CHAMPS

Building Knowledge.
Saving Children’s Lives.
Agenda

Social-Behavioral Sciences (SBS) Overview
• SBS Research
• Community Engagement

Case Examples – Qualitative Rapid Assessments (QRAs)
• Bangladesh
• Ethiopia
• Mozambique
• Sierra Leone

Case Examples – Community Engagement Involving DeCoDe
Findings
• Sierra Leone
• Mozambique
• Mali
• Bangladesh

Q&A
Social-Behavioral Sciences Overview - Research

Formative Phase
Feasibility study - large-scale phenomenological study employing thematic methodologies
• Acceptability
• Practicality
• Implementation

Qualitative Rapid Assessments (QRAs)
Topic-specific and site-specific studies employing a quicker framework methodology
Social-Behavioral Sciences Overview – Community Engagement

PICK-CHAMP

Objectives during implementation phase
- Build partnerships with MCH leaders/organizations
- Develop feasible MCH health initiatives
- Develop communication mechanisms
- Demonstrate respect/appreciation

Objectives after MITS commences
- Rumor surveillance
- Community feedback
- Community input on data to action
Case Examples: Qualitative Rapid Assessments (QRAs)
Bangladesh, Ethiopia, Mozambique, Sierra Leone
QRA Case Example: Bangladesh
Decision Making Process & Contributing Factors with Consent for MITS

Background:
Since the inception of MITS (September 2017), the site has been conducting interviews with family decision-makers to understand the contributing factors of the decision-making process to consent for MITS at different time intervals and need basis.

Assessment Points:
1. Recall the contents of the consent
2. Decision-making process to MITS consenting
3. Reasons for MITS consent/refusal
4. Concerns reported by the participants
5. Experience sharing MITS approach with others
6. Intent to participate in MITS in future
7. Exposure to CHAMPS in community and when in hospital
QRA Case Example: Bangladesh

Decision Making Process & Contributing Factors with Consent for MITS

Actionable Recommendations:
1. Strengthening communication/rapport with family by MITS team (ward round with live patients, identify family before leaving hospital)
2. Before consent approach (ensure following mourning period)
3. During consent approach (ensure family understood MITS method, duration and result sharing time)
4. Reinforce community engagement (refresher village meeting, follow-up family over phone)

Supplementary:
1. Community suggestion to share MITS aggregated result
2. Opinion on Baliakandi Community MITS approach extended timeframe
3. Feasibility of MITS facility in mobile van
QRA Case Example: Ethiopia

Rumor Surveillance

Rumor that CHAMPS is involved in kidnapping, harvesting of organs, and blood sucking

Ethiopia Site Response to Rumors:

• Conducted QRA to identify and investigate the sources of the rumors
• Analyzed the findings, developed report and an action plan
• Developed robust community engagement approach to communicate CHAMPS objectives using radio, TFD, health education, health outreach campaign and community conversation, which reduced rumor, or misunderstanding about MITS.
QRA Case Example: Mozambique

Community Perception towards CHAMPS' approach to community activities in the COVID-19 era

Justification:
With a need to contain the spread of COVID-19, CHAMPS adapted new community approaches to notification of deaths, requesting consent to perform MITS, and delivering results of causes of death for children under 5 years of age. However, little or nothing is known about the community's perception of these new approaches to CHAMPS by community members.

Objective:
Assess community experiences and perceptions of CHAMPS community approaches in times of COVID-19 pandemic

Research Questions:
- How do community members perceive CHAMPS' community approaches at the time of the COVID-19 pandemic?
- How appropriate are CHAMPS' community approaches at this time of the COVID-19 pandemic and in community life?
QRA Case Example: Mozambique

Community Perception towards CHAMPS' approach to community activities in the COVID-19 era

Actionable Recommendations

1. Strengthening information about COVID-19 and ways to minimize the risk of CHAMPS infection in the community.
2. Project key knowledge messages and clear communication about COVID-19 prevention to community members.
3. During CHAMPS community activities, reinforce knowledge and encourage prevention behaviors.
QRA Case Example: Sierra Leone

Assessing Staff Perception of CHAMPS and MITS in a Regional Hospital Facility

Background:
Verbal autopsy data revealed negative opinions of clinical staff with perception that negligence contributed to children’s deaths. These data were communicated to staff. Concurrent *klebsiella* outbreak; the response carried out by the Ministry of Health and CHAMPS furthered distrust.

