

**CENTRAL FUND FOR INFLUENZA ACTION
PROGRAMME QUARTERLY PROGRESS UPDATE**

As of 1 October 2011

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| Participating UN or Non-UN Organization: | United Nations Children's Fund (UNICEF) | | UNCAPAHI Objective(s) covered: | Objective 5: Strengthening effective communications | |
| Implementing partner(s): | UNICEF Global, Regional and Country Offices in conjunction with national counterparts (government, UN agencies, NGOs & others) | | | | |
| Programme Number: | CFIA-A22 | | | | |
| Programme Title: | UNICEF Effective Use of the UK Donation of GBP 23 million to support the urgent needs identified and prioritized in the WHO/UNSIC report "Urgent Support for Developing Countries" Responses to the H1N1 Influenza Pandemic, Oct 2009 | | | | |
| Total Approved Programme Budget: | \$6,376,513.77 | | | | |
| Location: | Selected regions and countries within those identified by Urgent Support for Developing Countries' Responses to the H1N1 Influenza Pandemic Report of October 2009 | | | | |
| Programme Duration: | 30 months | Starting Date: | 1 July 2010 | Completion Date: | 31 December 2012 |
| Funds Committed (Allocation): | \$6,313,514.00 | | Percentage of Approved: | 99% | |
| Funds Disbursed (Requisitioned): | \$4,484,173.00 | | Percentage of Disbursed (Requisitioned): | 71% | |
| Expected Programme Duration: | 30 months | Forecast Final Date: | 31 December 2012 | Delay (Months): | N/A |

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| Country: | Angola | | |
| Funds Committed (Allocation): | \$210,000.00 | | |
| Date of Receipt of Funds: | 29 December 2010 | | |
| Funds Disbursed (Requisitioned): | \$ 210,000.00 | Percentage of Disbursed (Requisitioned): | 100% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>Activity 5.1: Support 16 municipal government in the integration of communication into plans which contribute to create municipal alliances to promote family competencies and routine EPI coverage of 80% (DPT3)</i></p> <p><i>Activity 5.2: Strengthen community participation, engagement and partnerships supporting enhanced healthy behaviours which lead to improved routine immunization coverage</i></p> <p><i>Activity 5.3: Support the development of materials as the situation evolves.</i></p> <p><i>Activity 5.4: Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | <p>5.1.1 Since a qualitative formative research was developed in 2010 with focus groups of mothers in Luanda and Bié provinces to understand the determinants of the behaviours related to family competencies, there is a need to conduct in 2012 a post collection of qualitative data to inform the reception of messages and evaluate the impact of communication activities.</p> <p>5.1.2 Identify and train community agents in all 18 provinces in communications, including social micro-planning and social mapping.</p> <p>5.1.3 Documentation of best practices: hire a consultant to document the process and identify key results in terms of behaviour change and number of alliances between Government and churches at local level.</p> | <p>A qualitative formative research has been realized in 2010 with focus groups of mothers and social activists in two provinces (Luanda and Bié) to understand behaviour determinants and define and validate simple messages, as well as develop through a participatory process a set of culturally relevant booklets and audio/video materials on family competencies.</p> <p>5.1.2 Activists' booklet, for use in TOT is being printed. Partners from the committee have identified the participants for the national TOT held at the end of September 2011. Provincial and municipal TOTs are expected to be held in Luanda and Bié districts between October and November 2011.</p> <p>5.1.3 An international locally recruited consultant has been hired on the 21st of September, for a period of 11 months, to support TOTs and document best practices.</p> | 60% |

| Activity | Planned | Achieved | % of completion |
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| 5.2 | <p>5.2.1 To sign an alliance between the GoA and the most influential churches in order to deliver messages on family competencies to the population and strengthen the alliance in the 18 provinces through the constitution of provincial committees. Churches will be asked to identify high risk groups and most vulnerable families.</p> <p>5.2.2 Stakeholder meetings to develop a municipal level alliance to ensure strong coordination among MOH, NGOs, church partners and all other relevant stakeholders to develop promotion activities and prevention in the communities working with them.</p> | <p>5.2.1 Alliance signed in January 2011 by the Ministry of Family, UNICEF Executive Director and the top ten Angolan churches (Catholic, Methodist, Baptist, Adventist and 6 Evangelic churches). Identification of high risk families, through an analysis of social data, is part of the municipal TOTs scheduled for Luanda and Bié districts to hold in the last trimester of 2011.</p> <p>5.2.2 Alliance presented in the provinces through four regional workshops in the north, east, centre and south of Angola.</p> | 30% |
| 5.3 | 5.3.1 Produce and print 10,000 booklets for families and social activists on family competencies with messages produced through a participatory approach with focus groups of mothers and activists | <p>Contract has been signed with an Angolan multimedia company to produce through a participatory approach a set of communication materials composed of two booklets for families and social activists, eight mini radio dramas in Portuguese and seven national languages and a music album with 12 thematic lyrics on family competencies. All materials were developed through two working sessions with mothers and social activists in February and May 2011 and finalized. Materials have been approved by MINFAMU in July 2011 and are being printed. DFID funds were used to print 5,000 social activists' booklets, while 80,000 family booklets are being printed with other funds. On the 22nd of September 2011, the Happiness Recipe campaign was launched nationally by the MINFAMU and UNICEF, with extensive media coverage and the participation of more than 100 church leaders and activists.</p> | 70% |
| 5.4 | <p>In coordination with the Ministry of Family, Ministry of Health and other partners, develop a partnership agreement (PCA) with the Catholic Faith-based Organization Pastoral da Criança to support the development and implementation of a training package to enhance the interpersonal and counselling skills of community health agents and health workers in the municipality to ensure dissemination of recommended behaviour messages, information and promote adoption of protective practices</p> | <p>The previous PCA signed with Pastoral da Criança in 2010, which allowed for the training of 100 trainers and 736 activists on family competencies promotion has been closed and funds justified in June 2011. Before the signature of the new PCA, financial evaluation on the partner has been undertaken by UNICEF in July 2011 and the new PCA 2011-2012 was signed on the 18th of August 2011 with the aim of training an additional 160 trainers in eight provinces and 1060 activists in 18 provinces. DFID funds were used to support the first two tranches of the PCA</p> | 10% |

