

Brief Report

SBCC Dhaara Webinar#5

Risk Communication & Community Engagement (RCCE) in Urban Settings – Challenges & Solutions

Context

Dhaara, as the name implies, is the confluence of knowledge on social and behavior change communication, initiated in 2017 and continued in 2020 through a series of webinars. The webinars ranged across varied thematic zones to understand the impact of COVID 19 pandemic. This is the fifth webinar conducted since the outbreak of the pandemic. Each webinar has focused on particular pressing issues of the current situation.

Thematic experts have engaged in in-depth discussion during each webinar, leading to emergence of fresh perspectives and insightful takeaways by the participants.

Introduction to Webinar #5

The COVID 19 pandemic has caught India not only by surprise but also largely unprepared. It is an unprecedented situation leading to social and economic disruption coupled with loss of life. While the lockdown was a strong strategy to halt the spread of the disease, it affected access to essential and daily use goods by various disadvantaged sections in urban areas. This was primarily due to restrictions in movement and at times hoarding of items. In addition, the informal work force faced an existential threat. Further the medical and health infrastructure faced mammoth challenges due to the magnitude of the pandemic.

Over the past 9 months, experts have highlighted that the worst hit epicenters were the urban metropolitan cities. Among other, spatial and self-reliance aspects played an important role in making cities more vulnerable than their rural counterparts. *The Webinar#5 of the Dhaara series was a conscious attempt to understand the impact of COVID 19 in India's urban nerve centers within the context of risk communication and community engagement.*

Brief summary

Held on December 17th 2020, the webinar was two-hour long exchange of perspectives on challenges imposed on urban communities and sharing of lessons by experts. It was facilitated by New Concept Centre for Development Communication (NCCDC) through SBCC TARANG Hub in partnership with UNICEF.

Ms. Vimala Ramakrishnan (NCCDC) welcomed every one and set the stage by introducing the objectives of the webinar. The webinar on reimagining RCCE has specific focus on urban settings in context of the challenges faced and solutions in the wake of the pandemic. After a brief introduction of all the 6 experts- Dr. Ravikant Singh, Founder, Doctors for You, New Delhi, Md. Shafin Ali, President, Karra Society for Rural Action, Jharkhand, Br. Varghese Theckanath, Director, Montfort Social Institute, Hyderabad, Osama Manzar, Founder Member, Digital Empowerment Foundation, New Delhi, Kruti Javeri, Livelihoods Program Director, Saath Charitable Trust, Ahmedabad, and Vasudevan, Western Region Programme Manager, YRG Care, Mumbai - Vijay Kanthan, C4D Officer, UNICEF Gujarat, moderated the discussion.

Mr. Kanthan gave a brief background on the significance of the topic for discussion. The large-scale impact faced by urban communities has been accentuated by congested living conditions, poor access to safe water and sanitation facilities, and economic systems coming to a standstill. It also exposed the lack of social protection schemes and the fragility of government run administrative systems in dealing with disaster management. In light of such a situation, Mr Kanthan expressed hope that this

webinar would help understand the way forward in restructuring disaster management plans in urban settings.

The webinar looked at the impact of the pandemic in urban setting from a two-pronged perspective. In the first section, the panellists shared the myriad of challenges faced by the cross section of urban population in India. The challenges ranged from apathetic public health services to disengagement of the most vulnerable sections including children and transgenders. The second section highlighted the feasible solutions to the presented challenges. It was noteworthy that all the solutions presented had been implemented and tested as success which increased the scope of replicability and scalability manifold.

Ms. Rachana, C4D Specialist , UNICEF shared a brief summary and Mr Siddhartha Shrestha Chief, C4D, UNICEF spoke at length by stressing the urgency of the following points.

- a) engagement of community and faith-based organizations to empower communities
- b) work done in sphere of mental health
- c) need to continue community-based monitoring
- d) children should be at the heart of agenda
- e) synergistic efforts by govt. depts., NGOs and civil society must be continued.

Ms. Vimala concluded the webinar by thanking everyone for their participation and making the webinar such an enriching experience.

Key Takeaways

Part I: Challenges: Impact of COVID19 pandemic in the urban context which reveals itself pragmatically in the public health and medical care services, disbalanced socio-cultural exigencies, and a paralyzed industrial economy.

- *Public health and medical care service*
 - Citing the example of India's most densely populated slum catchments in Mumbai, Dr. Ravikant (Founder, Doctors for You, New Delhi) spoke at length about the fragile health care system in light of the accessibility by community and the preparedness at the service delivery level. Urban slums are hotbeds for such pandemics as they are teeming with all indicators which accelerate the spread of a virus outbreak. These indicators include malnutrition, abysmal sanitary living conditions, tuberculosis, etc.
 - The entire service delivery system took a hit due to the poor protection lent to health worker. This resulted in almost two-thirds of the medical work force being infected and severe staff crunch in the times of emergency. In addition, due to the short notice of the lockdown, health care centres were unable to stock up adequately.
 - While the staff shortage has been managed now, basic services, apart from COVID relief and management, is still a major challenge. Even till today basic medicine like Vitamin A which is critical for children is out of stock.
 - Another challenge in providing quality health care was the disruption of transport services. NGOs also depended largely on volunteer support which was at times a logistical nightmare due to zero transport facilities. Ms Kruti Javeri (SAATH Charitable Trust, Ahmedabad) spoke about this aspect in terms of discontinuation of medical care and services for pregnant and lactating women.
 - Mr Vasudevan (YRG Care, Mumbai) shared about how prevention work was hit hard due to shift of focus to treatment mode.

