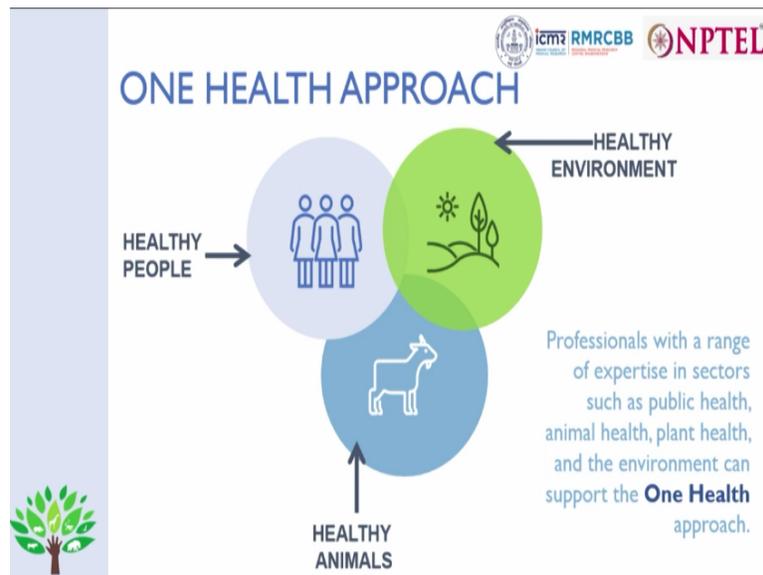


One Health
Media and Community Engagement for One Health
Dr. Rajni Kant, Ph. D
Director and Scientist - G
ICMR – Regional Medical Research Centre, Gorakhpur

Lecture - 21
Risk Communication and Pandemic Preparedness

So welcome participants and Namaskar for this unique and innovative online certificate course on One Health being started by the ICMR Regional Medical Research Centre in Bhubaneswar and today we are going to discuss on Unit 6 which is focusing on media and community engagement for One Health. So, we will discuss about the media, how we can engage with the media and how we can engage with the community to develop our policies and programs and protocols so that we can get an effective outcome.

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Since this course is dealing on One Health so you should be aware about the One health. What is One health? When we talk about the one health, One health is the animal health, it is the human health and it also comprises of the environmental health. So if there are healthy people, there are healthy human being and if they are healthy animals and this healthy environment, so we can expect a good environment for the One health.

And professionals with a range of expertise in sectors such as public health, animal health, plant health and the environment can support the One health approach. So that is how this One health has become very important.

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So in today's talk we are going to discuss about the One health approach. What are the One health approaches, learning objectives, community engagement, how we can engage the community, what is the community, importance of community engagement, methods of engagement, approaches to community engagement. We will also discuss about the media engagement, media as an influencer.

Media's format, building associations, key messages, tips for effective messages, approaches, social media, how we can develop social media strategies, tips for effective social media engagement and there are certain references you can read for further interest.

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LEARNING OBJECTIVES

The module is prepared to enable scientists to effectively engage with media and the community to:

- ✔ Improve awareness about One Health in communities
- ✔ Reach marginalized and under-resourced communities with accurate information
- ✔ Enable informed decision making
- ✔ Facilitate better health practices
- ✔ Address social detriments of health that fall outside clinical settings (awareness, stigma, etc.)



So, what are the objectives? Objectives, this module we have prepared to enable the participant as well as the Scientists to effectively engage with the media as well as to the community that will help in improving about the One health in the community so that if the communities are aware they can understand the problems of the One health and they can help in the finding the solution also. And the research is also aimed to reach the marginalized and the under-resourced communities with accurate information.

And we can also enable informed decision making. Once you have engagement with the community with the media that will help in the decision making process also. Facilitate better health practices. So if you are aware, it will help in developing the good health practices and address the social detriments of health that are very important when we are dealing with the community and that fall outside the clinical settings that is awareness and the stigma. So, these are the objectives we are focusing.

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WHAT IS COMMUNITY?

A community is a social unit that shares common systems including:



Norms
Religious Beliefs
Values
Language
Traditional systems and leaders
Social/economic/ political settings
Shared interest or values

WHAT IS COMMUNITY?



Source: Community engagement: a health promotion guide for universal health coverage in the hands of the people. Geneva: World Health Organization, 2020.

So I will start with understanding the community engagement that is the part 1 of this module. What is a community? We all know that we live in a society and when live in society there are certain peoples and we call these people as a community. So community is a social unit that shares commons. What we can share? We can share the common norms, we can share the religious beliefs, we can share the common values.

We can share the common language, we can share the traditional system and leaders. We can also share the social, economic and political settings and the shared interests or value. So, this is all consists of the community and we call this in community when we are having certain common areas and common interests.

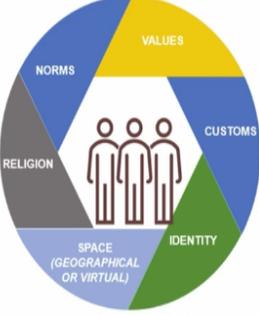
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WHAT IS COMMUNITY ENGAGEMENT?

WHAT IS COMMUNITY ENGAGEMENT?



Community engagement entails working collaboratively with and through groups of people affiliated with each other to address issues affecting their well-being.

Source: Community engagement: a health promotion guide for universal health coverage in the hands of the people. Geneva: World Health Organization; 2020.

So what is community engagement? So community engagement entails working collaboratively with and through groups of people affiliated with each other to address issues affecting their well-being. So when we are dealing with certain group of people, other leaders so that we can discuss with the community what are your issues, what are the problems, how you can help. So, our aim is how we can engage with the community and how we can create awareness in the community about a particular problem including the one health.

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ENSURING EFFECTIVE COMMUNITY ENGAGEMENT

For an effective community engagement, the process needs to:

ENSURING EFFECTIVE COMMUNITY ENGAGEMENT





Proactively seek out community values, concerns and aspirations



Establish an ongoing partnership with the community to ensure that the community's priorities and values continue to shape the interventions



Incorporate those values, concerns and aspirations into a decision-making process

So how you can ensure effective community engagement? Because unless and until if you have an effective community engagement it is very difficult to get the desired outcome. So for an

effective community engagement, the process needs to be proactively seek out community values and concerns and aspirations. What are the community values, what they are thinking about the problem and what are their aspirations.

What do they expect from you and how they can help you in your programs. And establish an ongoing partnership with the community to ensure that the community priorities and values continue to shape the intervention. So unless and until if you are not engaged with the community, it is very difficult to run any program. So if the communities there aware, they know the problems and they can help to your interventions that is how we can engage with the community.

And incorporate those values and concerns and aspiration into decision-making process. So once when we know this is a community, these are their expectations, these are their aspirations, if we incorporate all these things into our program that can result into a better outcome.

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So, why and how the community engagement becomes very important? Because it helps to create effective solutions drawn from the knowledge of the local, because we get information from the local community, what are their problems and how they can help you in your interventions. So it helps in creating effective solutions number one. Number two, it builds trust of the community in public health intervention.

Because once the public they are aware about the problem and they understand yes you are there to help them, so there is a trust between the policy makers and the community. So it helps in building a good trust. And enable the promotion of UHC, UHC means the Universal Health Coverage. Government of India is planning to achieve the universal health coverage as well as globally define the sustainable development goals through one-on-one discussion and engagement.

So once we have a good community engagement, we can address the UHC, we can address the SDGs and we can also expect some good outcome based on our intervention.

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So what are the levels of community engagement that how we can engage with the community? So number one comes the inform. How we can inform to the community that is creating awareness about any problem, suppose we are dealing today on the One health. For example Japanese encephalitis JE is again One health issue, KFD is again a One health issue, encephalitis is again a problem for One health, then Covid-19.

There are many issues which are under the umbrella of One health. So if you can create awareness among the community, among the society how this disease is spread, how you can prevent yourselves that is creating awareness in the community through campaigns. So we can

do some campaigning, we can provide some IEC material that is information education and communication material, that is also very important.

Number two comes the consult. If we are going to a village, we are going to a community, so we can develop some interaction and dialogues that is known as consultation. So creating a dialogue with the community at various level of geography at different phases of the program in the beginning, in the middle, in the end with different groups, women's groups are there are, some two three people are there or youth club is there, some top leaders are there, religious people are there.

So regular consultation is also very very important in any program particularly in the One health also. And how then we can involve the community in our program that is also very important. If the community is aware, if they have a trust in you, then you can also involve the community in your program so that is also becomes very important. You can create some advisory group, you can take their advice.

Because they are the person those who are better aware about the local problems, what are the available resources so that you can utilize these resources. So this is also very important and pertinent to involve the community in any of the program including the One health. And collaborate with the local organizations. So in each and every community there are certain local organizations, NGOs are there, so we can involve these local organization and they can be of very useful support to you.

And then we can empower the community, build capacity of the people on the ground. So if we can train the community, we can inform them that this is the problem, these are the solutions, so that is we are empowering the community. So if you can empower the community your half of the problems is solved, they can tackle the issues of their own.

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MEDIA ENGAGEMENT







IEC Material for Community Engagement

Information, education and communication material (IEC) uses communication techniques and ideas to influence or reinforce health-related behaviours in a target audience with regard to a particular issue.

Posters, flyers, leaflets, brochures, booklets, messages for health education sessions, radio broadcasts, TV commercials, and other materials are printed, created, and disseminated as part of IEC in order to encourage desirable and constructive community behaviour.






Source: National Centre for Disease Control, MoHFW (<https://ncdc.gov.in/>)

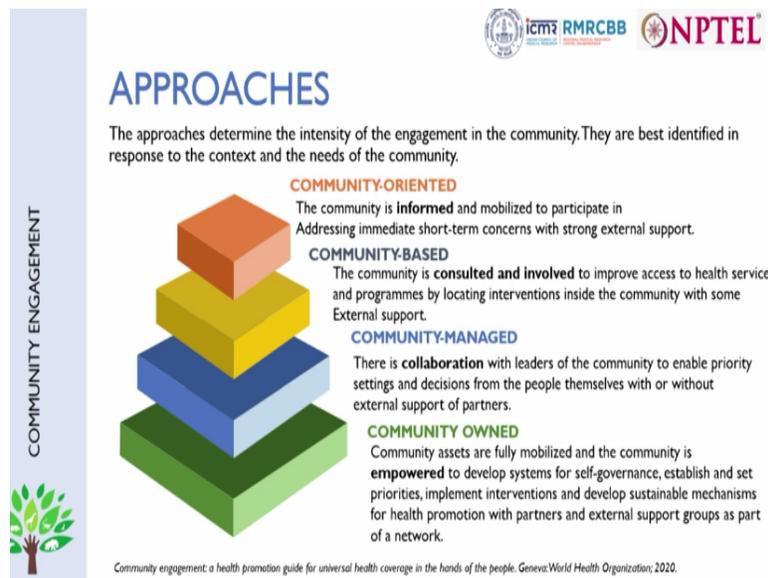
Then it is very important to develop the IEC material. IEC means information, education and communication material and these are very useful tools for disseminating information and there are certain communication technique also, ideas also, that influence or reinforce the health related behavior in a target audience with regard to a particular issue. So when we are talking about the behaviour change communication so you need to develop some IEC tools.

Some brochures, pamphlets, slogans so they can be very very useful and you can use in your program. For example, posters, you can develop some infographics, some bullet points on how disease is caused, what are the preventive measures, how you can control of yourself. Posters, flyers, leaflet, brochures, booklets, messages, health education sessions. You can go to the schools, you make some program for the school health education.