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| Country: | Afghanistan | | |
| Funds Committed (Allocation): | \$200,000.00 | | |
| Date of Receipt of Funds: | 8 February 2011 | | |
| Funds Disbursed (Requisitioned): | \$0.00 | Percentage of Disbursed (Requisitioned): | 0% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>UNICEF, in partnership with others will provide quality assistance to the government to plan, develop and implement communication strategies to respond to pandemic and other emerging infectious diseases.</i></p> <p><i>Planned outputs:</i></p> <p><i>1. A national communication plan for pandemic and other emerging infectious diseases interventions developed. (Activity 5.1)</i></p> <p><i>2. Key government and nongovernmental organizations officials at provincial level are oriented on the national communication plan and communication strategy for the pandemic and other emerging infectious diseases. (Activity 5.2)</i></p> <p><i>3. Pre-tested messages developed for recommended protective behaviours which are directed at households, public places and also for use in schools. (Activity 5.3)</i></p> <p><i>4. Key government, NGOs civil society and other stakeholders are trained on health risk communication interventions. (Activity 5.4)</i></p> <p><i>5. Community members in two provinces of the "integrated basic package of health services" project are trained on basic communication surveillance. (Activity 5.4)</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Development of national communication plan. | ToR by UNICEF/MoPH in preparation to recruit consultant to develop the national communication plan | 10% |
| 5.2 | Training and orientation of key government, NGO and CBO officials at the province level. | Proposal and request is in process | 10% |
| 5.3 | Design, develop and produce materials on the recommended protective behaviours. | Proposal and request is in process | 10% |
| 5.4 | Training workshop on health risk communication interventions. | Proposal and request is in process | 10% |

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| Country: | Bangladesh | | |
| Funds Committed (Allocation): | \$150,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$139,516.00 | Percentage of Disbursed (Requisitioned): | 93% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>Build resilience of communities (approximately 1.8 million beneficiaries) to face emergency and any disease outbreak through awareness raising and knowledge sharing via mass media, community dialogue, interactive film and theatre shows, mobilising community leaders, imams, indigenous community groups, journalists and children's organisation. The goal of the Pandemic Preparedness and Response Project is to increase knowledge and promote behaviour change among the general public on key flu prevention behaviours to reduce the risk of transmission and spread of Pandemic Influenza.</i></p> <p><i>Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | <p>UNICEF played important role in revising the 2nd National Avian and Pandemic Influenza Preparedness and Response Plan in 2009.</p> <p>2) A consultative process and a workshop is planned to develop an EID Communication strategy, an action plan and a communication package using One World-One Health approach.</p> | <p>The plan is waiting vetting of the technical committees of DG Health Services and the DGLS. After that, it will be officially approved by the government.</p> <p>2) Discussions are held to initiate the Strategy development process. Desk review of existing materials, papers and strategy documents initiated.</p> | <p>1) 85%</p> <p>2) 15%</p> |
| 5.2 | A campaign for API preventive behaviours and home management of patients in 91 wards of Dhaka city is planned. It aims reach 3 million at risk population and create knowledge about safe practices. | 100,000 leaflets on highly pathogenic avian and pandemic influenza printed. Department of Mass Communication (DMC) to begin making, video shows, door step discussions and leaflet distribution from 21 June. | 5% |
| 5.3 | Sufficient quantities of 17 master TV and radio spots, 200,000 leaflets, 50,000 posters and 150 large size banners printed on both side; for public projection have been given to Department of Mass Communication for use for any emergency. | All TV and radio stations are fully equipped with necessary IEC material needed for dissemination should there be any need. | 100 |
| 5.4 | (1) Capacity building of District Information Officers (DIOs), Deputy Directors of Islamic Foundation, Imam | (1a) Seven DIOs, seven Deputy Directors of Islamic Foundation, seven Imams Master Trainers and 5,100 Imams | 100 |

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| | <p>leaders, Sub-district level Master Trainers, Buddhist monks and local journalists to promote key and safe API practices among vulnerable/most at risk population</p> <p>(2) Conducted script review and updating workshop with the artists of Interactive Popular Theatre (Kahaloo) to reach most at risk population with messages on API safe practices</p> | <p>have been trained. About 10 million people will be benefited. (1b) 360 Monks were trained in API key and safe practices. Around 100,000 people living in three sub-provinces of Chittagong Hills Tracts will be benefitted (1c) 80 Journalists oriented to the situation of EID including API at national and sub-national level (40 each)</p> <p>(2) Ten groups were trained and 100 shows conducted in AI vulnerable areas</p> | |
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| Country: | Botswana | | |
| Funds Committed (Allocation): | \$50,000.00 | | |
| Date of Receipt of Funds: | 18 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$ 47,467.00 | Percentage of Disbursed (Requisitioned): | 95% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>To develop and disseminate communication materials on prevention of H1N1 and other communicable diseases. The objective of the project is to sensitize teachers and educate children on communicable diseases including H1N1 and the importance of hand washing for the prevention of disease.</i></p> <p><i>Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> <p><i>The outputs include the following:</i></p> <p><i>A Hand Washing Kit for Pre and Primary school children in Botswana will be produced and distributed to all the schools in four districts. A situation analysis will be conducted in 16 schools in four districts. The kit will include among others learning sessions and edutainment material relevant to the different grades.</i></p> <p><i>A pre and post assessment will be done to determine the extent to which the teachers and children have learnt and material used.</i></p> <p><i>Besides staff time, BCO has received \$50,000 from ESARO to support the second phase of the project that will involve the reproduction of 3,000 copies of the kit, 2,500 will be distributed to 785 primary schools and 500 distributed to 460 preschools and information dissemination using the public media</i></p> | | |
| Summary of implementation of strategy/plan | | | |

| Activity | Planned | Achieved | % of completion |
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| 5.1 | 1. Support Ministry of Education and Ministry of health to develop and implement media plan to disseminate hygiene and hand washing messages to school children 2. Provide communication TA to the Technical Working Group | 1. Partial achievement: Plan developed. Plan to be implemented upon completion of Hand washing package to ensure that all material needed is available. 2. Achieved: Provision of TA on-going Some delays during school closures as a result of the public service strike in May/ June. Catch up on field work completed before school term ended at the end of June. | 70% |
| 5.2 | No specific plans to target the community except the benefit they will get through their children and commemoration of the World Handwashing Day. | Partial Achievement: Interaction with teachers and children during survey raised awareness on hand washing and disease transmission. Families and communities to benefit indirectly | 30% |
| 5.3 | Development of a Hand Washing Kit for Pre & Primary schools. The kit to contain communication materials on: Hygiene and hand washing; Fact sheets on H1N1 and other communicable diseases; grade specific education materials on disease and hygiene; teacher guidance on use of kit; key messages on hygiene, diseases and hand washing; minimum standards for hygienic school environment | 1. A situation analysis to assess sanitation and hand washing practices was carried out in 15 schools in the 4 districts as planned. 2. A "School sanitation and Hand washing Survey" report has been produced. 3. Baseline information on handwashing practices in schools is available. 4. A Hand Washing Kit has been finalized and pre-tested. 5. The Kit is being designed and formatted for printing | 50% |
| 5.4 | Dissemination workshops for education and health officers on the Kit | Not achieved yet. Dissemination workshop targeting 65 education officers to be held on 13 October 2011. | 10% |

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| Country: | Central African Republic | | |
| Funds Committed (Allocation): | \$250,000.00 | | |
| Date of Receipt of Funds: | 18 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$249,710.00 | Percentage of Disbursed (Requisitioned): | 100% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <i>Support the C4D programme and promotion of essential family practices (EFPs) promoting child survival (exclusive breastfeeding during the first six months; sleeping under a mosquito net to prevent malaria; handwashing with soap; recognition and treatment of diarrhoea with oral rehydration salts; promoting immunization; and awareness raising on HIV prevention for young people) through: the adaptation of existing training modules on behaviour change;</i> | | |