Objective:
Describe clinical staff members’ concerns about CHAMPS. Modify processes for facility assessment/response to reflect those concerns.

Recommendations:
- Re-enforce clinicians’ essential role in improved MCH.
- Modify communication approaches.
- Empower clinical staff to adopt new SOPs regarding *klebsiella* prevention.
Case Examples: Community Engagement
Sierra Leone, Mozambique, Mali, Bangladesh
Community Engagement Case Example: Sierra Leone

Partnership with the Ministry of Health to develop and disseminate health education information, materials, and resources to address causes of death in the communities within the catchment areas.

Topics Included:
- malnutrition
- malaria
- poor hygiene

Disseminated through media campaigns using radio and IEC structures/partners

This kind of activity allows the team to address misconceptions and increase acceptability of the project and the mortality surveillance activities
Community Engagement Case Example: Mozambique

Partnership with the Ministry of Health to develop and disseminate health education information, materials, and resources to address causes of death in the communities within the catchment areas.

Mozambique employs a multi-pronged strategy to improve health outcomes through community engagement.

• DeCODe findings inform health information and education campaigns to teach community members feasible initiatives to improve health outcomes of mothers and children. This information is disseminated through health fairs, radio campaigns, and community lectures.

• Another significant contributor to childhood illness and death is inadequate transportation services that limit ANC uptake and often keep families from seeking clinical care during a life-threatening emergency. Under the leadership of the community engagement team, CHAMPS Mozambique has partnered with local community members to develop, sustain, and strengthen a transportation network so that communities far from health facilities can access preventive and emergent clinical treatment.
Community Engagement Case Example: Mali

Community feedback sessions

After multiple feedback sessions, the SBS team in Mali identified ten essential recommendations for community feedback approaches:

1. Carry out the activity of restitution of results at least twice a year
2. Carry out the activity within the community
3. Strengthen sensitization through all actors involved (community relays, morgue attendants, community leaders, religious leaders, women leaders, and representatives of socio-professional organizations)
4. Prepare and organize meetings on the prospects for evaluating the impact of community engagement activities on improving the implementation of CHAMPS activities
5. The CHAMPS team should present these results in other health facilities
Community Engagement Case Example: Mali
Community feedback sessions

After multiple feedback sessions, the SBS team in Mali identified ten essential recommendations for community feedback approaches:

6. Present these results in an expanded cabinet meeting of the Ministry of Health and Public Hygiene
7. Support the ongoing health reform, which these results can help in this regard
8. Work as a multisectoral team
9. Revisit the sectoral health and population policy that has governed for more than 30 years
10. Everyone must assume their share of responsibility for the deaths of children under five.
Community Engagement Case Example: Bangladesh
Engaging Community Champions

Background:
• CHAMPS Bangladesh successfully implemented MITS (Minimally Invasive Tissue Sampling) procedure among children <5 died in the hospital and communities.
• Community trust toward the sensitive implementation is prerequisite.
• Community champions are the selected resources with specific experience and knowledge

Objectives:
• Increase MITS consent approach in hospital and community building a social network
• Establish a ‘pool of contact persons’ to advocate CHAMPS during MITS consent approach

Implementation site and duration: Baliakandi Upazila of Rajbari district; from 2018 - 2020

Inclusion criteria:
• Immediate experience with MITS procedure and agreed to support
• Interacted with team; observed activities
• Facilitated decision making process of the deceased family on MITS procedure
• Participated in MITS report sharing to the families
Community Engagement Case Example: Bangladesh

Engaging Community Champions

Size and Role of Community Champions:
• Currently 7 (1 female)
• Discussed roles and responsibilities through orientation; responded to questions and concerns

Engagement Process:
• The approach worked!
• 15 families agreed to talk to deceased families; 4 families consented on 4 MITS procedures

Learning:
• The approach help increasing MITS consent approach
• Recruit more community champions to increase their familiarity in the community.
Discussion and Q&A
Discussion

• What does SBS contribute to CHAMPS in your site? What does community engagement contribute?

• Perception that CHAMPS is a “death program”? How does your work offer another perspective?

• What role do you see SBS playing as CHAMPS moves into the future?

• Questions from audience