



# Use of Social Data and Evidence in Polio Eradication Programme

Social & Behavior Change Communication Summit  
Nusa Dua, Indonesia, April 17

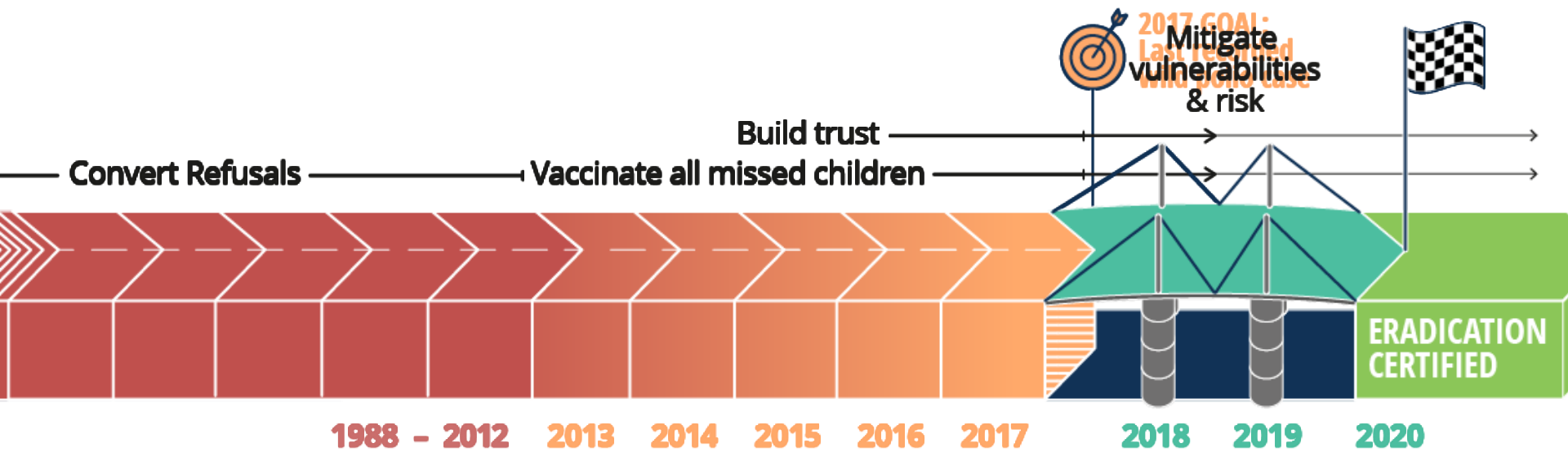
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**POLIO** GLOBAL  
ERADICATION  
INITIATIVE

# Contents

- Social data in the context of current GPEI priorities
- What data are collected
- How data are used
- Challenges & gaps
- Way forward

# Polio: Social data focus through the years





Vaccine acceptance is not a steady state.  
Hesitation can endanger success.  
High vaccination rates belie social fragility.



**Campaign fatigue**



**Caregivers who think Polio is curable**



**Belief in negative rumours**



**Do not think giving OPV is socially acceptable**



**Do not think OPV is a priority in the absence of cases**



# The health system and community need to work together to generate success

## SERVICE DELIVERY

**Healthworker:**  
Culturally appropriate profile • Knowledgeable  
• Compassionate • Communicative • Motivated

### Supply:

Supply systems ensure quality health services and frontline workers, as vaccines are available, potent, in right quantity, managed appropriately



**Demand:**  
Caregivers and communities seek, support, and advocate for services

**Caregiver:**  
Informed • Aware • Motivated • Receptive to service

 CAREGIVER EXPERIENCE AT POINT OF SERVICE CAN POSITIVELY OR NEGATIVELY INFLUENCE DEMAND

 STOCKOUTS OF VACCINE INHIBIT DEMAND

# What data are available?



## QUANTITATIVE:

Communication indicators  
in SIAs monitoring IM/PCE  
KAP surveys and polls  
Third party monitoring  
Coverage, surveillance and  
monitoring data  
Population analysis



## QUALITATIVE:

Population movements  
Media studies  
Cases investigations  
Microplans - social mapping  
Observational studies  
Transect walks

Immunizing  
all children

# Periodic Campaign Data



## **Independent Monitoring Data** (mostly standardized)

- Campaign awareness, sources of information
- Missed children tracking
- Refusals, absent, child sleep, newborn