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| | <p><i>training of community agents in the promotion of EFPs in emergency and transition contexts; and the production of information material such as leaflets and posters promoting EFPs in emergency and transition contexts.</i></p> <p><i>Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> |
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Summary of implementation of strategy/plan

| Activity | Planned | Achieved | % of completion |
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| 5.1 | <ul style="list-style-type: none"> · Support the Government in the implementation of communication plans promoting strategically selected essential family practices. · Provide technical support to government counterparts in the development and appropriate use of C4D interventions/strategies aimed at both individual behaviour change and collective action. · Monitor and evaluate C4D programme activities | <ul style="list-style-type: none"> · Trained 34 trainers to promote C4D essential family practices. · Financial support for the training of 180 community trainers in Bria, Kaga Bandoro, Bouar, Bozoum and Paoua. · Financial and technical support to train 400 community trainers in Kaga Bandoro. · Trained 30 government officials from health and social affairs sectors to become trainers in the EPF promotion - 50 trainers-of-trainers/supervisors are prepared to train and supervise 1,300 community mobilizers in response to the cholera epidemic in the capital region of Bangui, and adjacent regions of Lobaye, Ombella Mpoko | |
| 5.2 | <p>Establish a strategic coordination and partnership system that involves programme staff, partners and stakeholders, and ensures participation at all stages of the communities reached as a long term support system for sustainable behaviour change.</p> | <p>The C4D programme provides on-going technical support to the Ministry of Health / the Expanded Programme of Immunisation for the development of communication plans based on the principles of community participation including associations of women and youth.</p> | |
| 5.3 | <ul style="list-style-type: none"> · Produce material promoting EFPs in emergency and transition contexts (leaflets, posters, radio spots) | <p>Communication materials for emergency and transitional contexts are available as of September 2011.</p> | |
| 5.4 | <ul style="list-style-type: none"> · Produce training modules on C4D/promotion of EFPs in emergency and transition contexts. · Train community agents in promotion of EFPs in emergency and transition contexts. | <ul style="list-style-type: none"> · Thirty-four community agents have been trained in the promotion of EFPs in emergency and transition contexts. · During the Semaine Africaine de Vaccination (African vaccination week), 2,900 community agents were trained in the promotion of EFPs, leading to the sensitization of 540,000 households on the importance of EFPs. · 50 trainers of trainers selected among health and social affairs government officials responsible for communication received training in EFPs and communication techniques. - Communication materials for emergency and transitional contexts are available as of September 2011. | |

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| Country: | Chad | | |
| Funds Committed (Allocation): | \$150,000.00 | | |
| Date of Receipt of Funds: | 23 December 2010 | | |
| Funds Disbursed (Requisitioned): | \$141,664.00 | Percentage of Disbursed (Requisitioned): | 94% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>UNICEF, working in partnership with others provides high quality assistance to governments to plan, develop and implement communication strategies to respond to pandemic and other emerging infectious diseases outbreaks. UNICEF seeks to strengthen national communication capacities and competencies for effective communication interventions and health promotion. UNICEF plans to provide child-friendly materials for primary and secondary schools to teach children key preventive practices for common diseases.</i></p> <p><i>Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Organize informational meetings and awareness campaigns with the authorities at central and local authorities and regional (N'Djamena, Wadi-Fira, Kanem, Gore Tandjile, Mayo-Kebbi) on pandemic influenza H1N1 and the preventive measures to be taken. Organize a roundtable discussion for information and advocacy on H1N1. | Due to the fact that Chad is a country with multiple emergencies taking place at the same time, i.e. cholera, meningitis, measles, floods, humanitarian, etc., the country team is recommending a multi-disciplinary working group that can work on an emergency plan to face recurring situations in terms of communications. Community forums were conducted in Eastern Chad to bring community awareness about the importance of EFP, and immunization, focusing on Polio. A C4D in emergencies workshop was conducted in June to build capacity of field actors in the behavior change domain and the role of communication within emergency situations. The training was focused on cholera, polio and humanitarian response. | 90% |
| 5.2 | Organize informational meetings with community, religious and traditional leaders, NGOs, civil society organizations, women's groups and youth groups. Also planned is the organization of informational and awareness sessions for community health centers, social | Talks are underway with faith-based organisations to bring them on board for promotion activities at the community level for key household practices. Although MOUs have been drafted, at the moment we cannot complete this activity due to the lack of funding | 70% |

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| | mobilizers and groups in other sectors on bringing activities to the community, families and students for the prevention of influenza H1N1 in N'Djamena, Wadi-Fira, Kanem, Gore Tandjile, Mayo-Kebbi. | | |
| 5.3 | Elaborate and produce communication messages for several media outlets where messages are adapted to address the H1N1 virus in promoting hygienic measures to prevent the virus. Activities will be also focused on the use of media outlets, television and radio, to ensure maximum coverage, therefore UNICEF and its partners will help develop radio and television spots. Developed and distributed hand washing posters and fliers, Cholera prevention posters and fliers, and flu prevention posters and fliers. Other materials to be produced based on the needs of the program and/or emergencies encountered during 2011. | 5,000 Posters, 10,000 fliers on hand washing practices were distributed in 55 primary schools. 1,500 training guides were developed to help train around 50 partners in Key Family Practices, covering a population of approximately 500,000 people in 5 regions. 50,000 posters for polio were developed, 80,000 fliers for polio were developed, and 20,000 community relays jackets were produced. Cholera materials were updated, produced and distributed to high risk areas. | 100% |
| 5.4 | Organize informational sessions for women's groups on handwashing technics as a way of disease prevention. To reach and address children and you, UNICEF and its partners will organize informational and awareness campaigns in 20 schools in targeted regions. | Through the CLT approach, the C4D team will provide capacity reinforcement in villages where this programme exists, in collaboration with the WASH programme. MOUs with women's' associations (CELIAF) are currently under implementation, and a long term hygiene campaign has been underway since June 2011 within the response to the cholera and polio outbreaks | 100% |

