, allowing local teams to set specific targets against a series of agreed indicators.

The SMNet since its inception has refined approaches and has consistently laid emphasis

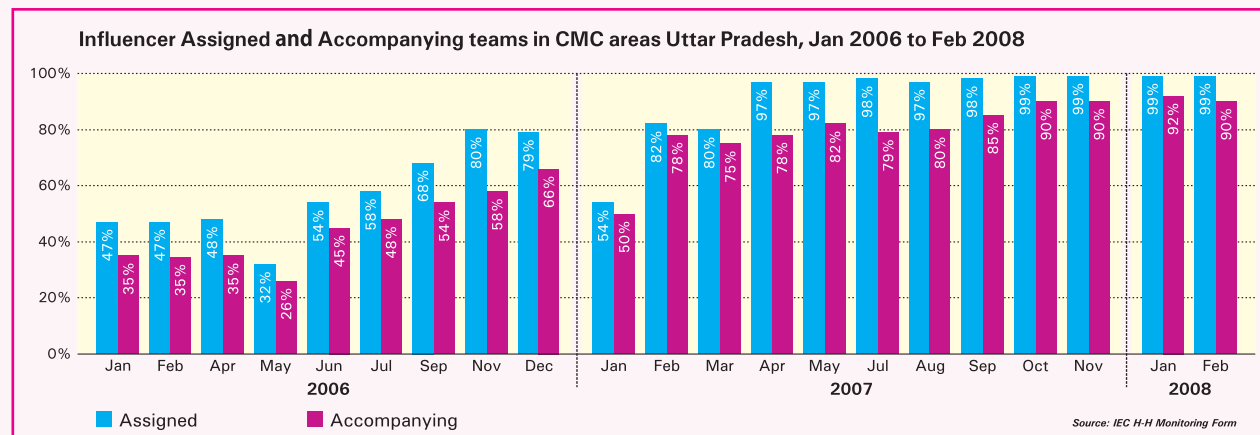
on recording and analysing information. However, the SMNet at this stage is refining further its approach to use of data for programme planning. The sub-regional emphasis with a focus on the quarter is expected to help monitor progress on key indicators related to the SMNet’s work, such as working with ‘influencers’ and reaching children below one month of age with the oral polio vaccine.

For instance, the data on “influencer assigned” the responsibility of accompanying vaccinators during polio rounds, and the number of influencers that accompany them is gathered

for every round. While the data feeds into a state average, it had so far not been used prominently for setting targets by sub-region, district and block on a monthly and quarterly basis. This is now needed as the programme strives to fill all remaining gaps.

The state-wide data on influencers’ contribution shows that there is a consistent increase in the proportion of influencers accompanying vaccinators in the state (see Figure 1). From 50 per cent in January 2007, the proportion of influencers accompanying vaccinators has increased to 90 per cent in

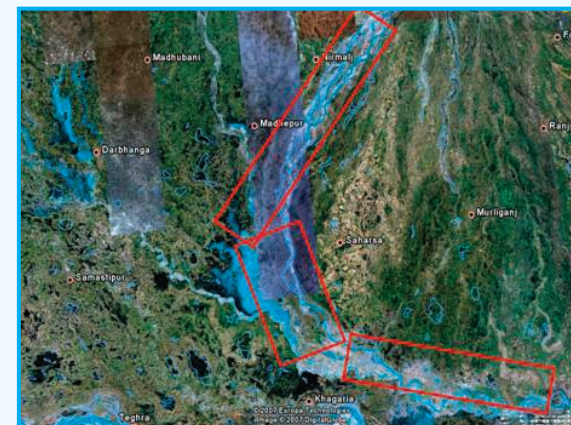
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Community mobilisers...

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of the Kosi sub-region. An additional 100 CMCs are being deployed primarily in urban areas of Patna, Dharbanga and other locations where community participation in the programme is poor.



Grids marked on part of the Kosi river area.

The operations group of the Kosi River Task Force met last week and laid out a detailed plan for increasing access to families in the area with the help of field staff – including social

mobilisers. The multi-partner Task Force includes members from UNICEF, NPSP-WHO and the U.S. Centres for Disease Control (CDC).



A community mobiliser reaches out to people in a high-risk block in Bihar to provide accurate information about polio.