## **Social Mobilization Data** (varies by countries)

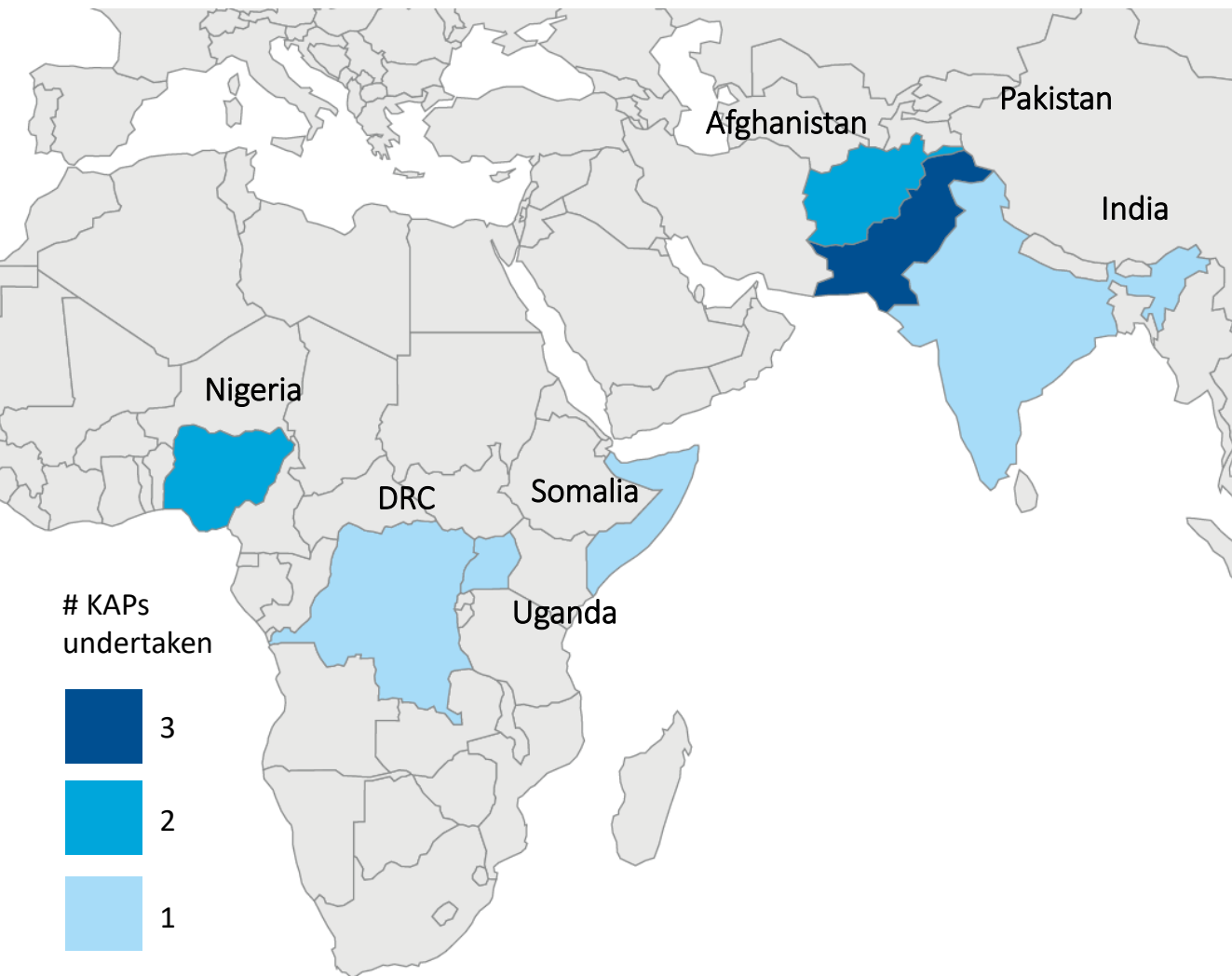
- Catch-up: refusal conversion, recovery of absent children
- Routine immunization coverage - registry
- Guest and visiting children
- Social mapping of mobile population, influencers, transit points

## **Shifting outside of the “comfort zone”**

- Are periodic IM data sufficient to inform communication decisions to identify consistently missed children?
- Are there other opportunities to engage full-time social mobilization networks in periodic data collection and “soft knowledge” generation?
- Are existing data used to their full potential?

# Formative Polio KAP studies 2013-2017

In collaboration with Harvard Opinion Research Program



Map image source: amcharts.com

## Strengths

- Reliable social data
- Application to C4D
- Responsiveness
- Credibility
- Impact

## Challenges

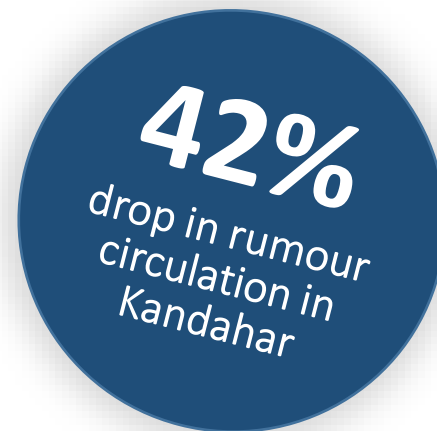
- Cost
- Time & effort
- Sustainability

## Polio Transition

- Support Immunization
- PCA post 2018
- KAP guidance

# How data are being used?

## Afghanistan – Addressing rumours



### “Da pula poray” soap opera (“On the Border” *pashto*)

- Targeted message based on KAP and content on combating rumours
- Runs for 10 years, reach 25% of Pashto audience in Polio areas
- 30 minutes format, followed by 7 minute facts, news and interviews, featuring real people from Pashto the community
- Aired 300 scenes and featured over 100 news reports
- Storyline - a female social mobilizer telling about daily challenges she is facing relating to rumors and misinformation which threaten her community

### “Ghamai” – BBC Media Action

- Child health show for Pashto audience. Featured human interest stories of polio survivors, interviews with mullahs, doctors, community leaders.
- Popular call-in show with a doctor – discussion content driven by first KAP
- Covers 30% of audience of about 30% of the Pashto community, running at the same time as “Da pula poray” on weeknights – total estimated coverage 60% of Pashto audience.