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| Country: | Congo | | |
| Funds Committed (Allocation): | \$112,100.00 | | |
| Date of Receipt of Funds: | 23 December 2010 | | |
| Funds Disbursed (Requisitioned): | \$78,857.00 | Percentage of Disbursed (Requisitioned): | 70% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>The purpose of the project is that UNICEF, working in partnership with others, provides high quality assistance to governments to plan, develop and implement communication strategies to respond to pandemic and other emerging infectious diseases outbreaks.</i></p> <p><i>Expected results are :</i></p> <p><i>(1) Country has a government endorsed communication plan for pandemic and other emerging infectious diseases;</i></p> <p><i>(2) Pre-tested materials on recommended protective behaviours directed to households and public places are ready to be produced in case of an outbreak;</i></p> | | |

| | <p>(3) Learning materials for children (hand-washing, hygiene messages and influenza related information) are made available to the education authorities of the country;</p> <p>(4) Strengthened national communication capacities and competencies for effective communication interventions and health promotion.</p> | | |
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| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Elaboration of a communication plan | <p>1: A plan has been implemented during the 5th round of the polio campaign and it covered the entire population. Now, UNCT is going to support the country for the elaboration of a contingency plan.</p> <p>2: • An EPI communication strategy for the Republic of the Congo with the involvement of all key partners has been developed. One of the key steps in this process has been a stakeholders' consensus building workshop, during which partners have strengthen their capacity, especially the MoH Health Promotion Personnel who have actively participated and observed the communication strategy making process, with the intention that they should learn how to do it themselves the next time.</p> | 100% |
| 5.2 | Support for the promotion of good key family practices in health, food, nutrition, hygiene and sanitation and for the prevention of infectious diseases, through existing strategies (e.g. Gestes qui sauvent, PEINS, CLTS). | <p>1: Communication and social mobilization activities in support to the response against the epidemic of Chikungunya, a mosquito-borne viral disease in Brazzaville and Pool Department.</p> <p>2: 1: Training of 5,000 women members of Salvation Army on good key family practices in health, nutrition, hygiene and sanitation in Yangui, Pool Department.</p> | 60% |
| 5.3 | Develop the messages and communication material prototypes necessary for the implementation of the plan | <p>1: A rapid evaluation of the initiative les gestes qui sauvent was done in the Department of Likouala to gauge the performance of the communication initiative and key messages, with a view to make recommendations to contribute to the improvement of the initiative's communication efforts. This rapid evaluation has provided a springboard for a wider evaluation of the initiative.</p> <p>2: Furthermore, the C4D training has been used to review our key messages and to improve them and to make them more efficient.</p> | 80% |
| 5.4 | Organize 3 training workshops for ensuring that training methods of community outreach personnel is in place and fully operational to reach out to children and mothers. | Funds have contributed to the organization of a one-week training in C4D with the technical support of an international consultant. The workshop participants were essentially UNICEF | 75% |

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| | | programme staff and key national partners, including NGOs and local communities. This capacity building event has contributed to improve the content of our communication strategy. | |
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| Country: | Cote d'Ivoire | | |
| Funds Committed (Allocation): | \$200,000.00 | | |
| Date of Receipt of Funds: | 23 December 2010 | | |
| Funds Disbursed (Requisitioned): | \$191,507.00 | Percentage of Disbursed (Requisitioned): | 96% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>UNICEF, working in partnership with others provides high quality assistance to governments to plan, develop and implement communication strategies to respond to pandemic and other emerging infectious diseases outbreaks.</i></p> <p><i>Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |

| Summary of implementation of strategy/plan | | | |
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| Activity | Planned | Achieved | % of completion |
| 5.1 | 1 Workshop planned to revise the current Child Survival Communication plan in order to include emergency aspects | A validation workshop of Child Survival Communication Plan including emergency preparedness. Foreword page endorsed and signed by the Minister of Health, produced and disseminated. | 100% |
| 5.2 | Partnership with Religious Leaders Alliance and with Local Radios Network developed | PCA with Local Radios Network in Cote d'Ivoire was signed, and activities plan for 2 months was signed. With the Alliance of Religious Leaders, a 2-month campaign to promote Child Survival in an emergency context was signed and is being implemented. Communication tools (spots, posters, flip charts, songs) are in production. | 70% |
| 5.3 | Development of communication materials (flip charts, cartoons, guides, posters, TV spots and radio) | Different kinds of learning and education materials produced in line with the issues, the target group and the outbreak. Counselling cards = 2,500; Posters = 5,000; Booklets = 2,500; Guides adapted for both Muslims and Christians = 2,500, Radio micro-programmes = 14; 14 radio stories for children; 1,500 facts-for-life cartoons for children; and 6 Radio spots | 100% |

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| | | broadcast on 91 local radios. | |
| 5.4 | 4 workshops on C4D related to Child Survival and Protection in emergency held (religious leaders, radio animators, NGOs) | 5 workshops held benefitting NGOs (64), Youth peer educators in IDP camps (12), Radio journalists (70), and Religious leaders (33). | 100% |

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| Country: | Democratic Republic of Congo | | |
| Funds Committed (Allocation): | \$340,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$332,791.00 | Percentage of Disbursed (Requisitioned): | 98% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>The project aims at the design of a national C4D strategy to support the implementation of the African Child Survival and Development Strategy to promote five Key Family Practices (KFP), namely the hand washing, basic hygiene and prevention of H1N1 at the household level. Specific messages are developed on the KFP, at least 10,000 children at primary school and 20,000 households in 5 provinces are sensitized on the subjects, communication plans are developed and implemented by the 5 major religious groups in 5 of the 11 provinces of DRC.</i></p> <p><i>Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i> <i>5.2 Strengthen community participation, engagement and partnerships</i> <i>5.3 Support the development of materials – in real time as the situation evolves</i> <i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Development of a national C4D strategic vision to support the project interventions | A national and integrative C4D strategic vision is elaborated. The document has been validated by government partners and other national C4D partners. | 100 |
| 5.2 | Elaboration of communication plans at the provincial/district level with actors coming from community based structures and provincial partners | More than 3,000 actors trained in 4 provinces/district. Community participation has been encouraged and taught during the trainings of community based animators on the 5 KFP. At least 50 local radios and TV are involved in the promotion of the 5 KFP. Different community based actors are involved in the advocacy for the promotion of 5 KFP in communities | 60 |
| 5.3 | Production of 100 mural painting in 50 schools in Kinshasa & audio-visual materials | 90% of mural painting achieved. 5 audio and video jungles/spots on the 5 Key Family Practices have been produced | 95 |

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| | | and disseminated. | |
| 5.4 | Training of trainers and community based animators of the 5 major religious groups in 4 provinces and 1 district | 250 trainers and about 3,000 community based actors from 5 out of 11 provinces have been trained on the 5 KFP | 50 |

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| Country: | Lao PDR | | |
| Funds Committed (Allocation): | \$100,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$ 99,970.00 | Percentage of Disbursed (Requisitioned): | 100% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>To ensure that those with the greatest needs are reached by communication efforts addressing disease prevention and care and related hygiene and nutrition efforts. Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i> <i>5.2 Strengthen community participation, engagement and partnerships</i> <i>5.3 Support the development of materials – in real time as the situation evolves</i> <i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |

Summary of implementation of strategy/plan

| Activity | Planned | Achieved | % of completion |
|----------|---|---|---|
| 5.1 | <p>Integrated communication strategies and related planning activities in two districts of Luangnamtha province.</p> <p>These plans are aimed at designing interventions needed to impact changes on hygiene as well as health behaviours for mothers and children, which, in turn, include the prevention and response to emerging and re-emerging diseases.</p> | <p>The overarching communication strategy for 2011-2015 in Luangnamtha province has been developed and agreed with central and provincial government partners.</p> <p>UNICEF and counterparts in the Ministry of Health are developing area profiles and situation analyses to examine the specific make-up and needs of local communities in the selected districts.</p> <p>District planning meetings have already been conducted in all five districts of Luangnamtha. Specific orientations on communication activities at local levels are now planned for November/December 2011.</p> | 70% |
| 5.2 | <p>1) Form new partnerships with other UN agencies and NGOs working in similar areas and at community levels in Luangnamtha province.</p> <p>2) Establishment of multi-sectoral</p> | <p>1) New working partnerships with UN agencies and specific NGOs have been established.</p> <p>2) An overall communication strategy for 2011 in Luangnamtha has been</p> | <p>1) 90%</p> <p>2) 70%</p> <p>3) 50%</p> |

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| | <p>committees from select districts in Luangnamtha province.</p> <p>3) Training for local committees participatory approaches to communication and social mobilization activities. This includes training to conduct local level consultations for data gathering, data analysis, and planning activities that include village chiefs, health workers, volunteers and other influential community figures. This will build on existing health education networks originally established for prevention and response to Avian and H1N1 influenzas.</p> | <p>developed and agreed through a joint UN/Government funding proposal. And agreed with government partners.</p> <p>3) Training curriculum and planning process is on-going. Orientations on communication activities are scheduled for November/December 2011.</p> | |
| 5.3 | <p>1) Develop a Nutrition Training Package for pregnant women, new mothers, infants and young children, including related, adaptable IEC materials.</p> <p>2) A computer inventory system of all available infectious disease and other health related materials, training curriculums, distribution plans and activity locations has been established and is now in operation at the Center for Information and Education on Health (CIEH) under the Ministry of Health.</p> <p>3) Previous materials produced for community leaders and volunteers – specifically those addressing maternal, breastfeeding, complementary feeding and hygiene (such as hand and utensil washing with soap) – improved and contribute to on-going initiatives in Luangnamtha province and beyond.</p> | <p>1) Messages from UNICEF's IYCF guidelines are being integrated into existing Lao-specific training packages. This involves an on-going consultative process with government and international partners and stakeholders. Agreed messages, community consultations and pre-testing are planned. Each of these processes must be conducted and completed prior to the production of related materials.</p> <p>2) Inventory database has been fully established. Further inputs of materials and data along with on-going maintenance and training on usage of the system are on-going.</p> <p>3) Various materials on nutrition, especially Exclusive Breastfeeding and hygiene for disease prevention, have been fully developed. Adaptations and improvements are occurring in parallel with activities listed above under #1.</p> | <p>1) 50%</p> <p>2) 80%</p> <p>3) 80%</p> |
| 5.4 | <p>Trainings for central level technical staff from the Center for Information and Education on Health under the Ministry of Health to train subnational staff.</p> | <p>Trainings for four central level technical staff are complete. Pilots of the 'Participatory Community Assessment' process have contributed to government staff ability to plan and orient sub-national counterparts on participatory communication and social mobilization strategies.</p> | <p>95%</p> |

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| Country: | Malawi | | |
| Funds Committed (Allocation): | \$100,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$70,266.00 | Percentage of Disbursed (Requisitioned): | 70% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>To promote behaviours that enable community members, especially women, children and the most vulnerable populations, to adopt behaviours that help them prevent contracting diseases during emergencies; to promote awareness on the various diseases and conditions that threaten the lives of people during emergencies; to mobilize community action towards action on diseases that come about as a result of emergencies; to build the capacity of government and community networks in facilitating social dialogue and community mobilization during emergencies. Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i> <i>5.2 Strengthen community participation, engagement and partnerships</i> <i>5.3 Support the development of materials – in real time as the situation evolves</i> <i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | In structured media collaboration, UNICEF and MoICE strengthened both national and community radios with funds, programme content and guidelines; Letters of Agreement were signed with local stations and Memoranda of Understanding with MBC and Zodiak. This removes the ad-hoc manner in which media collaboration had been run. In addition, the community radios and the MBC are now linked through dialogue groups; this enables community views and voices to be relayed in media plans and contents. Materials from mainstream radios and private productions are also shared with community radios to augment their contents. | UNICEF is providing strong technical expertise, financial support and joint communication planning. Partnership roles and responsibilities are clear because all communication institutions supporting C4D results meet in a coordination group titled the "National Social Mobilization Committee", to plan and monitor results. In addition, Ministry of Information is now strengthened to support and monitor outputs at district and community levels. | 100% |

| Activity | Planned | Achieved | % of completion |
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| 5.2 | Partnership with MoICE and Zodiak enables C4D to use the mobile cinema in a participatory manner to raise awareness and discussions in community settings; partnerships with community radios and MBC are used to facilitate community dialogues to channel the voices of marginalized populations into programme content; partnership with SWET (an NGO) has had profound results in the promotion of Child Rights in five districts and this strategy can be easily accessed to mobilize communities in emergency contexts. In addition, the Ministry of Local Government and Rural Development (with a large structure that reaches into the lowest administrative levels) are frequently used by C4D to promote actions through community leaderships. Partnership with the Malawi Inter-faith AIDS Association also allows the use of religious leaders to access communities with information and actions. | Orientation and Letters of Agreement have been signed with 10 community radios; orientation of district and community networks are in progress | 100% |
| 5.3 | Programmes content on hand washing with soap; promotion of hygiene and sanitation have been developed and shared with mainstream and community radios; IEC Kit-in-a-box is currently under production. It contains a compendium of materials and messages adopted from FFL and other existing IECs. | Materials being printed for pre-positioning in districts; audio-materials already being broadcast through media houses; discussion and plans for handwashign campaign on-going with WASH, the media and private sector | 80% |
| 5.4 | C4D designed an innovative IEC-Kit-In-A-Box to address emergencies. A planned orientation in the use of this kit targets 84 officers from 28 districts with 3 officers per district. Following the orientation, 4 IEC boxes will be distributed per district. Each will have the following reach: general population-around 80,000 people per district; school population-on average an estimated 10 schools in urban and 20 in rural in all 28 districts, making a total population of over 100,000 pupils. | UNICEF had earlier held a training for Community Radio stations; the training will in turn improve the quality and contents of a variety of programmes one of which will address behaviors during the cyclical Cholera season from Oct. to Dec. | 70% |

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| Country: | Mali | | |
| Funds Committed (Allocation): | \$196,000.00 | | |
| Date of Receipt of Funds: | 8 February 2011 | | |
| Funds Disbursed (Requisitioned): | \$177,223.00 | Percentage of Disbursed (Requisitioned): | 90% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>DFID funds represent an opportunity to supplement funds from other sources and to strengthen national capacities in C4D. The national communication pandemic preparedness plan is not a priority for the government. The CO will use the funds strategically to promote hygiene and protective behaviours in households and public places. Specific activities include:</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Strengthening communication activities on hygiene measures in the fight against the cholera epidemic. Support to the Ministry of Health in implementing the communication plan on the " World Handwashing Days " | Existence of a media plan for dissemination of messages as part of the fight against cholera. Conceptual framework of communication activities related to the " World Handwashing Days " | 100% |
| 5.2 | | | |
| 5.3 | Support to the Ministry of Health in the revision ,adaptation , production and distribution of communication tools related to hygiene practices in the fight against cholera | Dissemination of messages on TV, national and local radio stations radio stations. Related to World Handwashing Days" the model trainings will be given in all schools on hygiene health on October 14th 2011. The following topic will be integrated: <i>washing hands with soap, water hygiene and latrine sanitation</i> | 90% |
| 5.4 | Develop training manual for health and social agents | The training manual for health and social workers is produced and the training sessions are planned for October 2011 | 50% |