You can also involve the radios broadcast, you can also involve the TV commercials, other material, printed, created and disseminated as part of the IEC. And we can also engage some celebrities also, sport personalities, even the cinema personalities, so they can also can be a big ambassador of advisory of your program. So this is how the IEC becomes very important in any One health approach.

So, what are the approaches of community engagement? So how we can approach the community, how we can involve the community, so we will discuss about the approaches.

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So, there are different approaches that determine the intensity of the engagement in the community. They are the best identified in response to the context and needs of the community. For example community oriented, when we call a community oriented approach it means that community is informed and mobilized to participate. You have informed the community about one particular problem and they are mobilized to participate in your programs that is known as community oriented.

And addressing immediate short-term concern with strong external support, so we are there, we are supporting but coming community is informed and they are also supporting you, they are involved, so this is known as a community-oriented approach. Then what is community-based approach? In community based is consulted and involved, the community is consulted and they are involved in your program to improve the access to health services and programs by locating intervention inside the community with some external support.

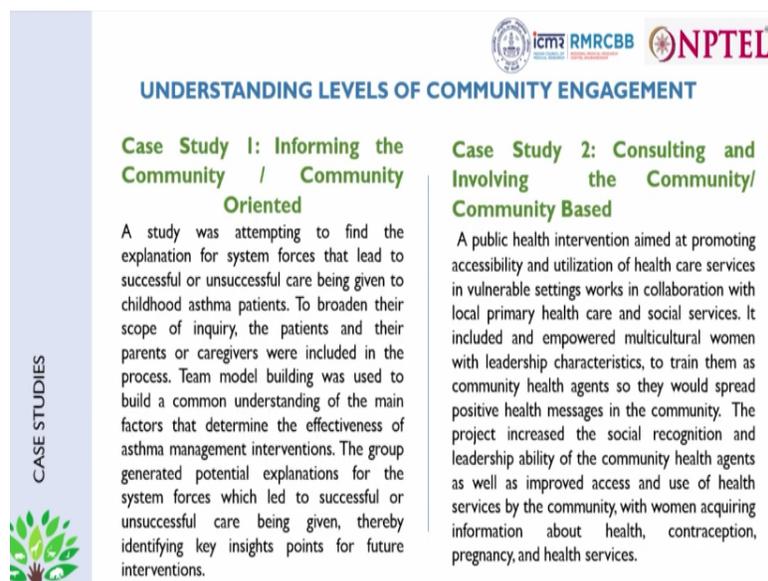
So we are providing external support, but community is also providing support, they are the partner that is community based. Then community managed, if the program is directly and fully managed by a community that is community managed. There is a collaboration with the leaders of the community to enable priority setting, they are helping you in the priority setting and in decision making from the people themselves without the external support of partners.

So there is no external support if they are managing. For example there are mosquito breeding, if community they are aware yes these are the water logging is here and it can be an ideal condition for the mosquitoes to breed. If they fill up all these mosquito breeding sites and the control mosquito themselves without external support, this is community managed. It means they are managing their problem of its own.

Similarly, for Covid-19 if community is aware that using a mask is important for prevention of the virus it means they are aware. So community managed means that they are able to manage any problem of their own. Then community owned means that community assets are fully mobilized and the community is empowered to develop systems for self-governance, establish and set priorities.

Implement intervention and develop sustainable mechanism for health promotion with partners and external support groups as part of the network. So if a community they are well informed, they are aware about the problem and they can do of their own with little bit of support, some technical know-how, it means that it is a community owned program. So these are the approaches that is community oriented, community based, community managed, and community owned, so different approaches of involving the community.

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UNDERSTANDING LEVELS OF COMMUNITY ENGAGEMENT

Case Study 1: Informing the Community / Community Oriented

A study was attempting to find the explanation for system forces that lead to successful or unsuccessful care being given to childhood asthma patients. To broaden their scope of inquiry, the patients and their parents or caregivers were included in the process. Team model building was used to build a common understanding of the main factors that determine the effectiveness of asthma management interventions. The group generated potential explanations for the system forces which led to successful or unsuccessful care being given, thereby identifying key insights points for future interventions.

Case Study 2: Consulting and Involving the Community/ Community Based

A public health intervention aimed at promoting accessibility and utilization of health care services in vulnerable settings works in collaboration with local primary health care and social services. It included and empowered multicultural women with leadership characteristics, to train them as community health agents so they would spread positive health messages in the community. The project increased the social recognition and leadership ability of the community health agents as well as improved access and use of health services by the community, with women acquiring information about health, contraception, pregnancy, and health services.

So these are the certain examples. Understanding the level of community engagement. The case study is about informing the community or community oriented, what is a community oriented? So this study was attempting to find the explanation for system forces that lead to the successful or unsuccessful care being given to childhood asthma patients. To broaden their scope of inquiry, the patients and their parents or caregivers were included in the process.

And team model building was used to build a common understanding of the main factors that determine the effectiveness of asthma management intervention. The group generated potential explanation for the system forces which led to the successful or unsuccessful care being given thereby identifying key inside points for future intervention. So this is the community oriented case study. Similarly, there is a case study about consulting and involving the community that is community based.

A public health intervention that is aimed at promoting accessibility and neutralization of healthcare services in vulnerable settings work in collaboration with local primary health care and social services. It included empowered multicultural women with leadership characteristics to train them as community health agents so they would spread positive health messages in the community.

The project increased the social recognition and leadership ability to community health agents as well as improved access and use of health services by the community with women acquiring information about health, contraception, pregnancy and health services. This approach is known as community based.

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Case Study 3: Collaborate with the Community Managed

In a region with a high maternal mortality ratio, an NGO collaborated with the local communities to create birthing facilities. The facilities provide trained staff, facilitate access to referral care and encourage traditional birth attendants to bring patients to deliver in these facilities.

Importantly, traditional birth attendants in the communities supported the use of these facilities and influenced the decision of where the births should take place. Key factors to the success of this initiative includes the geographical proximity, the use of culturally and linguistically adapted care, the use of staff who either lived in or were from the local community and a sense of community ownership and accountability.

Case Study 4: Empower the Community Owned

An initiative to address the social risk factors of childhood obesity was developed to specifically address food insecurity and physical inactivity in children of communities of colour. Linking community health with human and civil rights a national advisory committee was formed which included academics, community organizers, and experts in food, public health, and policy development which developed a call for community-owned project applications. They provided a three-year grant to 22 grassroots organizations. One of the projects restored cultural gardening practices converted vacant properties into urban community gardens and integrated healthy foods into school meals in the area.

Then how is the community managed? Collaborate with the community and community is managing any problem. For example, in a region there was a high maternal mortality ratio, so an NGO collaborated with the local communities to create birthing facilities. Facilitated provide trained staff, facilitated access to referral care and encourage traditional births attendants to bring patients to deliver in these facilities.

Importantly traditional birth attendants in the communities they supported the use of these facilities and influenced the decision making where the birth should take place. Key factors to success of this initiative included the geographical proximity, the use of culturally and linguistically adopted care, the use of a staff who either lived in or were from the local community and sense of community ownership and accountability.

This is community managed. Then community owned, how we can empower the community that they can own the program? An initiative to address the social risk factor of childhood obesity was developed to specifically address insecurity and physical inactivity in children of communities of colour. Linking community health with human and civil rights, a national advisory committee was formed.

Which included academics, community organizers and experts of food, public health and policy development which developed a call for community owned project applications. They provided a

3-year grant to 22 grassroots organizations. One of the projects restored cultural gardening practices converted vacant properties into urban community gardens and integrated healthy foods into the school meal in the area.

So it was completely community owned program. So that is how we can define the community managed, community oriented and community made approach and we can take the involvement and the engagement of the community.

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COMMUNITY ENGAGEMENT

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ACTIONS FOR COMMUNITY ENGAGEMENT

Information Sharing
This means providing the community with key information to inform decision-making, and involving them in communications, interventions and communication processes.

So what are the actions for the community engagement? If we have to take the partnership of the community, we have to create awareness and engage the community, what action we can plan? That is the information sharing. How we can share the information with the community? This means providing the community with the key information to inform decision making and involving them in communication, intervention and communication process.

For example, when we were dealing with the One health, Covid-19 is again a case study of the one health. So we need to provide the information related to the Covid-19 how it spreads, how we can prevent, what are the treatment options, how vaccine is important? So these are the information sharing. So whatever research is happening in your lab, whatever the information is available with you we need to share with the community so that is informing the community that is information sharing.

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COMMUNITY ENGAGEMENT

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ACTIONS FOR COMMUNITY ENGAGEMENT



Consultation
This involves active listening – understanding the concerns of communities – and using that information to inform the response in a way that reflects the community's priorities and acceptance.

Then consultation. You need to consult with the community on a regular basis. This involves active listening, understanding the concern of the community, what are their concerns, whether they can afford the treatment or not that is their concern. Whether they can reach to a PHC or CHC that is again their concern. Whether there are facilities available or not, whether there are cultural taboos, so these are the concerns.

So we need to consult the community and using that information to inform the response in a way that reflect the community priorities and acceptance. For example if you go into tribal area, many other tribals they have faith and beliefs in the ayurvedic system of medicine, they have local healers. So you need to consult the community and explain why they need to go to the modern medicine, why they need to go the test for the blood if they are having fever. So this is a consultation and creating awareness in the community for the better outcome.

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ACTIONS FOR COMMUNITY ENAGEMENT

COMMUNITY ENGAGEMENT



Facilitated decision-making and empowerment

This is where communities are actively involved in the design, planning, leadership, implementation and evaluation of health programmes and initiatives

Then action also include the decision making and empowerment, how communities they can take the decision and how we can empower the community. This is where communities are actively involved in designing, planning, leadership, implementation and evaluation of the health program and initiatives. For example in Gadchiroli, there is an organization with the name Search and Dr. Abhay Bang and Dr. Rani Bang they are working in the community.

So they have tried to find out what are the problems of the community. Instead of imposing our health problems, health issues, health concern to the community we should go to the community and ask what are their issues so that we can make our programs and plan accordingly. So, decision making and empowering community is also very important.

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SUGGESTED STRATEGIES FOR HEALTH INTERVENTIONS

Several strategies that can assist in connecting with local communities in

COMMUNITY ENGAGEMENT	Identify local influential bodies and individuals —NGOs, SHGs, ASHAs, Gram Pradhans, religious leaders, faith-based groups, etc.
	Create health champions in districts/blocks/wards/ villages
	Develop a decentralized/localized health agenda with specific goals
	Build the capacity of frontline health workers to adopt a one-health approach
	Utilize local platforms and meetings to popularize one health agenda
	Use virtual trainings and sessions with local bodies to rapidly expand the reach
	Shared interest or values



Community engagement: a health promotion guide for universal health coverage in the hands of the people. Geneva: World Health Organization; 2020.

So suggested strategies for health intervention. There are several strategies that can assist in connecting with the local communities in identifying the local influential bodies and individuals. So if you are in the community they can let you know, they can inform you about the local NGOs those who can be of your support. What are the social self-help groups SHGs, ASHAs, gram panchayats, the religious leaders, faith-based groups.

So these are groups they can help in all the health related program. Then create health champions in districts, blocks, ward and villages. So we can identify certain leaders and we can empower them with the information so that they become the champion and they can communicate at their own level. And develop a decentralized localized health agenda with specific goals. So, if we are dealing in a community and for example in we are in Odisha encephalitis problem.

So we can create a plan and program according to the community's requirement and decentralize the local health agenda. It may not be the global agenda, national agenda, but it will be a local agenda. Similarly for JE and AES, if JE and AES is the problem in the Gorakhpur we need to develop a local agenda and that will be very effective for that community. Build the capacity of frontline health workers to adopt the one health approach.