Accent on localised communication reviews in 2008

NEW DELHI

The Government of India has approved a new approach to communication reviews in the polio programme this year, based on the most recent recommendations of the India Expert Advisory Group. The reviews are designed to take a longer and more detailed look at specific issues in key geographic areas where polio transmission remains a high risk. The Government and polio partners expect this approach will lead to more context-specific recommendations to guide the communication effort in achieving the goals set for this year – to stop P1 transmission by mid-2008,

and to significantly slow down the spread of P3 virus.

Small teams of national and international communication and programme experts will be assigned to review specific issues to be agreed with the government of Uttar Pradesh and Bihar, India's two remaining endemic states. Using existing monitoring and outcome data, the experts will look at remaining hurdles for communication in these areas to achieve certain outcomes, and make recommendations for how those strategies can be improved.

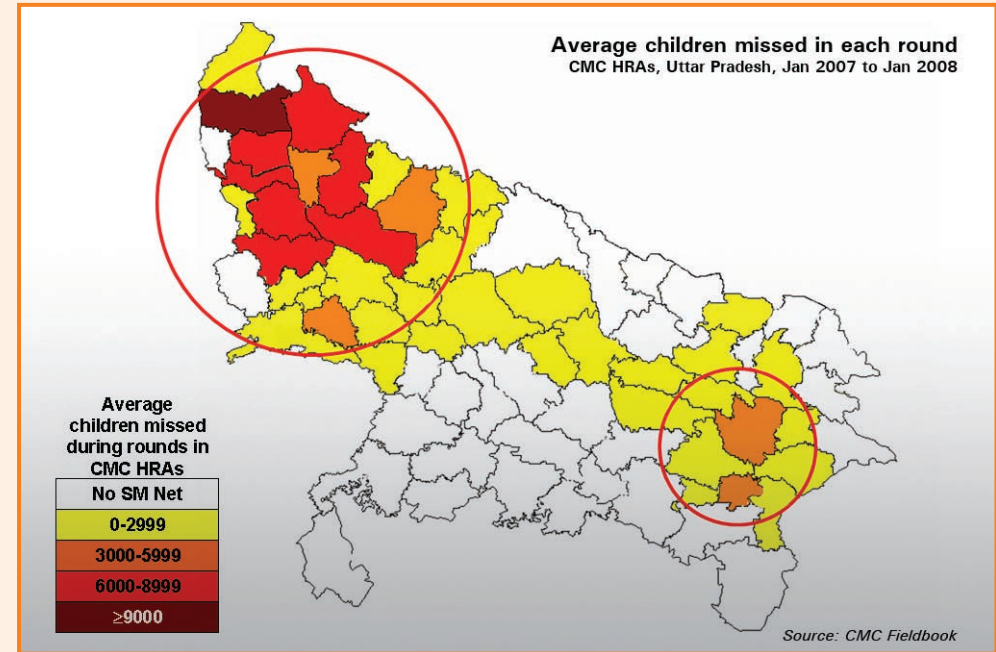
Initial missions of up to two weeks will be followed by 1-2

follow-up visits by each team of experts to assess how the recommendations are being implemented, and to suggest adjustments based on local conditions.

The suggested themes for review in 2008 for Uttar Pradesh include the following:

- Missed children: The approaches to identifying and ensuring immunization. Area: Muzzafarnagar.
- Underserved strategy: The approach to working with influencers. Area: Meerut.
- "Xr" responses: Focus on strategies to systematically address persistent resistance. Areas: Agra/Ferozabad.
- Access to newborns for birth-dose OPV: The focus will be on identifying and mobilizing families to get their newborns immunized. Area: Azamgarh.

In Bihar, the geographic focus



Monitoring data indicates that missed children remain a key challenge for the polio programme in western U.P., mostly due to migration. The communication review will look at how the SMNet can more effectively tackle this issue through its network of hundreds of community mobilizers in the Meerut sub-division.