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| Country: | Mozambique | | |
| Funds Committed (Allocation): | \$200,000.00 | | |
| Date of Receipt of Funds: | 8 February 2011 | | |
| Funds Disbursed (Requisitioned): | \$134,569.00 | Percentage of Disbursed (Requisitioned): | 67% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>UNICEF, working in partnership will provide high quality assistance to governments to plan, develop and implement communication strategies to respond to pandemic and other emerging infectious diseases outbreaks. Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i> <i>5.2 Strengthen community participation, engagement and partnerships</i> <i>5.3 Support the development of materials – in real time as the situation evolves</i> <i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Review and update the government communication plan, tackling emerging infectious diseases, with focus on cholera and other hygiene related diseases. | Desk Review completed and draft communication plan on IDs, with focus on cholera prevention prepared. Ministry of Health has validated the plan and will submit it to internal approval during the month of October/November. | 80 |
| 5.2 | Support the production of pre-tested Facts for Life audio-visual materials in Portuguese and Macua for small-groups and community media on hand - washing behaviours. | Provincial partners trained on pre-testing of IEC materials. Audio-Visual materials prepared, incorporating pre-testing outcome. | 60 |
| 5.3 | Develop learning materials for children in the 10-14 age group to promote healthy behaviours such as hand washing. | Draft material and lay out prepared and to be pre-tested & printed in October. | 60 |
| 5.4 | Undertake an assessment of the Social Communication Institute's (ICS) capacity (HR, equipment and capacity of production of audiovisual materials) and define activities to strengthen their capacity to undertake effective communication interventions. Regional training of ICS and other C4D partners on the main areas identified in the capacity assessment report and key thematic areas of interventions (hygiene promotion and hand-washing). | Draft assessment report discussed with key staff at ICS Headquarter. Revised report including key recommendations from the meeting to be presented at the ICS Board meeting at beginning of October and validated by the end of October. | 90 |

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| Country: | Nepal | | |
| Funds Committed (Allocation): | \$101,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$ 96,792.00 | Percentage of Disbursed (Requisitioned): | 96% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>To develop a UNCT Inter-agency communication strategy (both external and communication for development). Activity 5.1</i></p> <p><i>To scale up implementation of School Based Education programme on influenza linked with community awareness on key behaviours to follow. Activity 5.2</i></p> <p><i>To reinforce key messages on influenzas and basic hygiene for groups and communities that are most vulnerable and hard to reach. Activity 5.3</i></p> <p><i>To support NGOs to develop promotion activities and prevention in the communities working with them. Activity 5.2</i></p> <p><i>To design, produce and disseminate materials (print, broadcast, internet, other) Activity 5.3</i></p> <p><i>Technical and support to Government to build their capacity on sustainable and effective use of materials emphasizing local participation. Activity 5.4</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Capacity building exercises on risk communication in 8 high risk districts. | The training is planned and completed by October 30 in all 8 districts. | 50 |
| 5.2 | Expansion of community based school education program on PI with emphasis on hand washing in 3 districts. | NGO selection, facilitators training and rapid assessment completed and school session, community orientation and street theatres will start from September 22, 2011. | 50 |
| 5.3 | Development and printing of materials and production of TV and Radio Public Service Announcements (PSA). | Materials designed and printing on-going. | 100 |
| 5.4 | Conduct communication strategy development workshop in two regions. | The C4D workshop starting from September 19-23 in Nepalgunj having participation of 45 focal person from 15 districts. | 100 |

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| Country: | Pacific Islands | | |
| Funds Committed (Allocation): | \$125,000.00 | | |
| Date of Receipt of Funds: | 8 September 2010 | | |
| Funds Disbursed (Requisitioned): | \$ 120,952.00.00 | Percentage of Disbursed (Requisitioned): | 97% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>The overall objective of the project is to strengthen community participation, engagement and partnerships. Develop community partnerships and engage communities in the development, dissemination and evaluation of communication messages. This activity aims to do this through (a) development of materials to support partnership building (b) build on existing networks and partnerships to support the effective dissemination and evaluation of communication messaging and materials. The final objective is to build capacities that can be utilised in the future for a range of health issues. Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i> <i>5.2 Strengthen community participation, engagement and partnerships</i> <i>5.3 Support the development of materials – in real time as the situation evolves</i> <i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | FSM, RMI, Tuvalu, Samoa and Tonga planned for quarter 1 and 2 | Solomon Islands, Vanuatu, Kiribati, Fiji, Tonga and Tuvalu completed. FSM and RMI has shared copies of own plans. | 90% |
| 5.2 | FSM, RMI, Tuvalu, Samoa and Tonga planned for quarter 1 and 2 | Completed. FSM and RMI has shared copies of own plans already produced. Samoa postponed. | 90% |
| 5.3 | FSM, RMI, Tuvalu, Samoa and Tonga planned for quarter 1 and 2 | Solomon Islands, Vanuatu, Kiribati, Fiji, Tonga and Tuvalu completed and pre-positioned. Additional materials and communication activities addressing drought emergency and related hygiene issues - under development and distribution. FSM and RMI produced copies of own plans. Samoa postponed. | 90% |
| 5.4 | FSM, RMI, Tuvalu, Samoa and Tonga planned for quarter 1 and 2 | Solomon Islands, Vanuatu, Kiribati, Fiji completed. FSM and RMI depending on request. Samoa and Tuvalu to be completed in quarter 3 and 4. Support to process M&E of on-going risk communication and C4D on PI and WASH taking place in Solomon Islands, Vanuatu and Kiribati in June and July. Complete review of C4D support in the Pacific by SPC, UN and UNFPA. Revision of capacity building support framework to be undertaken. | 90% |