# Qualitative insights are as important Inside a caregiver's brain

## FATIGUE\*



If you try to draw blood from our children, you'll have polio drops – that's how much vaccination they get."

## COMMUNITY NORMS



The elders of the area say that we never took these drops....neither have we been paralyzed nor have we got ill. Then why should we give polio vaccine to our children?"



## FAMILY NORMS



Once I tried to give drops to my child without seeking permission but my husband said you would be divorced if you did this again.

## PERCEPTION OF SOCIAL SUPPORT



When polio team comes to our area, the community members behave really badly with them. They hurl stones towards the polio team, and make them flee the area."

# How data are being used?

## Pakistan – Building Trust “Sehat Muhafiz”



### Integrating communications with the overall programme operations

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- National Emergency Action Plan Focus on Tier 1 and Tier 2 for targeted interventions
- Operations, vaccinator hiring; management and accountability structures adjusted to focus on FLWs; technical and communications training modules integrated into one

### Localized approach

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- Ensuring Sehat Muhafiz/Gvt branding of the programme (debranding in media/ PR/materials of any donor or agency branding)
- “*Strangers No More*” campaign 2016-17 - portrayal of vaccinators as being local from the community, respectful, knowledgeable, committed

### Focus on the frontline workforce

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- Hiring of local and female vaccinators/ front line workers (country wide approx. 61% female team members; Tier 1 approx. 83% female workforce)
- Importance of IPC by FLWs and influencers to address issues/ importance of FLW profile (approx. 73,000 vaccinators and supervisors in Tier 1 and Tier 2)

### An all society approach across political/social lines

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- 12,000 print and electronic stories in English, Urdu, regional languages overwhelming positive and neutral media tonality; Shaped social norms, perceptions in the public sphere

# Qualitative insights are as important

## Inside a vaccinator's brain

### MOTIVATION

“ Our work is better than other kinds of work. If I had a sales job, I would have to take money from people. I would have to tell them to buy something, to give me the payment. At least I am not taking anything from people. I'm giving them something.

### \*FRUSTRATION / FATIGUE

“ It makes us feel bad that these two drops can save their children but we are unable to do anything for them [about children of refusing parents]...



### MOTIVATION

“ It feels so bad when people don't give a good response. They don't understand that we come by because we have to..... But when a good, polite person comes to the door, it's so nice! It makes your heart so happy.

### FATIGUE

“ At first, I did polio work enthusiastically. ...but the thing is, a person gets tired, right? It's a source of worry, why is polio not eradicated, when we work so hard? So yeah, I just do the work. I get by.

# Mobile population: beliefs, values & health-seeking behavior



*“A sick man is advised by a hundred”*  
- Somali proverb

**When a person falls ill**

**After agreeing on type/cause of illness**

**2<sup>nd</sup> treatment option**

**Only when other care options fail**



# Social research gaps

- **Health worker motivation** and caregiver values
- Barriers to **recruiting female team members** – appreciating the complexity
- Rapid and sound methodologies for **data collection in conflict zones**, complex emergencies and outbreak settings
- **Mobile and Inaccessible populations** – knowing not only where they are and how they move, but also their values, beliefs, health seeking behavior
- Emerging issues – “**knocks on the door**”, campaign fatigue, vaccine hesitancy

# Way forward

## Supporting advocacy:

- Maintaining **social data as critical element** in achieving high coverage

## Development of global guidance:

- **Qualitative approaches** - mobile population, frontline workers - anthropological focus
- **KAP management manual** for C4D managers - based on Harvard experience
- **Social data for complex security and outbreak contexts**

## Continue building capacity:

- **Support high risk countries** with targeted and actionable social research strategies



# Poliok.it

## **A MARKETPLACE FOR:**

- PROVEN STRATEGIES • TOOLS • PRODUCTS • TRAINING
- FOR ENABLING VACCINATION ENVIRONMENTS

# WE NEED YOU!

CONSULTANTS, STAFF ON CALL, FIRMS & COMPANIES

## DO YOU:

- Have a formal training in understanding human behavior or social norms?
- Know how to apply social research methods?
- Know how to interpret social data and see implications?
- Have proven experience in designing communication solutions & assess impact?

## DO YOU:

- Like to work with driven and passionate people?
- Like adventure, travel and don't mind a bit of risk?
- Dream of going places, where few people go?
- Understand the importance of cultural sensitivity?
- Work well in diverse teams?

**LET'S MEET UP at SBCC!**



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