So those workers for example ASHAs are there, other health workers are there, so regular training is also very important so that they can also be influential, they can also be helpful in any

other one health program. Utilize local platforms and meetings to popularize one health agenda. So, what are the local platforms? For example in UP there DASTAK program is running, so we can involve with the DASTAK.

In Odisha you might be having some program, in Tamil Nadu there are certain program. So we can utilize these local platforms and we can also collaborate with the local agencies so that we can also help each other and deploy our interventions. And use virtual trainings and session with local bodies to rapidly expand our reach. If we are not able to connect with each and everyone in physical mode, we can also develop some virtual meetings so that our information is being shared.

And shared interest and values. So these are really suggested strategies for the health interventions. So, this I was talking about the community, how communities they are very important and without the support and the engagement of the community it is very difficult to run any public health related program and expect any outcome. So community awareness is very important, information is very important.

Building a trust is very important, community engagement is also very important. If we all have proper community engagement, community awareness, definitely we will have the positive results and outcome will be significantly high. Second important point which we are going to discuss today is about the media because media we all know is very very crucial. You cannot avoid media, but you have to use media in a very proper manner. So how we can engage the media?

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MEDIA AS AN INFLUENCER

Media plays a critical role in raising awareness and information on key health issues. When leveraged strategically, media can:

- ✔ Build public consensus for critical issues and generate informed discussion
- ✔ Frame an accurate narrative by getting journalists committed to a common cause



NDTV, July 2020

New malaria vaccine is world-changing, say scientists

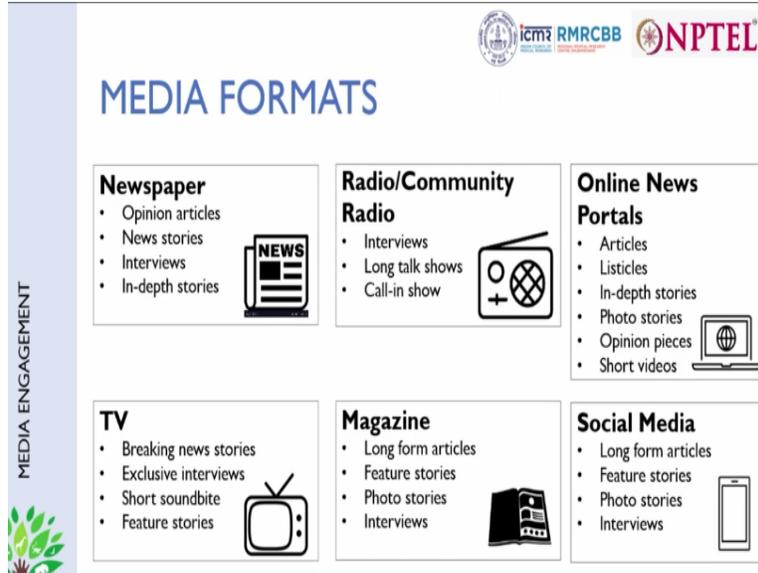
By James Gallagher
Health and science correspondent

BBC, September 2022

Media is also again a very big influencer because they make a large impact and today we have a print media, we have a digital media, we have a social media, different platforms are there. So media plays a critical role in raising awareness among the society and information on key health issues. When leveraged strategically media can build public consensus for critical issues and generate informed discussion. Even Covid-19 the media played an important role.

The media create a general consensus about a one particular problem, so engaging media is very important. Providing correct information to the media is also very important. Frame and accurate narrative by getting journalists committed to a common cause. So, we need to interact with the journalist and we need to inform to the journalists on a regular basis about our health related problems.

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So what are the different media formats? I spoke about the print media. I also spoke about the digital media. Then now today we have a social media. The newspapers, newspaper is again a very important tool for engaging with the media. So you can write opinion editorials, whether it is One health, whether it is on Covid-19 or local health issues.

So senior author from your institution, your director, DG, ICMR or any expert they can write opinion editorial in a newspaper that can be very effective way of communicating with the people. Then news stories, certain stories they are being published on a regular basis, interviews with the media and in-depth stories. So it comes all comes under the newspaper. So this is again a very important channel while we are communicating our science to the society.

Then the radio, you all know about the prime minister’s initiative of Mann Ki Baat. So through Mann Ki Baat he is communicating with the masses and he is sharing the information what government has done, what is important days. So similarly, also when we are dealing on health issues so media we can use, radio is a very important communication, particularly in the rural areas. The interviews, long talk shows, call-in shows, even the FM programs all these are very important.

Two-line message, single message they can reach to the millions of the people. So radio is again a very important tool while we are talking about engaging with the media. Online news portals,

there are many online newspapers nowadays, articles, listicles, in-depth stories, photo stories, opinion pieces, short videos these all can be used while we are talking about engaging with the media. TV, the television again a very important tool while we are talking about engaging with the media.

The breaking news stories, exclusive interviews, short soundbites, feature stories. During Covid-19 many of the news channels they were coming to ICMR for the DG interview, for the director of NIV interview, virologist interview they can tell something about the testing strategy, something about the vaccine, whether vaccine are safe or not, new drug policy. So this is how this becomes very important because news spreads like a wildfire.

Magazines are also very important, so we can contribute articles, long articles, feature stories, photo stories, interviews in the magazines. Then I was talking about the social media because social media is like anything. Today we have Facebook, we have Twitter, we have WhatsApp. So long form of article, feature stories, photo stories, interviews we can use the social media and we can disseminate any health-related information in a fraction of second to the millions of the people.

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So how can the media be friends? Sometimes we are scared about the media. The media always does the negative story, but it is not correct because if we have a positive story, if we have a

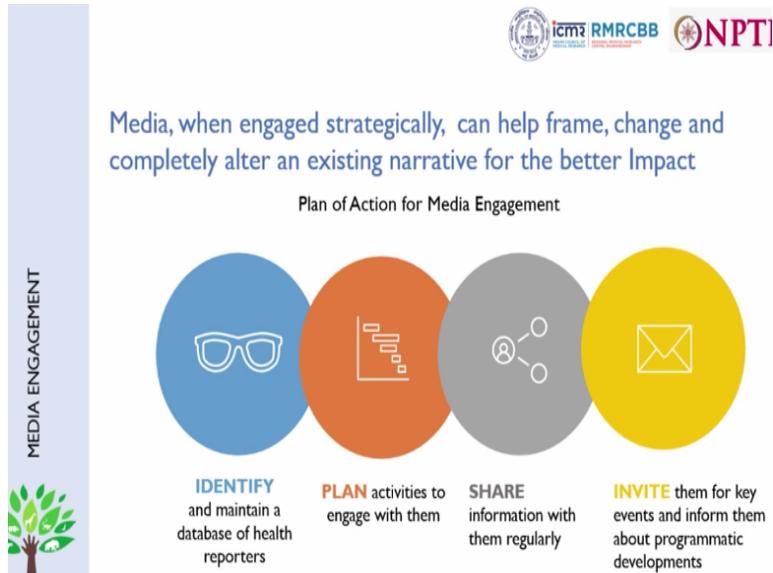
correct information, media is always ready to take the information from you. So what journalists want and what do you want, journalist wants news peg. Something new journalists will definitely pick up and publish in the whether it is a print media or digital media or social media.

Background information, why this information is very important? For example, background information Covid is a problem, now we have a Covid vaccine, immediately it will go in the news. Jargon-free statement, it means you should not have complicated science while we are dealing with the media. It should be simple, layman language so that anybody can understand, whether it is a policy maker or a common man. So it should be a jargon-free statement.

An inform evidence-based comments on a controversial issue. So there should not be any controversy and whatever we are sharing with the media there should be a solid evidence, yes we have done the safety studies, we have done the efficacies, we have a sound data then we can share. So this is how the journalists becomes very important and they can be your friend. And what you want?

We want that, okay, we can reach to the public with informed and evidence-based messaging on a public health issue. So if we have anything sound, robust, evidence based media can disseminate your information in fraction of second to millions of the people. That is how a good relationship with the media is very important and hence the media engagement becomes very important.

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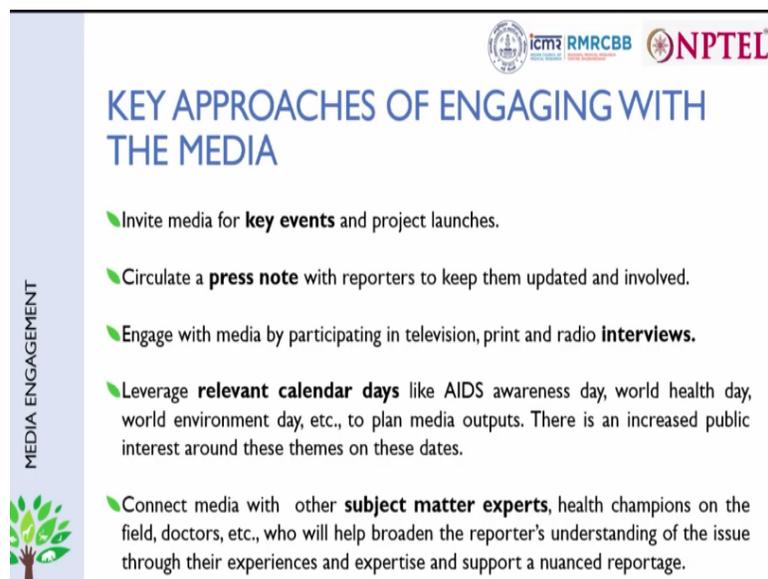
So what are the ways to engage with the media? Media when engaged strategically, it can help to frame and change completely alter an existing narrative for the better impact. So if there is a confusion, misinformation, disinformation, people are confused what to do, where to go, what not to do but if you are providing a correct information to the media, correct information going to the people, so they are more aware and they are getting the correct information.

The plan of action for the media engagement how we can make a plan? Number one, identify and maintain a database of health reporters. So you should have a database of reporters, for example if somebody is in Odisha, we are in UP, somebody is in Delhi or in Tamilnadu or in North East you should have a database of journalists. What are the major generalists, what are the major newspapers, so the database is very important. Identify and create a database of journalist with you number one.

Plan activities to engage with them. How you can engage with the media? So regular basis you can do the press conference, press brief, sharing information so that plan you should have, how you can engage with the media. Share information regularly, doesn't mean that once in a blue moon or once in a year you are sharing some information, some birthday is happening. Regular connect is very important on a regular interval.

You need to develop relationship with the media, quarterly basis, half yearly basis or monthly so that you can share the information and invite them for the key event and inform them about the program development. Suppose there is a launch, suppose there is a foundation stone laying ceremony, some report is being released you invite the media, share the bullet points, key messages, so there is a regular engagement with the media that is very important when we are dealing with the media and they can be your friend.

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MEDIA ENGAGEMENT

KEY APPROACHES OF ENGAGING WITH THE MEDIA

- Invite media for **key events** and project launches.
- Circulate a **press note** with reporters to keep them updated and involved.
- Engage with media by participating in television, print and radio **interviews**.
- Leverage **relevant calendar days** like AIDS awareness day, world health day, world environment day, etc., to plan media outputs. There is an increased public interest around these themes on these dates.
- Connect media with other **subject matter experts**, health champions on the field, doctors, etc., who will help broaden the reporter's understanding of the issue through their experiences and expertise and support a nuanced reportage.

So what are the key approaches of engaging with the media? Invite media for the key event and project launches. Anytime whether is a foundation day, whether it is a symposium, whether there is a book release, launches, new program you are going to start invite the media. So they will capture some information and they will share. Circulate a press note, you can prepare a press brief and press note should be very jargon free and very precise.