A community mobiliser at a mothers' meeting. A context-specific approach will guide the upcoming communication review for the polio programme.

will be on the 72 high-risk blocks. The thematic focus will be on:

- Mobilization of the ICDS department and AWW as community mobilizers (for identifying newborns and immunising missed children)
- Vaccine avoidance and resistance in urban areas (Conversion of "Xr" families and influencer movement)
- Team performance (Conver-

sion of "Xh" and "Xs" houses to "P" and "Xh" and "Xs" remaining houses)

The IEAG in its report had endorsed the communication strategy in operation in the two states and, observing the value of reviews, recommended localisation. It had specifically said, "...ongoing reviews of the communication effort in endemic states in 2008

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District media plan to reach people with focused messages

LUCKNOW/PATNA

Communication for polio in the endemic areas of Bihar and Uttar Pradesh is being given a thrust with more local and contextualized media plans. With the two national immunisation days (NIDs) concluded in January and February this year, media planning will be reoriented during SNIDs to focus on local issues at the district and sub-divisional level rather than the usual reliance on a state-wide approach through television and radio.

This shift in media planning is being tested first in the Agra sub-region in western Uttar

Pradesh – with a focus on Agra and Ferozabad districts – and urban Patna in Bihar. The polio programme in the Agra sub-region in particular has been under pressure in the past few months because of widely-publicized negative statements about OPV safety made by prominent community and religious leaders – as well as negative media reports following the deaths of two children.

A series of initiatives have been undertaken. In Agra and Ferozabad, for instance, two popular, local cable operators will telecast an appeal by film personality Farooque Shaikh. In

that message, he advises parents to immunise their children to protect them from infection – building on a message he delivered during community meetings with religious leaders in Agra earlier this year. Similarly, in the Patna sub-region in Bihar, additional communication activities are underway for the March round with a mix of appeals in the Urdu media, messages on cable television and radio jingles on the local FM networks.

In addition, film slides (15 cinema halls in Agra and Ferozabad will be included), appeals in newspapers and radio jingles on local FM stations are providing focussed messages, such as the need to immunise repeatedly and addressing specific concerns raised in the public statements of individuals who have spoken out against the campaign. The shift from state-wide media to more localized media planning matches a programme focus that is increasingly district based, as efforts are made to address the complexities and local challenges that vary enormously across both endemic states.

There are also economic considerations that influence the decision to 'go local'. State-

wide media means relying on satellites channels that are seen across entire regions of the country, resulting in a considerable amount of 'bleed' of communication messages to areas and states not covered by SNIDs. India's increasing fractured media market – with a proliferation of hundreds of channels – also means that buying television time on national channels is increasing expensive, without necessarily being the most efficient means of reaching families.

An analysis of data gathered from the field supports the localised media strategy outside of the

NIDs. Monitoring data show that there is a decline in the proportion of people depending on television for information on the polio round. While in May 2007 more than 17 per cent recalled having received information on the polio round from the television, the figure dipped to just above 15 per cent in September in the same year. While programme partners feel while the public service announcements (PSAs) is effective in informing the general population, and in keeping polio eradication on the national agenda, more localized media planning during SNIDs will result in media plans that more effectively address local issues as they arise in the endemic states.



A hoarding has been recently put up in Patna under the local communication strategy.



A sticker on a newspaper in Agra informs the reader the date of the polio round. The initiative was part of the local communication strategy.

Polio communication supported by USAID leads to strategic national intervention for child health and well-being

NEW DELHI

An initiative that began as part of USAID-funded polio communication activities in Lucknow two years ago goes national in April, as part of the overall communication strategy for India's flagship health programme – the National Rural Health Mission.

UNICEF, together with the Ministry of Health and Family Welfare and the national television broadcaster Doordarshan are collaborating on a daily television 'soap' in primetime to reach out to some 40 million women in the Hindi-speaking states on issues related to child survival and development. The 'soap' will be aired daily in the 8:30 pm slot, and is based on an 'entertainment-education' format to address some of the key behavioural and social barriers to social development.

The teleserial - *Kyunki Jeena Issi Ka Naam Hai* – is the culmination of efforts to reach communities in rural India with

subtle messages on a range of health issues including polio. Work on the initiative began as part of the effort to expand the message base for the polio campaign in U.P. in 2006 beyond immunization. Community mobilizers found that during repeated visits to households, families were demanding more and different information to protect their children's health. From that demand came the development of a variety of communication tools supported with funding from USAID's Mission in India, including print materials for use at the household level, and the early thinking for a television series.

