



Communication lessons learned in polio eradication

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Meeting, “Why invest in communication for
immunization?”





Assessment of communication programs in support of polio eradication: Global trends and case studies

Contributions of communication through Advocacy, Social Mobilization and IEC programs





Contributions of communication programs to polio eradication

- A. Specific communication goals that contribute to polio eradication.
- B. Capacity building in communication: personnel, technical and organizational aspects.



A. Impact of communication programs on specific communication goals

Questions:

1. What has been done extensively? What works?
2. What could have been done better?
3. What do we still not know? What should we know?

1. What has been done extensively? What works?



- Impact of large-scale media (television, radio, advertising) in raising awareness
 - Different media in rural and urban areas
 - Relevance of local and minority media
 - Low impact of print (posters, newspapers)

1. What has been done extensively? What works?

- Importance of interpersonal communication
 - IPC between health workers and caretakers.
 - IPC with traditional and religious institutions and leaders. Important opinion makers and power-brokers





1. What has been done extensively? What works?

- Addressing rumors
 - Successful experiences in addressing them before they turn into organized political resistance (Angola, DR Congo, Tanzania)



2. What could have been done better?

- Explaining and conveying information about OPV, and other immunization and health programs
- Using local forms of communication and culture (popular theater, community radio) strategically
- Designing focused strategies for specific populations (eg: segmented strategy for urban populations in Bangladesh)
- Maintaining continuity of communication activities
- Identifying hard-to-reach populations earlier



3. What do we still don't know? What should we know?

- 1. Causal relation between communication and behavioral outcomes**
- 2. Are lessons from campaign-centered interventions applicable to communication for routine immunization?**



3. What do we still don't know? What should we know?

1.1 Impact of IEC on behavior

We know the links between communication intervention and information, but links between communication and behavior are still missing

Evaluation data and control studies are needed.

For example, what is the short-term and long-term impact of:

- Work with journalists?
- Program branding?



What do we still don't know? What should we know?

1.2. Impact of advocacy on behavior

- Strong at global and regional levels, but uneven at national level, and weak at local levels
- Need to develop indicators to measure achievements of advocacy actions
 - How to measure “government commitment” in the short term and long term? Indicators: participation in ceremonies, raising funds, allocating funds for immunization, assigning human resources, persuading other policy-makers, and others.



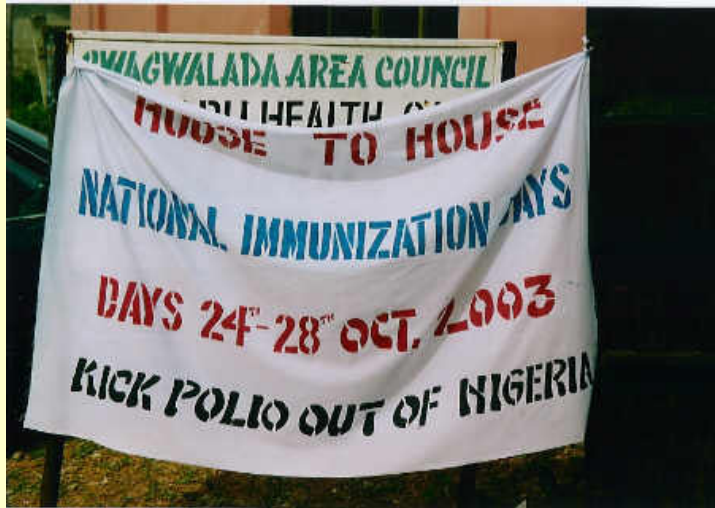
What do we still don't know? What should we know?

1.3. Impact of social mobilization on behavior

- Inconsistent, last-minute planned, and weaker as NIDs continue
- Interventions often decided by past practices rather than on the basis of strategic goals
- Evaluation of community-based forms of communication (popular theater, songs, puppets) is necessary

What do we still don't know? What should we know?

2. Are lessons from campaign-centered interventions applicable to communication for routine immunization?



- Most communication for polio eradication has been for NIDs
- Expecting specific behaviors a few times a year different from “changing the norm”



B. Impact of programs on communication capacity

1. Technical expertise
 - Better planning, but highly uneven quality
 - Message design, but weak strategic thinking
 - More tools available
2. Personnel
 - More communication staff, but still limited numbers
3. Organizational
 - More awareness about the relevance of communication among partners
 - The formation of SMCs and other networks



Impact of programs on communication capacity

- Missed opportunities
 - Strengthen SMCs particularly at state/local levels
 - Institutionalize capacity – where is it?
 - Improve communication plans
 - Design messages specific to populations and concerns
 - Have a broad perspective and technical expertise in communication
 - Have better training, supervision, and monitoring of IPC of HWs



Challenges

- Fine-tune communication strategies for hard-to-reach communities
 - Irregular access to health services (due to difficult access, lack of information)
 - Insufficient or no access to mass media
 - Living on the move (migrants, refugees, nomads)
 - Marginalized religious and ethnic minorities
- Design and implement communication programs that contribute to both PE and RI