Focus only on the achievements and outcome, you can share with the reporters and they will be happy to publish in the newspaper, press note is very important. Engage with the media by participating in television, print and radio interviews or regular interviews can be arranged with your top leaders, with your directors and they can share your achievement of the institute or your program whether it is a One health program.

Leverage relevant calendar days. Suppose there is AIDS day, One Health day is now happening, other important days, you can invite the journalists and you can share, One Health day is there, environment day is there. So what are the new programs you are launching, what is the new what has happened in the science. So you can share with the media all these important days. Connect media with other subject matter experts.

Health champion on the field of the doctors that will broaden the reporter understanding about the issue through their experience and expertise and support a nuanced reportage. So if the regular connect is there and regular interaction with the media is there, interviews are there, so media they are also aware about what is happening in the area of health.

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KEY MESSAGES

The first step to all media interactions is formulating key messages

MEDIA ENGAGEMENT

What are key messages?

- Key messages help bridge the gap between what you want to convey and where the journalist and their readership is coming from.
- Messages are words that help you **deliver your narrative**

So framing key messages to engage with the media, how you can frame your message? What are the key points? The first step to all media interaction is formulating key messages. So messaging is very important and key messages help bridge the gap between what you want to convey and where the journalists and their leadership is coming from. So this key message becomes very important. Messages are words that help you deliver your narrative, so you should be very smart what kind of messages you are sharing with the media.

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3 Elements to develop key messages

Develop your key messages with the **three elements** below:

**CONTEXT/
SITUATION**

More than 220 million women in developing countries don't want to get pregnant but lack access to the family planning information, services and supplies they need.



SOLUTION

Access to family planning to delay pregnancies and space births ensures the health of women, newborns and children

CALL TO ACTION

We need to build political will and commitment to provide more women with access to the family planning services they want.

MEDIA ENGAGEMENT



There are three elements to develop key messages that you should be very aware. Develop your key messages with three elements. Context and situation, what is the situation? Why you want to convey? More than 220 million women in developing countries do not want to get pregnant, so this is a context situation but lack access to the family planning information, services and supplies they need. So this is the context.

There are women those who don't want to get pregnant but they are not aware about the services available, so this is the context and situation. Call for action. We need to build a political will and commitment to provide more women with access to the family planning services they want, so this is action. Then solution, you have to provide the solution. Access to family planning to delay pregnancies and space birth ensures the health of women, newborn and children.

So you have a context situation, then the action, then solution; so this is the triangle. So this is how you can frame your key messages. So, this is the context and this is the action and this is the solution and media will be very happy to understand.

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What makes a key message effective?



I. Targeted Messages for your audience

Delivering the same message to every audience is like trying to mail a letter to the whole town instead of a specific address

Who is your audience: Policymakers?
Rotary Club? Politicians? Colleges?
Schools? Media?

While it's fine to have generic messages as your starting point, take the time to tailor your message to your audience.

What makes a key message effective? How your messages can be effective? So targeted message from your audience. Delivering the same message to every audience is like trying to mail a letter to the whole town instead of a specific address. So, you have to find out the audience. What is your audience? Women group are your audience? Senior citizens are your audience? Children are your audience? So you have to identify the key groups, what are the key groups, number one.

Who is your audience, policy makers? Maybe the politicians, maybe the bureaucrats, the policy makers, rotary club, politician, colleges, school, media? So that is also very important, you should be aware your target audience. While it is fine to have generic messages as your starting point, take the time to tailor your message to your audience accordingly. Suppose you need to communicate your message to the children, accordingly you have to frame the messaging.

You have to communicate the message to the tribal population, so you need to change the language also. So, accordingly you make to plan as per the target audience.

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Developing targeted messages: An exercise



Generic Message: *Through herd immunity, vaccines benefit not just individuals but entire communities*

Tailoring the message for parents: Parents need to understand that when they vaccinate their children, they not only protect their own kids, but also those around them who cannot be vaccinated, like infants.

Tailoring the message for policymakers: By encouraging everyone in their constituencies to vaccinate, policymakers can ensure that the entire community – even those who cannot be immunized for medical reasons – are protected through something called herd immunity.

Developing targeted messaging and exercise. Generic messages through herd immunity, vaccines benefit not just individual but entire communities. So this is the message, so how you can tailor the message for parents for example. Parents needs to understand that when they vaccinate their children they not only protect their own kids but also those around who cannot be vaccinated, like infants.

So if they are vaccinating their kid, it means they are protecting the infants. This is the key message tailored for the parents. But the same message for the policy makers you need to reframe it. For example by encouraging everyone in their constituencies to vaccinate, policy makers can ensure that the entire community even those who cannot be immunized for medical reasons are protected through something called herd immunity.

So, for policy makers the message become different focusing more on their constituencies, for the parents it becomes different, similarly for other community also, other targeted audience also it will become different. So, you have to decide what kind of audience and the target audience is there.

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What makes a key message effective?



2. Newsworthy

What makes a message 'news-worthy'?

TOPICALITY: It's just happened

PROXIMITY: It's happening close to where I stay, it's happening in my city or my country

IMPACT: It will make a difference to my life

PROMINENCE: It's happening to someone I know or know of

INTERESTING: It's controversial, sensational or counterintuitive

Then what makes a key message effective? How your message can become very effective? It should be newsworthy. What makes a message newsworthy, means topicality it has just happened, it should be relevant as per the situation. Number two proximity, it is happening close to where I stay. For example if GAE is happening in UP and if I am sharing information in Delhi, it will have no use, so proximity is very very important.

If some Zika is happening in Rajasthan, the message should go to the Rajasthan. If KFD is happening in Karnataka region it should go to the Karnataka, it will have no value in the Bihar region. So proximity whether it is happening close to where I stay is happening, in my city at my own country that becomes very important. Dengue is again a big problem, where it is happening? Messaging should be tailored according to the problem and the local condition.

Impact, it will make a difference to my life, it should have some impact in your life. Prominence, it is happening to someone I know or know of and interesting. It is controversial, sensational or counterintuitive. So that should be the focus on creating a message and then it becomes effective.

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What makes a key message effective?

MEDIA ENGAGEMENT



3. Jargon Free

The more technical you get, the smaller your audience, even scientists from other disciplines will struggle to understand

General readers are more than willing to understand complexity—if you explain it clearly

And what makes a key message effective? It should be jargon free, so you should not use many difficult languages and scientific term, the more technical you get, the smaller your audience. Even scientists from other discipline will struggle to understand. So, if you are working in the Life sciences, if the mathematician comes he will be unable to understand. Similarly, our technical language even the mathematician or the other history people or the social background people they will not be able to understand.

So that we have to decide. General readers are more than willing to understand complexity if you explain it clearly, so we need to explain our issues very clear.

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TIPS FOR EFFECTIVE MESSAGES: CUBE-A TRICK

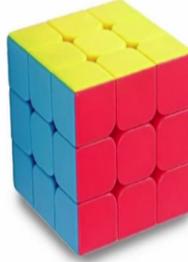


CUBE A – CONSISTENT

- Good messages require consistency and repetition
- Consistency is broader than just media interviews

CUBE A – BRIEF

- Brevity leads to clarity
- A quote in print should not be more than 20 - 30 words
- A quote for TV should not be more than 90 - 120 words: 15-20 secs



CUBE A – UNBURDENED

- Messages should be unburdened by two things:
- Too many words/ Simplify
 - Technical Jargon

CUBE A – EAR WORTHY

- Use short words and sentences
- Use everyday words
- Speak messages aloud

CUBE A – AUDIENCE FOCUSED

- Incorporate your audience's needs and values
- Tailored messages for specific audiences, maintaining consistency

So there are tips for effective message. This is a cube-A trick. Cube A means consistent. Good messages require consistency and repetition. Consistency is broader than just media interview. Then unburdened, messages should be unburdened by two things. Too many words, simplify it and technical jargon we have to remove it. And it should be brief. Brevity leads to clarity. So only focus point to the point, but no lengthy messaging.

A quote in print should not be more than 20 to 30 words. Quote for tv should not be more than 90 to 120 words or 15 to 20, the lesser the better. The quick, smart, bullet point anybody can pick up and ear-worthy. Use short words and sentences. Use everyday words. Speak message aloud and audience focused. Incorporate your audience needs and values, whether they need it, whether it can make any impact on their health.

And tailored message for a specific audience, maintaining consistency so that I have already explained, it should be as per the requirement of your target audience.

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Tips to remember when interacting with the media

1. There's no such thing as off-the-record

Anything you say before, during, or after the 'official' interview – including any telephone or email exchanges – can be quoted.

Then how you can interact with the media? So, there are certain tips to remember when you are interacting with the media. There is no such thing as off the records, sometimes the media people will say, 'Sir this is off the record', but there is nothing like off the record, everything is on the record. Anything you say before, during or after the official interview including any telephone or email exchange can be quoted. So be aware there is nothing off the record, whatever you are dealing, whatever you are discussing with the media it is always on the records, there is nothing off the record.

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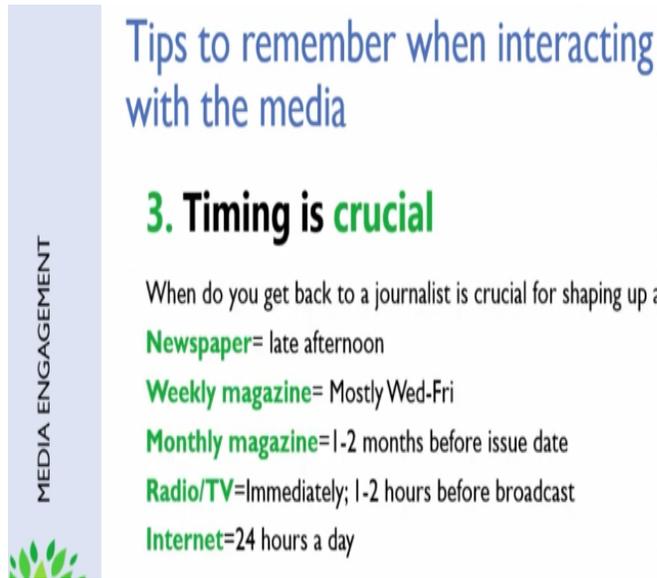
Tips to remember when interacting with the media

2. Simplify, simplify, simplify. Repeat, repeat, repeat

You should articulate a message or message support in almost every answer you ever give.

Second important tip is simplify, simply, simplify, repeat, repeat and repeat. So you should articulate a message or message support in almost every answer you give, it should be very simple and you should keep on repeating so that the journalists they can understand.

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Tips to remember when interacting with the media

3. Timing is crucial

When do you get back to a journalist is crucial for shaping up a story

- Newspaper**= late afternoon
- Weekly magazine**= Mostly Wed-Fri
- Monthly magazine**= 1-2 months before issue date
- Radio/TV**= Immediately; 1-2 hours before broadcast
- Internet**= 24 hours a day

Timing is also very crucial. When do you get back to a journalist is crucial for shaping your story. Most of the time the newspaper they print in the night. So late afternoon is the right time while you are dealing with the journalist, so they will ask the question in the evening, so you have to provide the answer immediately in late afternoon or in the evening. Weekly magazine mostly on Wednesday and Friday because the magazines come on Friday or Saturday.

Monthly magazine 1 or 2 months before issue. Radio, TV immediately 1-2 hours before the broadcast. Internet 24 hours a day. So timing is very very important while you are dealing with any kind of media whether it is a print media, digital media, social media, TV or internet.

