

Communication update

EOC Pakistan

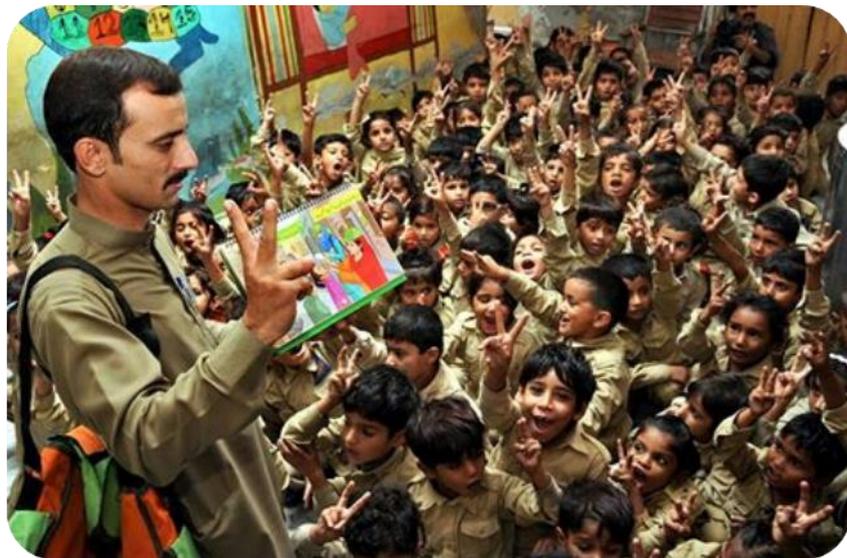
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EOC Special on Social Mobilization

Social mobilization is an integral part of polio program’s communication for development strategy that aims at bringing about a positive change in the behavior of communities. It is a process that engages and motivates a wide range of partners and allies at national and local levels to raise awareness of and demand for a particular development objective through face-to-face dialogue. Members of institutions, community networks, civic and religious groups and others work in a coordinated way to reach specific groups of people for dialogue with planned messages. In other words, social mobilization seeks to facilitate change through a range of players engaged in interrelated and complementary efforts.



Social mobilization and communication play a critical role in the efforts to eradicate polio. The goal of polio communications is to engage with communities and parents in order to facilitate demand and understanding on the importance of polio vaccination. Led by the government, UNICEF provides communication and social mobilization support for the PEI, and works polio partners to build community and household demand for immunization services, and to respond quickly and effectively to community’s concerns in the event of a polio outbreak. The social and epidemiological data guides social mobilization planning and implementation to target efforts in high-risk areas and reduce the number of missed children.

Since 2011, there has been substantial strengthening of social mobilization activities across priority districts in Pakistan, which is led by Communication Network for Polio Eradication or commonly known COMNet. It has become the flagship of communication investment to help engage communities in polio eradication and to sustain high levels of immunization demand. Currently 2250 social mobilization staff of the COMNet is deployed across the country 51 high risk districts, town and agencies across the country including the

Province	Districts	HR Ucs	Total Staff Deployed	Female Workers	Male Workers	Phusto Speaking
SINDH	10	172	301	111	190	100
BALUCHISTAN	6	144	311	66	245	245
PUNJAB	10	403	406	194	212	63
KPK	10	225	779	403	376	750
FATA	7	610	372	1	371	367
FR	6	81	47	0	47	45
ISLAMABAD	2	9	34	8	26	13
Pakistan	51	1644	2250	783	1467	1583

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tribal areas, who work relentlessly to ensure that no child is deprived of his right of protection from the wild polio virus in the form of oral polio vaccine. More than 50 percent of the staff has Pashto as the first language while a substantial number of women are also part of the team.

The social mobilizers are deployed in high risk union councils of the country to combat polio and inculcate behavior change in support of vaccination. Recently, a new cadre of female community mobilizers has been added to the already functional three tiers of district, union council and area level communication staff.

Terms of reference of a social Mobilizes (SMs)

Purpose of Assignment

To serve as out-reach and community contact points in support of social mobilization and use of interpersonal-communication with caregivers, parents, family members and other community members, leader in promoting acceptance of oral polio vaccine and routine immunization.

Major Tasks

- Perform interpersonal communication (IPC) and counselling with chronic refusal households as pre campaign activity
- Collect the social profile data of High Risk groups representing the influx of people in the catchment area inclusive of seasonal (climatic) migrants and seasonal worker migrants such as construction/ brick kiln/agriculture for the UC level micro plans. Update high risk groups social profiles prior to every campaign
- Monitor and facilitate vaccination team trainings with special focus on IPC component
- Undertake activities to strengthen routine immunization understanding in the community and bring strategic changes e.g. surveys and behaviour tracking
- Supervise and monitor polio campaigns
- Accompany vaccination teams and facilitate entry into households within the catchment areas
- Complete monitoring checklists
- Present issues and challenges regarding communications during the daily evening meetings
- Map and validate administrative data of missed children from the fifth day up to ten days of the campaign
- Gather data on reasons for missed children
- Support in covering maximum of missed children post campaign
- Report on the verified missed children and their coverage data (refusal, NA and inaccessible) to the area in-charge and UCO
- Identify nomadic information persons and engage them as influencers for enhancing coverage in migrant and nomadic communities
- Complete a campaign monitoring form focusing on IPC and vaccine management during every campaign
- Gather information on the zero dose children from the missed children data from the catchment area and report it to area in charge and UCO
- Holding Community session in areas where high number of missed children reported
- Support in the emergency response to new polio cases in the assigned UC

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SM Toolkit

Each social mobilizer carries a toolkit which equip the field staff with the necessary tools to work with the communities and to address concerns, answer queries and create demand for the vaccine.