- For a large percentage of population, access to government relief services became a nightmare as they did not have the required documents. With all govt. establishments being shut down, it was not possible to make fresh applications.
- *Disbalanced socio-cultural exigencies*
 - The pandemic's effect deepened manifold due to poor communication and incorrect messaging. The cumulative effect of this fear and stigma was the reluctance in testing and accessing adequate medical curative care.
 - Communication was not effective due to the lack of cultural sensitivity and social relevance of the messages.
 - Trust and access to gatekeepers of the communities was another major challenge.
 - Ms. Kruti with her immense experience on working with women in urban slums of Ahmedabad highlighted the issue of domestic violence as a consequence of lockdown.
 - Mr Osama Manzar (Digital Empowerment Foundation, New Delhi) stressed that in India, poor scientific temper of population was a critical challenge where belief, faith and habit is at times higher than the rule of law. During all the communication drives there was a difference in preaching and practice.
 - Another challenge was the fight for daily wage earners between necessity and precaution. Instances are common where health workers themselves were not wearing masks.
 - The role of media in providing correct and constructive messages was another major challenge. Mr Md Shafin Ali (Karra Society for Rural Action, Jharkhand) spoke about the mistrust between the communities and service providers due to media and law enforcement agencies in Ranchi.
- *A paralyzed economy*
 - The deluge of migrant workers is an issue which widely discussed across forums as burning issue. Mr Ali spoke about the challenges in terms of stigmatization and cumulative poverty faced by labourers who migrated back to their villages.
 - Br Theckanath (Montfort Social Institute, Hyderabad) shared the experience of working with vulnerable communities including transgenders and domestic workers. Due to stigma and miscommunication that slums were COVID hotspot, domestic workers were stigmatized as carriers of the virus. Subsequently a large percentage of domestic workers were unemployed and their families were facing starvation.
 - It became common for families whose breadwinners were daily wage earners to get trapped into the debt cycle.
 - The economic breakdown became a challenge as the fight was between need & necessity vs precaution.

Part II: Solutions: A road map to improved disaster management through community engagement and behavior change communication.

- *Community engagement*
 - Dr. Ravikant shared the best practice of providing improved working conditions to the community of health workers. While conducting mindful recruitment (such as keeping the age limit below 35years), the health workers and doctors were provided COVID specific insurance.
 - He also shared that to win the trust of the community it is important to physically assure them of one's good intentions. He shared the example of one community, where his team distributed free soap to facilitate good hand washing habits.
 - Multi-level involvement of stakeholders including local elected leader has in the experience of all the panelists acted as major catalyst of change.
 - Community volunteers can be treated as an information cadre. Engagement of community youth in intensive monitoring has a two-pronged benefit. On one hand while the youth are constructively engaged, on the other hand since the youth are from the community itself the acceptance is much higher.
 - Br. Theckanath shared about how they created and institutionalized an army of influencers and volunteers from the communities in Hyderabad who worked to communicate, support and monitor.
 - Ms Kruti Javeri spoke about how COVID resource centres in partnership with local NGOs helped reach out to the most vulnerable based on a priority-based chart. Micro plans were developed by the COVID resource centre team to provide a continuum of need based services. Ms Kruti also responded to a participant Mr Shyam Sundar Sharma's query on increasing accessibility to vulnerable groups such as widows. She spoke about how COVID resources centre can become the link between communities and services.
 - Mr Ali spoke about the work done by his team to enable migrant labourers and daily wage earners access loans from banks.

- *Behavior change communication.*
 - While working with urban communities, it is important to be the change one wishes to change.
 - Mr Vasudevan highlighted the positive role of the faith-based organizations in enabling behaviour change.
 - With use of helplines, WhatsApp and SHGs, dissemination of correct information and the identification of vulnerable groups were feasible.
 - Mr Vasudevan also spoke about partnering with various associations (such as RWAs) and NGOs aided in implementing COVID precautionary messages. He spoke of the partnership with UNICEF which helped provide keen strategic insight.
 - Br Theckanath shared the best practise of stigma removal for female domestic workers. A two-pronged approach where on one hand the employers were sensitized and simultaneously alternative livelihood opportunities were created.
 - Ms Kruti shared how children were constructively engaged through recreational activities to become carriers of critical messages. Mr Shafin also shared about constructive engagement of children as schools were closed and all other venues of learning were also limited.
 - On bridging the digital divide, Mr Osama stressed about the need to break the habit by creating repetitive media messaging. Mr Vasudevan spoke about brick-by-brick efforts to overcome the technological barriers.