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Tips to remember when interacting with the media

4. Know your rights

You can

- Offer to **fact-check** prior to publication
- Request **playback** of interviews
- Request questions in **advance**.
- **Limit** the time for the interview
- Seek **clarifications**

Then know your rights. So, offer two fact-check prior to publication, you can request whether there is authentic information, there is nothing wrong going in the media, so fact-check you can ask again. Request playback of interviews, so if there is an interview you can request if they can share. Request questions in advance, if you are busy, you are not able to answer you can ask the journalists or the media people.

I would be grateful if you can share your questions so that you can prepare the answers. Limit the time for the interview, there 5 minutes, 10 minutes, 15 minutes you should be clear about what time you can devote for the journalist. Then seek clarification. So these are the important tips which you should be aware.

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Tips to remember when interacting with the media

5. Mind your (body) language

For an in-person interview, your vocal tone and body language can enhance effectiveness of your words, your credibility and allow the audience to form a connection with you. Things like:

Energy, Eye contact, Gestures, Posture, Voice

And mind your body language is also very important while we are dealing with the journalists. For in-person interview your vocal tones and body language can enhance effectiveness, your words, your credibility and allow the audience to form connection with you. So while you are dealing with the journalists, you are giving an interview there should be a connect with the audience that is also very important. Energy, eye contact, gestures, postures and voice.

So this is very important. Body language; whenever we are giving any online or camera interview, the body language becomes very important. Now we have discussed about the media, media engagement, key issues, effectiveness, how you can engage with the media but the most important nowadays is the social media because of the social media even we are sitting here today. So WhatsApp messages, Facebook, Twitter, this becomes very important.

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MEDIA ENGAGEMENT

SOCIAL MEDIA STRATEGIES

Social media is one tool in a larger communication strategy. Consider your communication goals when developing social media activities. As with all media outreach, the keys to an effective social media presence are to:

- Identify your target audience.
- Determine your objective.
- Select the appropriate channel for your message.
- Stipulate and plan your resource investment.



So what are the social media strategies? Social media is one tool in a larger communication strategy. Consider your communication goal when developing social media activities. As with all the media outreach, the keys to an effective social media presence are to identify your target audience number one. Determine your objectives what you want to convey. Select the appropriate channels for your messages and stipulate and plan your resource investment. So, this is how the social media strategy you need to develop.

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MEDIA ENGAGEMENT

SOCIAL MEDIA

We can broaden our audience, encourage interaction, and improve access to reliable, scientifically based health messages by using social media technologies like Facebook, Twitter, and text messaging. Social media can aid in achieving the following objectives:

- Disseminate health and safety information in a timelier manner.
- Increase the potential impact of important messages.
- Leverage networks of people to make information sharing easier.
- Create different messages to reach diverse audiences.
- Personalize health messages and target them to a particular audience.
- Engage with the public.
- Empower people to make safer and healthier decisions.



SOCIAL MEDIA PLATFORMS









In sequence: Twitter, WhatsApp, Instagram, Facebook, Koo

Source: CDC Guide to Writing for Social Media. Centers for Disease Control and Prevention, 2019

We can broaden our audience, encourage interactions and improve access to reliable, scientifically based health messages by using social media technologies like Facebook, Twitter,

text messaging. Social media can aid in achieving the following objectives. What we can achieve through the social media is number one; disseminate health and safety information in a timelier manner.

So immediately you can send a message to a large group of population in a very quick manner, in a fraction of second you can just send a WhatsApp to 100 people, so you can convey the message. Increase the potential impact of important messages. So if there are important message it can have some impact because large population nowadays today is having the internet connection. Leverage networks of people to make information sharing easier.

Create different messages to reach the diverse audience. Personalize health messages and target them to a particular audience. Engage with the public and empower people to make safer and healthier decision. So this is how the social media is very important.

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And again, there are certain tips for effective social media engagement. How your social media engagement can be effective? Go where the people are. Social media can help reach people where they are. For example in 2020, they were 518 million social media users in India, so you can reach to a large amount of population through social media. Make sure messages are science oriented. Science-based as with any effective health communication.

Messages developed for dissemination through social media channel should be accurate, it should be consistent and science based. So that you have to decide that it should be accurate, science based and effective. And encourage participation, two-way conversation can foster meaningful communication with your audience that can help to facilitate relationships, sharing and interaction.

And leverage network, by strategically leveraging these established networks, you can expand the reach of your health messages, and last but not the least is evaluate your efforts. Monitoring trends and discussion on social media network can also be a valuable way to better understand the current interest. So whatever messaging you are doing whether it is having any impact, where you have certain issues, where there are gaps, where you can improve your social media messaging. So this is also very important.

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- ✔ *UNDP's Engagement with the Media for Governance, Sustainable Development and Peace. Oslo, UNDP, 2019.*
- ✔ *United Nations Community Engagement: Guidelines On Peacebuilding And Sustaining Peace, New York, United Nations, 2020*
- ✔ *CDC Guide to Writing for Social Media. Centers for Disease Control and Prevention, 2019*
- ✔ *The Health Communicators Social Media Toolkit, Centers for Disease Control and Prevention, 2011*

And these are the certain references, you can read these references. You can note down these references and you can go for further reading. Thank you so much for this module, but we have also certain case studies. I think these cases studies they are very important and you will be able to understand about how we can engage with the community, how we can engage with the media and how we can show the impact. So, these are certain 3-4 case studies I am going to elaborate about the community based intervention in disease control and the role of health communication.

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Case Study - 1

Kheda Malaria Project: Connecting Science with the Society

So first case study is about the Kheda malaria project, connecting science with the society because we were talking about the community engagement. So how you can engage the community? How you can develop your plan, strategies and show the impact.

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Problem Statement

- Malaria outbreak in few villages of Kheda District in Gujarat in 1980s
- Many deaths were also reported
- ICMR Team on request of State Govt was sent
- Problem of Insecticide resistance in mosquitoes, Drug resistance in parasite
- Poor health infrastructure, lack of human resources, Inadequate awareness about the disease



So, this was a demonstration project in Kheda district of Gujarat. So there was a problem. This is the problem statement to malaria outbreak happened in 1980s. There were many deaths and ICMR team on request visited to the State government and the other the problem of insecticide resistance because for the mosquitoes we use the insecticide like DDT, BHC and malathion. The mosquitoes were triple resistant against the insecticides.

And there was a drug resistance in the parasite this was a big problem. Poor health infrastructure, lack of human resources, inadequate awareness about the disease in the community. So, this is the problem statement and how we tackled?

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ICMR Interventions

- Source Reduction
- Minor Engineering works
- Biological Control
- Community Participation
- Health Education
- Robust IEC Program
- Inter-departmental Coordination
- Social Forestry and other income generating Schemes



So we developed certain intervention for the control of the mosquitoes. Number one source reduction, eliminate breeding sources, minor engineering methods, biological control through the use of fishes so that they can eat the mosquito larvae. Community participation was the key component, key tool, how the communities they can involve in the program, how we can create awareness, how we can engage the community?

Health education was again community related because you need to educate the people. Robust IEC program. I was discussing about the IEC, so it was the robust IEC program. Inter-departmental coordination because we were taking the support from the other departments education, irrigation, social forestry, so they were all working together. And the social forestry and other income generating schemes were also used.

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Health Camps: Creating Awareness



Leveling of low lying areas

Filling of roadside borrow pits

Community Participation

So these were the community related program. We arranged the health camps in the schools so that the students can get aware about the problem. What are the mosquitoes? How they look? Where they breed? How they can themselves control? Then we started taking and creating the awareness in the society through video shows, through group discussion, through lady health visitors, through Mahila mandal.

So all these community awareness and then we started taking the help of the community through shram-dans in the elimination of mosquito breeding as you can see, the before and after impact after the community engagement.

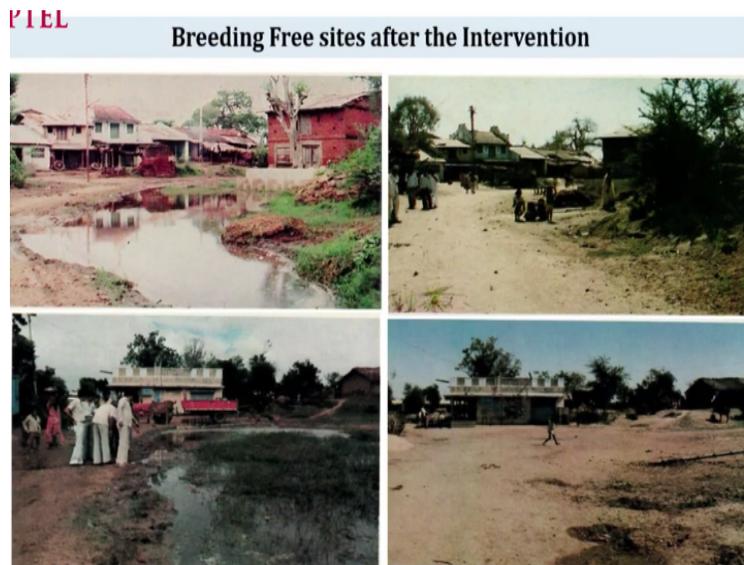
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Health Education - Social Work



Then we did the health camps demonstrating the malaria parasite, the mosquitoes, how it can be controlled? And communities they were involved in the leveling of the ditches, filling of the mosquito breeding sites.

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And you see this is the picture. On the left side there are mosquito breeding sites and through the support from the community they all were removed.

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Health Communication: Strategies

- School Health Education: Live demonstration, health camps, KABP
- Women Help Group : Lady Health Visitors for creating awareness
- Demonstrations in villages about mosquito control activities
- Community participation in mosquito control activities-shram-dans
- Development of IEC Material- pamphlets, brochures, films, exhibitions
- Use of Media: Print and Electronic, newspaper articles, programs on Doordarshan, Press Conference, Media interaction, etc
- Visits of Villages heads to NIMR laboratories
- Door to Door Visits for health awareness

So health communication strategies for school health education, live demonstration, health camps and knowledge attitude behavior and practices. Women help group, lady health visitors for creating awareness. Demonstration in the villages about the mosquito control activities. Community participation was ensured for mosquito control activities through shram-dans. Development of IEC material through pamphlets, brochures, films and exhibitions.

Use of media, print and electronic, newspaper articles, programs on Doordarshan, press conference, media interaction on a regular basis. And visit of villages to the NIMR laboratories, so villages they were visiting our laboratories and getting the information. And door-to-door visit for the health awareness.

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What worked

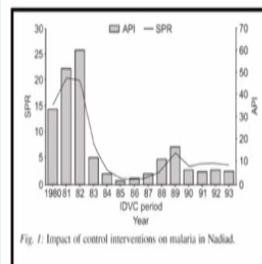
- Early Diagnosis and Prompt Treatment
- Community Awareness
- Health Education
- Source Reduction and Biological Control
- People's participation
- Inter-departmental coordination
- Malaria control was made a social movement

And what worked is it was early diagnosis and prompt treatment, community awareness, health education, source reduction and biological control, people participation, inter-departmental coordination and malaria control was made a social movement.

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Key Successes

- Drastic decline in malaria incidence
- Enhanced awareness among the population after intervention
- People accepted the income generating schemes as a village development activity
- Students disseminated the information to their family members
- Overall improvement in sanitation and environment
- Holistic way of malaria control through Gandhian way of Life



And the key success, drastic decline more than 90 percent in the malaria incidence. Enhanced awareness among the population after intervention. People accepted the income generating scheme as a village development activity. Students disseminated the information to their family members. Overall improvement in the sanitation and the environment of the society and the holistic way of malaria control through Gandhian way of life.

So this is the case study number 1 where the malaria control was demonstrated through the use of the community engagement and the media management. This is again a very successful case study.

