COMMUNICATION FOR BEHAVIOURAL IMPACT (COMBI)

A toolkit for behavioural and social communication in outbreak response







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Printed in Luxembourg.

Contents

Foreword	vi
Acknowledgements	vii
Acronyms	ix
Glossary	х
Introduction	1
Section 1: Outbreak readiness: essential knowledge before an outbreak	3
Communication for behavioural impact (COMBI), health education, health literacy, health promotion, risk and outbreak communication and social mobilization	4
Outbreaks and outbreak response strategies	5
What is COMBI?	9
Critical dimensions of community mobilization in outbreaks	11
Monitoring and evaluation during outbreaks	12
Section 2: Outbreak response: Actions during an outbreak	15
Introduction	15
Programme, managerial and administrative response structure	17
The seven steps of COMBI planning	22
Section 3: Tools and templates for data collection and analysis	45
Tools for understanding the organizational context	46
COMBI planning step 1: Defining the preliminary behaviour objectives	50
COMBI planning step 2: Rapid situational market analysis	51
COMBI planning steps 3 and 4: Refining objectives and designing an overall strateg	gy 56
COMBI planning step 5: Preparing detailed plans of action and a budget	61
COMBI planning steps 6 and 7: Monitoring and evaluating interventions	62
Section 4: Essential resources, case studies and fact sheets	67
Anthropological approaches for outbreak response	68
Marketing concepts and behavioural theories and models	77
Case studies	85
Essential facts about major outbreak-prone diseases	101
Section 5: Further references	107
Anthropological perspectives on outbreaks	108
Health promotion	109
Outbreaks and outbreak-prone diseases	109
Pandemic influenza and avian influenza	109
Behavioural models and marketing	111

v

vi | Foreword

Over the past 20 years, three quarters of the new and emerging diseases that have affected humans have been caused by pathogens originating from animals or from products of animal origin. How these diseases emerge and the ways in which they are transmitted are often poorly understood, which hampers our ability to detect, respond and limit their negative impact. Human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), severe acute respiratory syndrome (SARS), Pandemic A (H1N1) 2009, highly pathogenic avian influenza (H5N1 HPAI), diseases caused by Lassa, Ebola and Nipah viruses are all recent examples of infectious diseases that have emerged at the animal–human-ecosystem interfaces. In addition, non-zoonotic and recurring epidemics, such as cholera, malaria, meningitis and measles, continue to present major challenges.

The factors that cause epidemics and new infectious diseases are complex. Environmental exploitation and degradation and poor environmental management provide opportunities for viruses and their vectors to mutate into more infectious and virulent forms. Population displacement, urbanization, poverty, overcrowding and weak health infrastructure provide ideal environments for infectious diseases to proliferate. Globalization, international transport and the growing demand for and the increasing trade in animals and animal products are spreading disease faster and wider; these factors facilitate the transformation of local outbreaks into epidemics affecting many countries at the same time. Antimicrobial resistance adds another layer of complexity to this constantly evolving landscape.

Essentially, as the world keeps changing, so do the risks and the management of disease outbreaks. There has never been a greater need for the animal and human health sectors to work together. Cross-sectoral and multi-disciplinary approaches have become vital to address the behavioural, physical, cultural, economic, policy and legal environments in which these diseases emerge, are amplified and transmitted.

Behavioural and social interventions have become an essential component of efforts to mitigate the effects of outbreaks, because many interventions rely heavily on community engagement, participation and ownership and on intersectoral coordination and collaboration for prevention, control and mitigation strategies to work. Central to this shift in approach is the commitment to integrated, technically sound strategies that include effective health communication in outbreak control objectives. Experts have come to realize that community understanding of diseases and their spread is complex, context-dependent and culturally mediated. Integration of participatory approaches into veterinary and public health responses are essential to look in the right places, ask the right questions and listen more effectively before making technical recommendations and implementing interventions.

Communication is central to this notion. It is a process that promotes dialogue among all the people involved in outbreak prevention and response, at the centre of which are affected communities and people at risk. This process can ultimately help strengthen relationships, build trust and enhance transparency among all those working towards averting or bringing an outbreak to an end.

The message that this toolkit carries is important. It challenges all those concerned to be proactive, to seek information and insights in a planned, systematic process, informed by evidence, effective models and good practice. It encourages the transformation of this understanding into meaningful interventions, grounded in local realities and is relevant for all those involved in outbreak preparedness and response.

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Acknowledgements

This toolkit was designed on the basis of experiences from direct application of the method of communication for behavioural impact (COMBI) in outbreaks. COMBI was first applied during the outbreak of Ebola haemorrhagic fever in southern Sudan in 2004. The World Health Organization (WHO) Global Outbreak Alert and Response Network sent a WHO COMBI staff member to assist in community outreach and mobilization conducted by the district social mobilization team in Yambio. The highly committed team members were often asked difficult questions in communities in which they were providing information and trying to persuade families and communities to comply with the recommended prevention and control measures. The WHO Global Alert and Response Department had long recognized the need for a systematic planning framework, and Yambio provided an opportunity to apply COMBI and assess its contribution.

The WHO COMBI approach has its roots in a course on integrated marketing communication for behavioural impact in health and social development conducted at New York University (United States of America) by Everold Hosein. Since 2001, COMBI has been applied to a range of public health challenges. In this publication, it has been adapted to outbreak response.

This document is the work of many people, all of whom provided useful comments, which helped to shape and improve the toolkit. In particular, we thank Everold Hosein for his input and guidance. Diane Pollet, the COMBI focal point in the WHO Mediterranean Centre in Tunis, reviewed the original manuscript in 2008. We also thank Rosita Ericsson, Jan-Marcus Hellstrom and Mike Coleman for technical editing, writing and input into the second and third drafts. Finally, we thank Mike Ryan and Pierre Formenty for their consistent advocacy for multidisciplinary, multisectoral approaches to the prevention and control of epidemic and emerging diseases.

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Case studies: Angola, Julienne Ngoundoung; Cambodia, Benjamin Hickler (reproduced with permission from the Food and Agriculture Organization of the United Nations (FAO)); Fiji, Will Parks, Deputy Representative, UNICEF Nepal; Sudan, Asiya Odugleh-Kolev, WHO

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