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| Country: | Sudan (Northern States) | | |
| Funds Committed (Allocation): | \$100,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$80,956.00 | Percentage of Disbursed (Requisitioned): | 81% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>Development of strategic communication framework and tools to engage family-level actors, including children, in communication to promote essential family care prevention practises (EFPs) related to ACSD, including infectious diseases. Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i> <i>5.2 Strengthen community participation, engagement and partnerships</i> <i>5.3 Support the development of materials – in real time as the situation evolves</i> <i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Formative consultative and planning meetings with government counterparts in Health, Nutrition, and WASH conducted at national level and with three states; presentation made and awareness raised on methodologies and channels appropriate for long- and short-term communication objectives; | consultative and planning meetings for communication strategy development held with government counterparts in Health, Nutrition, and WASH conducted at national level; consultation and planning meetings conducted with health/nutrition counterparts in one state; | 75% |
| 5.2 | consultations with mothers and other carers of U5s in 3 states; development of community-based mother-to-mother radio programming; development of tool for Participatory Action Research; implementation of Participatory Action Research activities in pilot 3 communities | consultations carried out with mothers groups in 3 states, through the community radio listening groups structures update June 2011: series of additional focus group discussions (6) with mothers and fathers held in Khartoum state Update SEPT 2011: mother group / child health communication structures designed for emergency setting and under pilot in two states; outreach strategy for mothers in 40-days confinement period (alnufasaa) in vulnerable communities developed for implementation on pilot basis (1 state) | 80% |
| 5.3 | develop state-level standby guidelines for radio announcements and programmes focussed on EFPs for U5s in infectious disease outbreak situation | Update June 2011: preliminary work started in two states; Update SEPT 2011: set of print materials (2 posters, 6 stickers, and leaflet), pre-recorded radio spot series (18 spots), pre-recorded song, and AV spot at various stages of development / production. | 70% |

| Activity | Planned | Achieved | % of completion |
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| 5.4 | identify and engage CBO and NGO networks in selected areas as community-level agents for Shuffa'a Alsoghar initiative; provide training on interpersonal communication skills; provide training on implementation of participatory action research tool and use of PAR findings in on-going communication activities in the communities. | relevant CBO & NGO networks mapped in one state; update June 2011: interpersonal communication training conducted for community level co-ordinators and volunteers in group of 4 NGOs Update Sept 2011: 4 NGO partners trained for implementation of mother-groups; | 60% |

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| Country: | Sierra Leone | | |
| Funds Committed (Allocation): | \$100,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$8,887.00 | Percentage of Disbursed (Requisitioned): | 9% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>Enhance H1N1 preparedness in Sierra Leone through evidence based C4D activities and strengthen community networks such as mother's clubs and religious leaders for more effective social mobilisation and community participation. C4D activities will include the use of community radio, theatre for development and mobile cinema viewing followed by post-performance discussions to trigger dialogue and discussion on handwashing and hygiene. Funds will also be for the emergency preparedness component of a long form radio serial drama developed and implemented in partnership with the BBC World Service Trust. Activities include:</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> <p><i>At the moment qualitative achievements cannot be reported, as implementation has not yet started. It will start in the period July - August 2011.</i></p> | | |

| Summary of implementation of strategy/plan | | | |
|---|---|---|-----------------|
| Activity | Planned | Achieved | % of completion |
| 5.1 | 1. Support MoHS (GoSL) to develop cholera communication strategy/plan | 1. Cholera communication plan developed with the assistance of RO, 2. Cholera communication plan presented to approximately 80 WASH partners for wider dissemination. | 100% |
| 5.2 | 1. Community theatre performance in Western Area with post-performance discussions at community level to facilitate discussion and dialogue for the adoption of handwashing and improving pandemic preparedness. 2. Network | 1. Strategy for strengthening mothers groups and integrating them has been developed, and presented to partners. As a first follow up action, a network meeting is being organised in the third week of October which will also bring | 30 |

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| | meeting/Learning Summit among partners for strengthening UNICEF supported women's network operating at the community level. | together other potential partners working in adult literacy, microfinance and livelihoods. | |
| 5.3 | 1. Develop IEC materials to support increase in public knowledge about cholera risks, symptoms and treatment | 1. Key messages on hygiene practices and cholera developed. | 30 |
| 5.4 | Information workshops with Inter Religious Council members to build capacity to facilitate message delivery and influence adoption of favourable preventive behaviours such as handwashing | | 0 |

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| Country: | Swaziland | | |
| Funds Committed (Allocation): | \$100,000.00 | | |
| Date of Receipt of Funds: | 14 October 2010 | | |
| Funds Disbursed (Requisitioned): | \$99,517.00 | Percentage of Disbursed (Requisitioned): | 100% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <i>Development of an emergency risk communication strategy for Influenza AH1N1 and other pandemic Influenzas. Activities include:</i> 5.1 KAP and rapid assessment on H1N1 and other pandemic influenzas 5.2 Healthy Swaziland Mass Campaign 5.3 Development of emergency risk communication plan for AH1N1 and other pandemic influenzas 5.4 IEC review | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Protocol development, tool development, training workshop, assessment, data analysis, report writing | Assessment undertook and Analysis and report writing done | 100 |
| 5.2 | Conduct Healthy Swaziland Mass Campaign | Over 12, 000 people attended and exposed to health education and over 4000 AH1N1 IEC disseminated. | 100 |
| 5.3 | Engagement of consultant, workshop, documentation of draft, consultative workshop and finalization of the plan | On going | 60 |
| 5.4 | Assembling of health promotion specialists and translators through session for review of IEC versus assessment findings and literature review | IEC review process has begun , documentary equipment purchased and website development is in progress | 70 |

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| Country: | Tanzania | | |
| Funds Committed (Allocation): | \$200,000.00 | | |
| Date of Receipt of Funds: | 9 February 2011 | | |
| Funds Disbursed (Requisitioned): | \$ 142,614.00 | Percentage of Disbursed (Requisitioned): | 71% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>UNICEF, working in partnership with others to provide high quality assistance to governments to plan, develop and implement communication strategies to respond to pandemic and other emerging infectious diseases outbreaks.</i></p> <p><i>Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Training of district teams on emergency communication preparedness and response plans in 8 high risk districts (polio, yellow fever, H1N1). | First two districts trained in September, the rest of the districts will be completed in October and November. Delay was as a result of late release of funds from national Govt Exchequer system to MOHSW at the start of the new financial year. Training curriculum in place (CDC package). Mara Region has been prioritized following polio outbreaks in neighbouring district of Kenya. | |
| 5.2 | Integrated in activity 5.1 | This component has been strengthened under the social mobilization for polio Sub national Immunization campaign in Mara and national measles campaign planned for Zanzibar and Mainland. Identification and mobilization of community participation in emergency response is included in the training package | |
| 5.3 | Developed prototype materials for polio, yellow fever, Rift valley fever & reproduction of H1N1 materials will be stored in the data base for quick retrieval and production. | Production of key IEC materials (posters, flyers, radio and TV spots) on polio, measles, tetanus, pentavelent, BCG, have been fast tracked following the measles and polio outbreaks in various parts of the country. Collection of existing materials is still on-going, consultative meetings with partners has been on going through the National Advocacy, communication and social mobilization Sub Committee. | |

| Activity | Planned | Achieved | % of completion |
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| 5.4 | Support Health Promotion to establish an emergency IEC materials data base for easy access, consistency of messaging and reproduction and dissemination. | Consultation on feasibility and development of a Document Management System (DMS) structure is in place. Protocol for the development and function of the data base is under review by Government with a view to establishing linkage with other government data bases. | |