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Case Study - 2

DASTK Program for the Control of JE/AES in Gorakhpur Region

Case study number 2 about the DASTAK program in the control of KE/AES in the Gorakhpur region.

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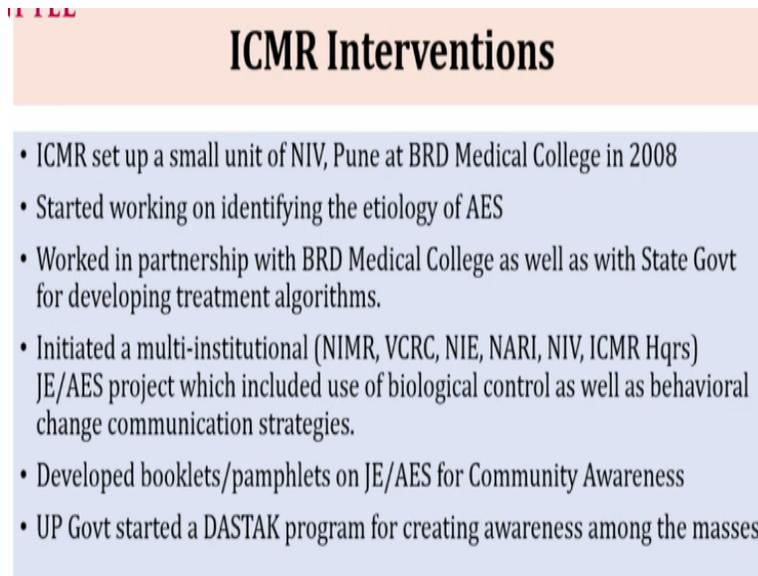
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Problem Statement

- Gorakhpur Region (which includes 4 districts of GKP division and 3 distt of Basti Division) has been known for the recurring outbreaks of JE/AES
- Mainly the pediatric population gets affected
- There has been acute shortage of health infrastructure and diagnostic facilities
- Etiology of AES was largely unknown
- People had believed in traditional healing mechanisms and going to traditional healers
- There was completely lack of awareness

We all know Gorakhpur is known for the Japanese Encephalitis and the AES. Mainly the pediatric population gets affected. There has been acuter shortage of health infrastructure and diagnostic facilities. Etiology of AES was largely unknown. People believed in the traditional healing mechanism going through traditional healers and there was completely lack of awareness.

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ICMR Interventions

- ICMR set up a small unit of NIV, Pune at BRD Medical College in 2008
- Started working on identifying the etiology of AES
- Worked in partnership with BRD Medical College as well as with State Govt for developing treatment algorithms.
- Initiated a multi-institutional (NIMR, VCRC, NIE, NARI, NIV, ICMR Hqrs) JE/AES project which included use of biological control as well as behavioral change communication strategies.
- Developed booklets/pamphlets on JE/AES for Community Awareness
- UP Govt started a DASTAK program for creating awareness among the masses

ICMR set up NIV unit in BRD Medical College, started identifying the etiology of AES. Worked in partnership with the BRD Medical College with the state government developed treatment algorithm. We started a multi-institutional project involving 7-8 ICMR institutes. Developed booklets, pamphlets, JE,AES material for the community awareness and the up government started the DASTAK program knocked the door for creating awareness among the masses.

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Health Communication Strategies

- Sensitize the community for water stagnation
- Awareness about safe drinking water
- Health Education material developed by ICMR-NARI and distributed to the Community
- Avoid Open defecation
- Avoid storing fire-woods
- Early diagnosis if having fever
- UP Govt started DASTAK program for creating awareness on CDs



So health communication strategies included the sensitization of the community for water stagnation. Awareness about the safe drinking water. Health education material developed by the ICMR-NARI and distributed to the community. Avoid open defecation. Avoid storing of fire-woods. Early diagnosis if having fever and UP government started DASTAK program for creating awareness on communicable disease.

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There was intersectoral coordination with different department, industry department, rain water harvesting, medical help, education department.

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EDUCATION DEPARTMENT

- Students are the backbone of the society and future of India.
- They can be trained about malaria and its control and can be involved in awareness campaigns
- Role of Health education in School children has been found very useful in malaria control in Kheda Project

INVOLVEMENT OF SCHOOLS



Awareness campaign



Health Education

And school rallies, involvement of students.

(Refer Slide Time: 49:36)

MASS MEDIA

Role of Media in transmission of correct information and making people aware is very important.

Both print media and audio-visual can play important role in terms of putting slogans, advertisements or telecasting of documentary and health awareness campaigns.

The partnership of both print and audio-visual media is important as many documentaries on mosquito control in English and local languages were made and telecasted by the Doordarshan and other agencies as well as activities of the project work were regularly published in local news papers

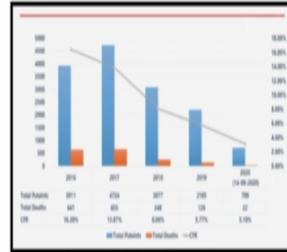


Role of mass media, journalist involvement.

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What worked

- Strengthening health Infrastructure
- Capacity building
- Research and Diagnosis
- Inter-departmental coordination
- Political will
- Community Awareness
- People's participation



And it all worked and they were strengthening the health infrastructure, capacity building, research and diagnosis, inter-departmental, political will, community awareness and people participation and it help in the reduction of more than 90 percent of the JE, AES in the Gorakhpur. This is again a case study.

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Case Study 3

Managing the upsurge of Dengue in Delhi

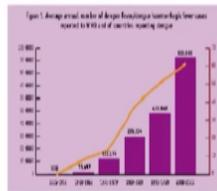
The third study is about the dengue in Delhi.

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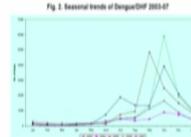
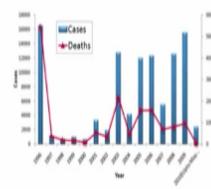
Problem Statement

Dengue Statistics

- 2.5 billion people (2/5 of the world population at risk)
- 50 m infection/year
- Up to 5 lakhs people annually contract more serious cases of dengue
- Estimated 21000 people die
- 653000 DALYs are lost each year



Did not leave even the PM House



The global dengue burden has increased > 4 fold in last 30 yr

So dengue we all know is a big problem, dengue across the globe and even in Delhi also.

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Political Will : Could it Work?

JE/AES

- DASTAK
- Creating Awareness

UP, Govt

Dengue

- Har ravivar dengue par war
- 10 o'clock, 10 minutes, 10 Sundays

Delhi Govt

And Delhi government they have started a program 'Har Ravivar, Dengue Par Vaar'. This is again a community awareness program '10 Baje, 10 Minute, 10 Ravivar'. So similarly if you have to deal with any public health program the community engagement becomes very important.

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Self Help is the best Help



Self-help is the best help because you can take care of many of the problems.
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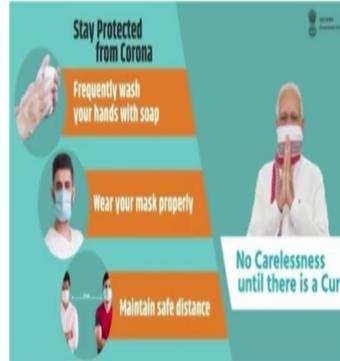
Case Study 4

Managing COVID-19 Pandemic

And the case study 4 is about the managing Covid-19 pandemic.
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Community Based Approach

- Use of Face Mask – Appropriately
- Hand Hygiene
- Avoiding Crowded places
- Sanitization
- Vaccine hesitancy



This was again a community oriented program and the leadership was taken by the prime minister himself. Use of face masks. He advocated from the top that the face mask has to be used for the prevention of viral infection and proper face mask they can use. Hand hygiene is again very important issue. Avoiding crowded places, sanitization, vaccine hesitancy.

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And the fight continues.....



Thank

And we all know this all had a great impact on the Covid-19. So these are all community related activities which really have worked in the management of the disease and their management.

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TEL Tackling COVID-19 Pandemic: ICMR Experience



Indian Council of Medical Research (ICMR)
Department of Health Reserach
Ministry of Health and Family Welfare, Govt of India

And the last point which I am going to discuss about because I belong to ICMR what ICMR did in the Covid-19 management because we all know Covid-19 is again a case of One health because we started with the one health is animal health, environmental health and the human health and the SARS-CoV-2 it is believed jumped from the bat to the human being. So we are having deforestation and the animal and human induction are happening, there is a climate change. Multiple things are happening that is how the one health becomes very important.

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ICMR



- 1911: Founded as Indian Research Fund Association (IRFA)
- 1949: Renamed as Indian Council Of Medical Research
- Apex body in India for biomedical research
- One of the oldest medical research bodies in the world
- Conduct, coordinate and implement medical research for the benefit of the Society
- Translating medical innovations in to products/processes and introducing them in to the public health system

So we all know ICMR is one of the oldest organizations working since last 111 years and we have done extraordinary work in the management of the tuberculosis, leprosy, malaria, lymphatic

filariasis, reproductive health, nutrition, many areas and has also shown in dealing with the outbreak and epidemics. We have a BSL-4 for laboratories. Nipah virus was there, Zika outbreak was there and recently we did extraordinary work in the area of the Covid-19.

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India's Response to COVID-19

Role of DHR-ICMR

So I am going to discuss about the India's response to Covid-19, role of DHR and ICMR.

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NPTEL

COVID-19 Pandemic

Largest democracy recalibrated its intervention as needed

- Serious from the beginning
- Whole of government approach
- Calibrated, proactive, pre-emptive, graded RESPONSE
- Science driven with best practices and evidence based
- Strong leadership with excellent communication
- Test-Track-Treat was our mantra - not herd immunity!



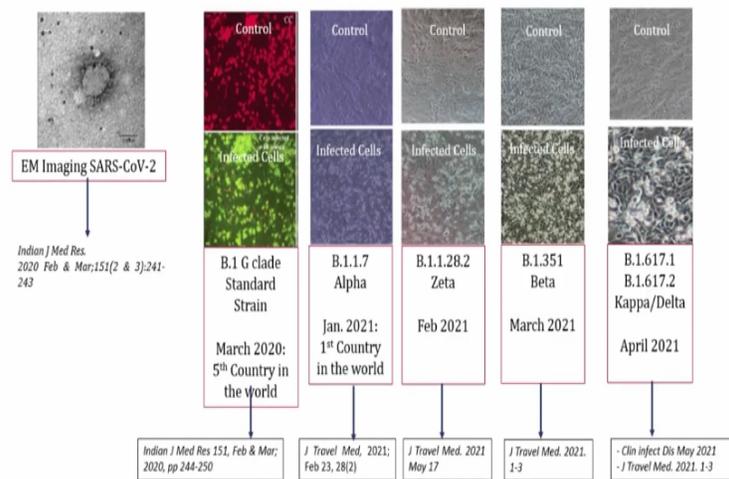
So Covid-19, we all know India is the largest democracy but even then we did well across the globe while we were dealing with the Covid-19 and India was serious from the beginning. It was the whole of government approach. Calibrated, proactive, pre-emptive, graded response was

there for the Covid-19. And India's Covid response was science driven with best practices and evidence based. There was a strong leadership with excellent communication.

Prime minister was communicating how to use the mask, how to prevent from the virus, how to avoid ‘Do gaj duri, hai bahut jaruri’. So all these messages were very important. And test-track and treat was our mantra, not the hard immunity. We were focusing on a test-track and treat.