The toolkit contains the following items:-

1. Inventory list with practical guidance
2. Social Mobilization Reference Booklet
3. Audio CD containing radio PSAs
4. Video CD containing video PSAs
5. CD containing Polio True Stories
6. Leaflet on Vitamin A
7. Leaflet to provide guidance to religious leaders and mosque imams
8. Leaflet containing FAQs
9. Leaflet on high risk population
10. Leaflet on vaccine safety
11. Leaflet on PMA endorsement
12. Panaflex banner with polio message
13. Booklet on micro-planning guidance
14. Media advocacy kit
15. Booklet on religious edicts
16. Set of counselling cards



Abrar Khan – A frontline social mobilization hero

Twenty-five year old Abrar Khan hails from Swat but was born in Karachi in 1991. A confident young man that you would have seen in the media sharing messages that parents need to vaccinate their children against polio, or else they might suffer what he has suffered all his life. A disability, that not only takes away ones childhood but is something that one has to struggle with for the rest of their lives.

“It is extremely difficult to live in this society with a physical disability, especially with polio. Everybody out there makes sure to put you down, call you names,



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reminds you that you are disabled. Even some of my family members say that I am being punished for the sins that my parents committed. The number of times I have been called a cripple is uncountable and it is shattering. I would never want anyone to suffer from what I went through,” says Abrar.

He contracted polio at the age of three and remembers how difficult life was growing up. He was bed-ridden most of the time. The physical pain aside, the emotional strain of being different from everyone else is what he says is the most difficult part. “I was different from the other children, I could not walk or could not play with them. Mostly they would just taunt me and make fun of me. I was lucky to have good parents, they suffered because of me. They did all they could to make me an active member of society. No school in my neighborhood was willing to have me, it was my parents who fought hard and got me educated, I now have a B.Com degree.”

Abrar admits that he was a sad child, he could not play cricket or any other sport with children. It was difficult for him to get through school as he was never good at his studies. He even tried becoming a tailor but failed as he could not use his legs on the machines. Now he has a mission to play his role in polio eradication. He works as a social mobilizer for the polio program in an underserved Pakhtun neighborhood of Baldia Town in Karachi.

He goes door to door convincing parents that the oral polio vaccine is safe and protects children from life-long disability. Most of his time is spent sensitizing the community about polio as well as converting refusals.

“There is nothing I hate more than polio, so working for the eradication of polio is a dream come true for me. I can never get tired of convincing parents to vaccinate their children so they can protect them from this easily preventable disease.” Abrar has managed to convert hundreds of refusals and his resolve is only getting stronger. He uses himself as an example to convince people that refuse vaccination. He asks the parents, “do you want your child to suffer like I did? Do you want him to be like me?”

In addition he carries a toolkit of facts about the vaccine as well as a Fatwa booklet which include endorsements from the major religious clerics. According to him this works well to convert religious refusals. He however claims that the task at hand is a humungous one. “The majority of polio victims belong to Pakhtun community, which is my community. It is difficult to change the mindset, a number of people have been misled and think that the polio program is some sort of conspiracy, others think disability is a sign from God. I get really angry and try and tell them that you can save your children by giving them these two drops and if you don’t, it is you who is committing a sin. I tell them if I had been vaccinated, I would not have been disabled.”

The polio program has employed thousands of young energetic and committed people such as Abrar who tirelessly work day in and day out across Pakistan. With a resolve as strong as theirs, it is inevitable that polio will be eradicated from our country.



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February NID Campaign Update

The February NID was launched on 16 – 18, 2015, to reach a target population of more than 34 million children below the age of 5 years. The data for the three-day campaign and the catch-up days indicates the cumulative average coverage of 98 percent.

The refusals among the target population remain as low as 0.11 percent while the number of children in the not available category remain at 1 percent of the total target population. The province of Punjab had the highest number of children in the not available category (155,846) while KPK had the highest number of refusal cases (25,935).

Province / Region	Total target population for the campaign	Children reported vaccinated		Reported unvaccinated children					
		No. of children reported vaccinated	% Children vaccinated Based on Total Target	Children still unvaccinated among recorded unvaccinated					
				Not Available		Refusal		Total	
				n	% among targeted	n	% among targeted	n	% among targeted
AJK	698,909	699,477	100	2,633	0.4	25	0.00	2,658	0.4
BALUCHISTAN	2,418,971	1,757,018	73	14,466	0.6	4,800	0.21	19,266	0.8
FATA	1,144,764	764,601	67	15,764	1.4	635	0.06	16,399	1.4
GBALISTAN	214,352	217,423	101	0	0.0	0	0.00	0	0.0
ISLAMABAD	261,261	188,286	72	0	0.0	0	0.00	0	0.0
KP	5,254,841	5,272,097	100	62,795	1.2	25,935	0.49	88,730	1.7
PUNJAB	17,575,331	18,581,629	106	155,846	0.9	798	0.00	156,644	0.9
SINDH	6,703,056	6,156,288	92	85,844	1.5	4,342	0.07	90,186	1.5
Total	34,271,485	33,636,819	98	337,348	1.0	36,535	0.11	373,883	1.1

Polio Case Count

As of February 26, 2015, 13 confirmed cases of wild polio virus have been reported in the current year. Of these six are from the province of Khyber Pakhtunkhwa, five from Federally Administered Tribal Area and one from Sindh.

PROVINCE	2009	2010	2011	2012	2013	2014	2015
PUNJAB	17	7	9	2	7	4	0
SINDH	12	27	33	4	10	30	1
KPK	29	24	23	27	11	68	6
FATA	20	74	59	20	65	179	5
BALUCHISTAN	11	12	73	4	0	25	1
GILGIT-BALTISTAN	0	0	1	1	0	0	0
TOTAL	89	144	198	58	93	306	13