Kyunki is an aspirational and gripping social drama about the lives of six unique, vivid, and engaging heroes: Shabnam the Anganwadi Worker, Phoolwati the pradhan, Savita the ANM, Hiralal the teacher, Kamla the ASHA, and Meena the young girl inspired by the popular cartoon character of the same name. The communication messages in the programme are situated within the scope



The title frame for the television programme *Kyunki Jeena Issi Ka Naam Hai*.

of child rights, women's rights, and systems strengthening contexts that are priorities for both GOI and UNICEF.

However, these issues are subtly embedded in the programme. The first few episodes do not bring up these issues at all since these episodes will see the establishment of characters. Once the characters begin to

be recognised and the people look up to them, messages will be given out through plot twists, the storyline and dialogues. In a country with a burgeoning media and communication channels, *Kyunki* remains unique in being socially driven.

However, at no moment will it be made obvious that the programme has a social

agenda. It is being produced professionally by a company that is one of the known names in commercial television. The actors, in the tradition of Indian television, come from stage and modelling careers and are accomplished artistes. Likewise, the scripting has been done by professional scriptwriters while India's celebrated lyricist and writer Gulzar.

The FFL e-e show will focus its initial energies on the six most populous Hindi-speaking states of Uttar Pradesh, Bihar, Jharkhand, Rajasthan, Madhya Pradesh, and Chattisgarh, even as it will be broadcast to the entire nation (and will include language-specific repeats as relevant).

Global experience suggests that e-e programming is the most effective and efficient way of stimulating behaviour change. India's first and celebrated tele-serial *Hum Log* and South Africa's *Soul City* have shown the enormous potential of e-e programming. No other medium

Polio communication...

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is known to have the capacity of bringing critical change at this cost and with total quality control. Doordarshan's reach in rural India is recognised and is by far the best medium to carry messages, particularly among rural women aged 15-34 in the six most populous Hindi-speaking states alone. A calculation of the cost of production and airtime shows that less than Rs 3 need to be spent per woman for eight months of daily programming.

Its primary audience will be

rural and lower-income urban women – a total viewership of 41,116,000 women, of whom 92% have no access to competing cable or satellite channels (National Readership Survey 2006). Its secondary audience will be frontline public servants with responsibilities for mothers and children: AWWs, pradhans, teachers, ANMs, and ASHAs. Given the show's intentions of being competitive in the general entertainment programming market, it is anticipated that the show will garner a much broader, tertiary audience as well.



On the sets of the television programme *Kyunki Jeena Issi Ka Naam Hai*.



Children from a Bulawa Toli who go from house to house asking parents to immunise their children on the "booth day". Bulawa Tolis have been constituted in all villages supported by CMCs and are known to boost immunisation on the booth day.

Quarterly work-planning...

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February 2008. However, this figure does not reflect regional variations. The new system, therefore, will therefore set targets for the three months of a quarter for each district and block within a sub-region.

Likewise, key areas of the SMNet such as conversion of "missed" houses, reaching and immunising newborns, reducing the number of "x remaining" houses (the households where children remain un-immunised due to a variety of reasons at the end of the polio

round), among others, are being brought under the purview of the quarterly workplanning.

The sub-regional workplans will have a strong accent on outputs and will have two sections. Part A covers indicators at the level of "impact" while part B focuses on "process" indicators. The workplans take into account the larger programme priorities and the critical role of social mobilisation and communication in achieving these. SMNet continues to work closely with the other personnel in the field in order to achieve the common programme objectives.

Accent on localised...

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be highly localized, to focus on activities in areas identified as being at highest risk of ongoing transmission. While the IEAG acknowledges the value of the 2007 Communication TAG, it feels in 2008 that ongoing assessments need to generate more specific and context-specific recommendations." This year's communication review report and recommendations will be presented to the IEAG when it meets at the end of the year.

With the mission focussing on improvement in the communication effort, the review process itself will be adapted so that the team can make coherent recommendations that take into account the field reality and the full context of the programme. A longer field visit has therefore been planned for Review teams this year while local themes have been chosen for each state.

It is proposed that there will be a team members will undertake a minimum of three missions as part of this review process so that each members spends sufficient time in the field. The first mission will last 14 days, while the second and the third visits will average seven to 10 days.