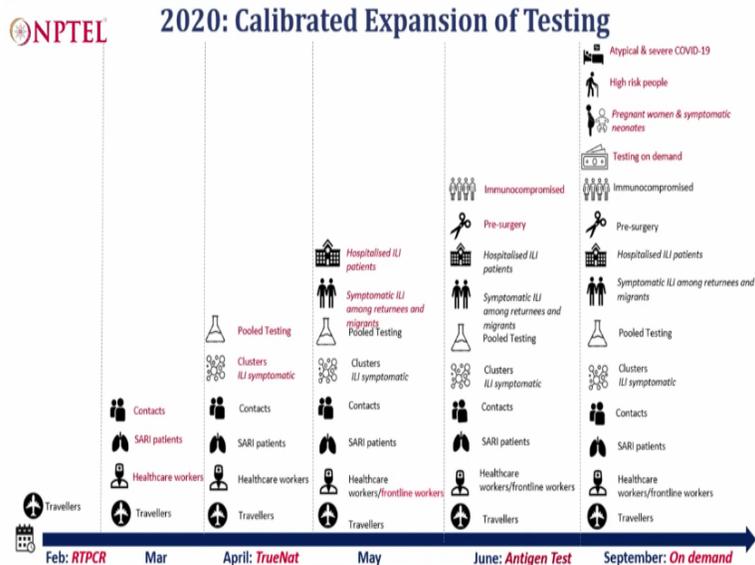
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NPTEL Isolation & Characterization of SARS-CoV-2



So we were the first country in the world to isolate the virus. This was our first biggest achievement. Once we were able to isolate the virus, we were able to, develop the diagnostic kits, we were able to develop the vaccine. So, first thing we did was isolating the virus and we were the fifth in the world.

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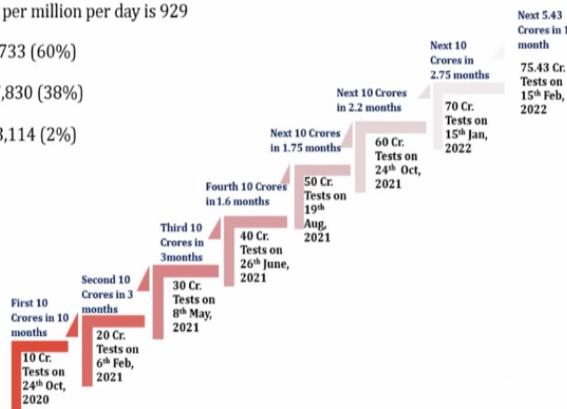


Then we started calibrating the testing. Earlier we were testing on the travelers, healthcare workers, SARI patients, their contacts. Then we expanded our testing strategy. Pooled testing was there. Then we included the hospital-based ICU patient. So testing strategy was gradually expanded as per the need of the hour. So this we developed within the ICMR.

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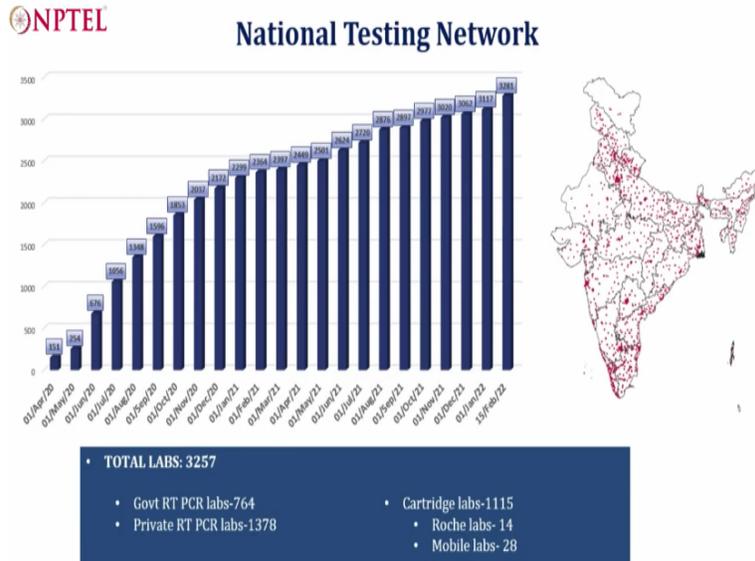
NPTEL COVID-19 Testing report 15th February 2022

- 75,42,84,979 (~ 75.43 Crores) samples tested till 15th February 2022 (Source : <https://icmr.gov.in>)
- 12,51,677 tests conducted on 15th February 2022 Source : <https://cvanalytics.icmr.org.in>)
- National Tests per million per day is 929
- RT PCR- 7,60,733 (60%)
- Antigen- 4,67,830 (38%)
- Cartridge- 23,114 (2%)



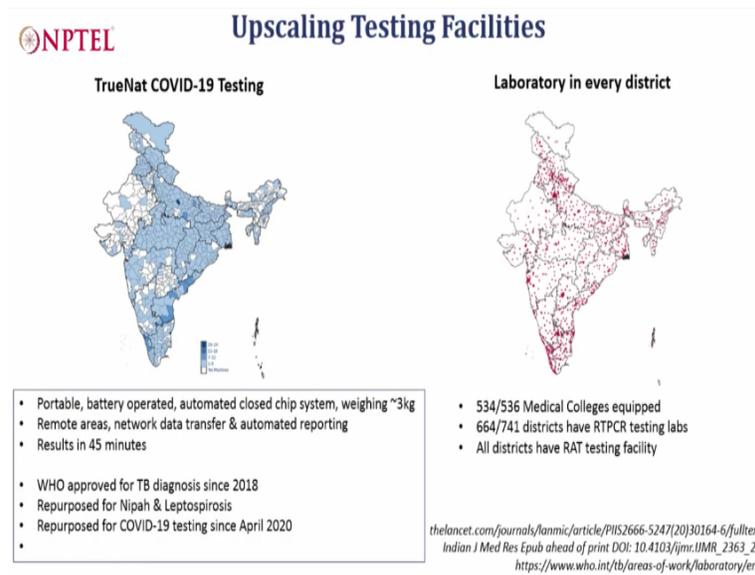
In the beginning we were having only one lab, now we have more than 3000 lab testing enhanced and we have tested more than 75 crore test and more than 12 lakh tests conducted and National test per million is 929, RT PCR 7 lakhs tests. Antigen testing was also started.

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So testing we enhanced to a significant level from one lab in March 2020 to more than 3000 labs today.

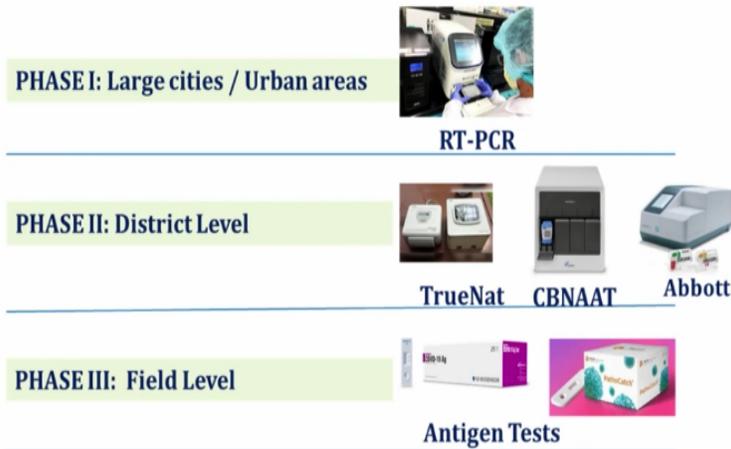
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Then testing facility across India from the remote part of the country from Andaman Nicobar to Leh at Ladakh, from the North East to any area. So testing is not a problem and it was expanded in a year throughout the country and we also rocked in the TrueNat and the CBNAAT and the rapid antigen test also. So, anybody can go for the testing.

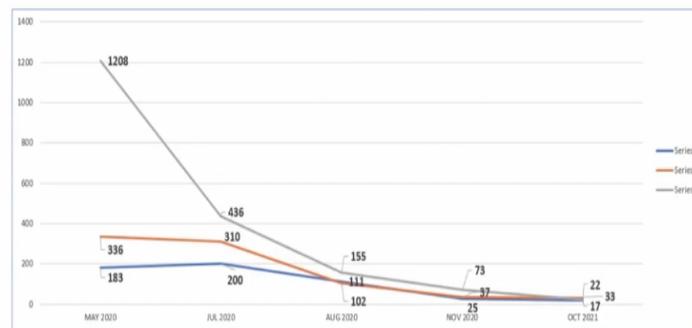
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Increasing Access to Diagnosis



Initially in the phase 1 there were large cities we were using the RT PCR. At district level we started the TrueNat, CBNAAT, and in the field the antigen test. So different platforms were there.
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Reduction in Cost of COVID-19 Diagnostic Commodities



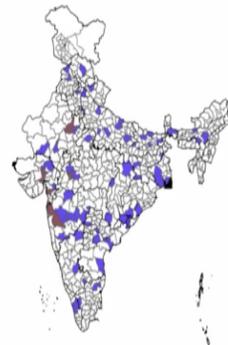
- Restricted quantities were allowed to be exported since July, 2021. Currently export is made free for all COVID-19 diagnostic commodities.
- Per day production capacity of RT-PCR kits is 80 lacs.
- 755 Kits have been validated and approved by ICMR.
- All kits and equipment are available on GEM.
- Rate dropped of RT-PCR Kits from Rs 1747.00 in April, 2020 to Rs 72.00 in October, 2021.

Earlier the cost was very high, but with the local support, from the make in India technologies, we developed our own kits, the cost came down.

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National Community Sero-survey

- Estimate prevalence in general population
- 70 randomly selected districts
 - 21 states
 - 24,000 adults
 - 7000 HCWs (NCS 3)



Results (Nationwide % seroprevalence)

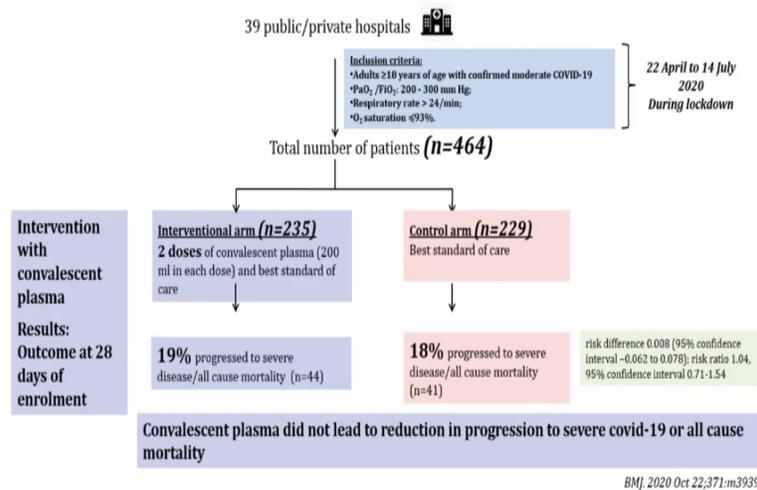
- First NCS: 0.7%
- Second NCS: 7.1%
- Third NCS: 24.5%
- Fourth NCS: 67.6%

Reference:
 PLoS Med. Published Online; November 29, 2021
<https://doi.org/10.1371/journal.pmed.1003877>
 Lancet Glob Health. Published Online; January 27, 2021
[https://doi.org/10.1016/S2214-109X\(20\)30544-1](https://doi.org/10.1016/S2214-109X(20)30544-1)

Then we did the Covid surveys; Serosurveillance. Sero-survey 1, 2, 3 and 4 and in the first survey it was 0.7 percent prevalence, in second it was 7.1, in the third 24 percent and in the last survey fourth sero-survey it was 67.6 percent. So that was very useful while we were developing strategies for the lockdown and unlocking the country.

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Convalescent Plasma (PLACID Trial)



We also showed that the plasma therapy is not working. Trials were done and to the global world we showed that the plasma is not working.

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Similarly for the other drugs we did lot of testing. Then we also were one of the pioneers in developing our own indigenous vaccine, COVAXIN was developed with the support from the NIV Pune and Bharat Biotech and the Serum Institute with the support from the Oxford University. The two vaccine they were developed within India and they were started.

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COVAXIN
Scientific Publications

PRECLINICAL STUDIES	CLINICAL TRIALS	
<p>MOUSE, RABBITS & RATS https://doi.org/10.1016/j.isci.2021.102298</p>	<p>PHASE 1: 375 VOLUNTEERS DOI:https://doi.org/10.1016/S1473-3099(20)30942-7</p>	<p>THE LANCET Infectious Diseases</p>
<p>MONKEYS doi: 10.1038/s41467-021-21639-w</p>	<p>PHASE 2: 380 VOLUNTEERS DOI:https://doi.org/10.1016/S1473-3099(21)00070-0</p>	<p>THE LANCET Infectious Diseases</p>
<p>HAMSTERS https://www.sciencedirect.com/science/journal/25890042/24/2</p>	<p>PHASE 3: 25,800 VOLUNTEERS</p>	<p>THE LANCET</p>
<p>COMPARATIVE IMMUNOGENICITY & PROTECTIVE EFFICACY OF 18 GLOBAL VACCINE CANDIDATES IN MONKEYS: COVAXIN IN TOP 6 DOI: 10.4103/jimr.11MR_4431_20</p>	<p>India Scripted History WHO EUL on 3rd November 2021</p>	

We published very high quality paper in The Lancet on the COVAXIN.

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NPTN Neutralization of SARS-CoV-2 Variants by COVAXIN



	Clade G (B.1) D614G (standard strain)	0 <i>Journal of Travel Medicine, 2021, 1–3 doi: 10.1093/jtm/taab051</i>
Variants of Concern (VOC)		
	B.1.1.7 / Alpha	0 <i>Journal of Travel Medicine, 2021, 1–3 doi: 10.1093/jtm/taab051</i>
	B.1.351 / Beta	3 fold reduction <i>MS under review in JAMA open network</i>
	B.1.617.2 / Delta	3 fold reduction <i>MS under review in JAMA open network</i>
Variants of Interest (VOI)		
	B.1.1.28.2 / Zeta	2 fold reduction <i>MS accepted in Clin Infect Dis</i>
	B.1.617.1 / Kappa	2 fold reduction <i>MS accepted in Clin Infect Dis</i>

Work done by ICMR-National Institute of Virology, Pune

Then we did a study on the neutralization of SARS-CoV-2 variant of concern whether the vaccine is effective against the variant of concern.

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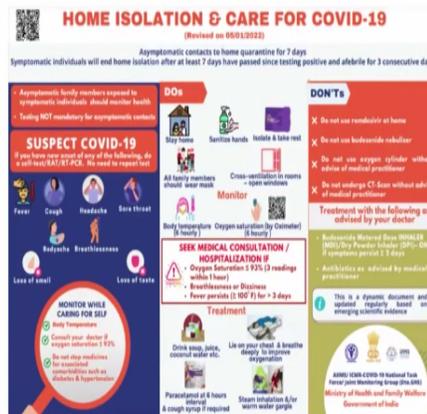
Reach Out To Hard to Reach: i-DRONE

- Delivered a total of **17,275 units** vaccines and medical supply
- Carried out in **difficult geographical terrains** including land, island, foothills and across the hills.
- **Eighty drone sorties** in Manipur and Nagaland
- Covered a total of **735 kms** (aerial distance) in approximately **12 hours** (equivalent to 2000 kms & 50 hours)



Then we first time used the drones for the delivery of vaccine and delivered around 17,275 units of vaccine using the drone in difficult geographical terrains including land, island, foothills. Eighty drones sorties in Manipur and Nagaland they were used. Covered more than 735 kilometers of distance. So that is how the Covid success story is there.

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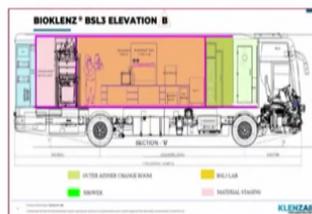


Also home isolation and the home care for the Covid-19, all these guidelines they were made available on the ICMR website.

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Mobile BSL-3 Laboratories

- Can reach and operate in the **remotest locations** of the country
- Equipped with **state-of-art technology** essential for full standalone operation
- Would propel the nation's scientific and diagnostic capability: *a level unseen within Asia*



Launched in Nasik on 18th Feb 2022, Maharashtra by Hon'ble MoS, Health

And then recently when we are talking about the risk communication in the pandemic preparedness, so government of India has recently launched and decided in the budget that we will have now four NIVs, zonal NIVs. So instead of having one NIV in Pune we will have three more NIVs in Dibrugarh, in Jabalpur in the Northern region so that the NIV Pune is not burdened, and in the future if there is any pandemic, we can be prepared to deal with such outbreak and epidemics.

And mobile BSL-3 lab has also been launched, two labs, one is an NIV Pune and one is in Gorakhpur, so in case in the remotest location if there is any outbreak epidemic. This is a state-of-art technology. It can reach within a daytime anywhere and we can start doing testing there only. So, this mobile BSL-3 is again an arsenal so far as we are talking about the pandemic preparedness.

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JPTEL

Ten COVID-19 Highlights

- Countrywide scaling up of diagnostic laboratories (1-3,000) within a year
- Diagnostic Kits Self Sufficiency (100% import to export)
- Nationwide Sero-surveys (4 Rounds)

- Validation of Diagnostics & handholding of local manufacturers
- Indigenous Vaccine Development (Virus Isolation to Phase III)
- Preclinical Animal Studies of International Standards
- Extensive National & International COVID research (>250 peer reviewed articles)

- Treatment/ Diagnostic Guidelines & Public Health Advisories
- Socio-behavioural Research on Stigma, Vaccine Hesitancy & Mitigation
- Innovative Service Delivery (Drones)

So Covid-19 highlights include the countrywide scaling of the diagnostic laboratories, more than 3000. Diagnostic Kits Self Sufficiency 100 percent import to export. Nationwide sero-surveys. Validation of diagnostic and handholding of local manufacturers. Indigenous vaccine development, virus isolation to phase 3. Pre-clinical animal studies of international standards. Extensive national-international Covid research.

Treatment, diagnostic guidelines, public health advisories. Social behavioural research on stigma, vaccine hesitancy and mitigation. An innovative service delivery including drones. So, these were the major highlights while we were dealing with the Covid-19.

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India's Fight Against Covid

- India achieved the feat for 1.4 billion people
 - Largest & fastest vaccine drive ever
 - >96% Adult population 1 dose, >78% Fully vaccinated
 - >48% women vaccinated
 - > 50% vaccination in rural areas
- This story is an example for the Global South
- Testing Scaled up in record time
- Vaccine deployed within 10 months
- >170 M doses delivered in record time
- Extensive contribution to world scientific literature
- Large scale export of testing kits & vaccines

And India's fight against Covid. India achieved the feat of 1.4 billion people. Largest and fastest vaccine drive ever. More than 96 percent adult population, 1 dose, 78 percent fully vaccinated. More than 48 percent women vaccinated. More than 50 percent vaccination in rural areas. This story is an example for the global South. Testing is scaled up in record time. Vaccine deployed within 10 months.

More than 200 million doses delivered in record time. Extensive contribution to world of scientific literature, large scale export of testing kits and vaccine.

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Successful >1.5 Billion Doses: How?

- Political will strong from top to bottom
- India has successful UIP for decades
 - 27 M newborns, 100M Boosters /year
 - 28,000 cold chain facilities
 - 2.3 M ASHA frontline workers, millions of doctors/nurses/ANM
 - 348,000 public & 28,000 private vaccination centres
- Vaccine manufacturing superpower: SII, BB, BioE, Cadila, Panacea
- IT Prowess: Digitally monitor vaccination: CoWin open source platform
 - Appointments, scheduling, digital QR certificate
- Peoples participation: SHG, local govt, sophisticated digital strategies

Successful 1.5 billion doses. So, this is how the success of Covid-19 have been so far as the ICMR, DHR and the Government of India is concerned.

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The slide features the NPTEL logo at the top left. It contains a news article snippet with the headline "Coronavirus | No specific drug, vaccine for COVID-19 yet, says ICMR" and a photo of a man speaking. Below the article is the ICMR logo and a document titled "ICMR Media Policy". To the right is a vertical flowchart with four steps:

Media Management

1. Setting up Communication Unit at Hqrs
Identifying Nodal Communication Officers at ICMR Institutes
2. Capacity building through media, crisis communications and social media training
3. Developing Media and Crisis Communications Policies
Developed a COVID-19 Media Policy
4. Developed and mapped journalists at the regional, national and international level
Created WhatsApp group of journalists

Additional activities listed at the bottom of the flowchart include: Media Interaction/Press Conference/Media Briefing/Press Release and Opinion-editorials by leadership.

And what we did for the media management and the health communication during Covid-19. We all know besides the pandemic there was endodermic. Huge amounts of information was coming. There was a lot of misinformation, fake news. How we were dealing with the fake news, misinformation while we were dealing with the Covid-19? So we have already created a communication unit in ICMR and we have identified nodal communication officers in each and every ICMR institute.

So we were having a network of communication officers in each and every ICMR institute. We were doing a regular capacity building on media, crisis communication and the social media so that our scientists they are aware how to deal with the journalists, how to communicate with the media. We created a separate webpage on the ICMR site so that the relevant evidence-based information is available.

All the guidelines, treatment protocols they were available on the ICMR website. We developed the media and crisis communication policies. We developed a Covid-19 media policy separately for the Covid-19 media policy who can interact with the media, whom should they speak, who will be the spokesperson for the Covid-19 from the ICMR. So we identified and decided who is

going to speak. Developed and mapped the journalists at the regional, national and international level.

So we were having the database of journalists at the national level, regional level, international level. Created a WhatsApp group so that immediately we can share the information on the Covid-19. Regularly we were having media interaction and the press conference, media briefing were happening on a regular basis initially at the ICMR, then at the ministry level. Press releases we were doing regular basis.

We were issuing the press release and sharing the information on the Covid related research what is happening new, what is new now, how you can avoid from the fake news, misinformation, this is fake news, this is not correct. So we were informing the community and we were putting on the website also. Opinion editorials were regularly being published from the leadership, from the DG-ICMR or from the other experts.

So that is how we were dealing with the Covid-19 from the research point of view, from the laboratorie's point of view. from the diagnostic, from the development of vaccine and engaging with the community, engaging with the media, sharing the information and that is how India has been successful in dealing with Covid-19 and ICMR played an important role. That is how we have dealt with dealing with many of the outbreak and epidemics.

And I think in today's session, we have touched all these points. Number one, One health. One health is really very important because of the climate change, because of the urbanization, because of the deforestation. Now many of the diseases which are of animal origin they are happening in the humans because we are closely interacting with the humans, we are destroying the animal habitation, deforestation is happening, climate change is happening, so many other diseases.

We can expect outbreak, epidemics, and pandemics like Covid-19, but we should be prepared and we should engage with the community. We need to create awareness among the community so that communities they can be used as a model, they can also be engaged, they can help in your

program, this is very important. Similarly media; media management is also very important, we can take the support from the media.

And they can serve as a tool to disseminate our information, the science-based information from the lab, to the field, to the society. So that is how I think this is a very interesting topic, very interesting subject and you will be happy to complete all the modules. This was only on the community engagement and the media management, but you will love to read the other modules also. Thank you so much and wishing you all the very best.