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| Country: | Uganda | | |
| Funds Committed (Allocation): | \$200,000.00 | | |
| Date of Receipt of Funds: | 22 February 2011 | | |
| Funds Disbursed (Requisitioned): | \$ 26,858.00 | Percentage of Disbursed (Requisitioned): | 13% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>To provide high quality assistance to government to plan, develop and implement communication strategies to respond to pandemic and other emerging infectious diseases outbreaks.</i></p> <p><i>Planned outputs include a communication plan for epidemic disease outbreaks; a village health team toolkit for health promotion; participatory action research to understand attitudes, behaviours and practices in disease hotspots as well as disease outbreak communication trainings and preparedness planning. Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i> <i>5.2 Strengthen community participation, engagement and partnerships</i> <i>5.3 Support the development of materials – in real time as the situation evolves</i> <i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |

Summary of implementation of strategy/plan

| Activity | Planned | Achieved | % of completion |
|----------|--|--|-----------------|
| 5.1 | Development of a national disease outbreak communication plan | Consultant has been hired and work will begin in the second week of October 2011 | 35 |
| 5.2 | Development of partnerships with faith based organisations, NGOs and with private sector companies | Important partnerships have evolved out of the yellow fever/Ebola outbreak response including with 3 major faith based organizations, NGOs and with private sector companies | |
| 5.3 | Development of a Village Health Team (VHT) toolkit | This activity has been postponed to next year. | 0 |
| 5.4 | Strengthening of national communication capacities | Disease outbreak training has been conducted in Northern Uganda covering | 75 |

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| | | four districts of Kitgum, Pader, Lamwo and Agago and in Central Uganda covering the two districts of Kabarole and Kasese and in North Eastern Uganda in the 7 districts of the Karamoj region. Total number of participants was 290 involving district officers, sub-county and parish level officers, community elders and CSOs | |
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| Office: | Asia-Pacific Shared Services Centre (APSSC) (EAPRO and ROSA Regional Offices) | | |
| Funds Committed (Allocation): | \$257,000.00 | | |
| Date of Receipt of Funds: | 8-Sep-2010 | | |
| Funds Disbursed (Requisitioned): | \$ 151,461.00 | Percentage of Disbursed (Requisitioned): | 59% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <ul style="list-style-type: none"> • <i>Develop C4D guidance and implementation tools for countries in the Asia Pacific region to for responding to H1N1 or other Type A influenza pandemics and outbreaks.</i> • <i>Provide technical support to COs in the Asia Pacific region in identifying entry points for integration of influenza related behaviours into existing health, nutrition, WES and education programmes.</i> • <i>Update and make available CREATE C4D materials resource pack for COs in Asia Pacific</i> | | |

Summary of implementation of strategy/plan

| Activity | Planned | Achieved | % of completion |
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| 5.1 | Regional advocacy on C4D for EIDs along with partners and through the Asian Regional Risk Communication Initiative (ARRCI) & Technical assistance to COs to promote preparedness and early warning systems as part of managing EID risks | At least 30% COs in AP especially those high risk of recurring AI/EIDs have advocated with governments to develop C4D plans by end of 2011 | 25% |
| 5.2 | In partnership with the regional forum, document good practice on community engagement in risk communication on EIDs and other emergencies to inform a regional guidance document. | Developed concept note on C4D and DRR, with the goal to prepare a technical paper on how risk communication can be one of the integral part of disaster risk reduction. In discussions with University of Hong Kong to develop four case studies on risk communication related to various EIDs. | 25% |
| 5.3 | Update and populate CREATE with EID communication materials for CO | No new communication materials related to pandemic communication developed | 50% |

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| | adaptation In collaboration with other agencies and regional partners, develop an on-line tool, that provides information on EIDs linked to early warning systems for preparedness. Both activities planned for Q3/4. | in 2011. This activity continues to maintain the repository of communication materials already available on CREATE website for H5N1, H1N1 and other hygiene and child health issues. | |
| 5.4 | Enhanced C4D including risk communication capacity in the region through UNICEF Cos. Develop institutional partnerships to develop regional resource on risk communication capacity along with key partners such as ARRCI. | Successfully completed training of 50 C4D and programme staff from 18 countries in the AP region on using strategic communication to achieve child health outcomes, including response to emerging and on-going infectious disease outbreaks. Work with partners to map capacity of risk communication in at least 6 countries in Asia Pacific | 75% |

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| Office: | Central and Eastern Europe and the Commonwealth of Independent States (CEE-CIS Regional Office) | | |
| Funds Committed (Allocation): | \$675,000.00 | | |
| Date of Receipt of Funds: | 8 September 2010 | | |
| Funds Disbursed (Requisitioned): | \$538,657.54 | Percentage of Disbursed (Requisitioned): | 80% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p>(i) To support priority countries to develop national intersectoral health communication strategies that improve public health, including addressing threats of pandemic influenza.</p> <p>(ii) To ensure institutional mechanisms to achieve the above are developed.</p> <p>(iii) To support regional and/or national capacity building networks.</p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 5.4 | Concept note, planning and preparation for sub-regional capacity building workshop; sub-regional workshop with 7-10 first phase countries; follow-up activities with countries supported according to agreed milestones and timeline. | A sub-regional capacity building workshop in health communication, health promotion and risk communication was held in Almaty from 4-8 July 2011. Senior officials from the Ministry of Health/Public Health Institutes/ Healthy Lifestyle Centres/Press Secretariat from 12 countries, UNICEF country, regional and headquarters staff and subject experts from various institutions participated. 12 country plans for strengthening health promotion and risk communication capacities were drafted along with an indicative immediate and medium term timeline. Strong collaboration with WHO was achieved on both health promotion and risk communication aspects. Follow-up discussions held with the WHO EURO Regional Office on developing a joint regional health promotion network. WHO HQ have invited UNICEF engagement in the on-going risk communication capacity building process, and offered paid participation at a workshop | 70% |

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| | | <p>for Central Asia in November 2011. These collaborative activities have brought significant synergy and value-add to the process and impact in countries. Similar engagement is being initiated in vaccine related communication, including the introduction of new vaccinations and vaccine safety, between the two agencies.</p> <p>Since the workshop, six final country plans have been received. Others are holding internal stakeholder consultations to discuss the plans and achieve consensus. A new Public Health unit has been created in Armenia, and encouraging discussions were held with the newly appointed director of the unit on developing health promotion capacities using the draft plans as a basis. Similar follow up support is being planned for the next two quarters. A follow up regional workshop is also being considered, as also support through consultants on specific technical or leadership related aspects.</p> | |
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| Office: | Eastern and Southern Africa Regional Office (ESARO) | | |
| Funds Committed (Allocation): | \$612,000.00 | | |
| Date of Receipt of Funds: | 8 September 2010 | | |
| Funds Disbursed (Requisitioned): | \$ 215,774.00 | Percentage of Disbursed (Requisitioned): | 35% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <i>The purpose of the grant is to enhance capacity within the countries of ESA to ensure strong evidence based communications plans are in place for the regional priority areas. In particular this includes the preparedness and response to infectious diseases such as H1N1 and other emerging diseases within a broader context of young child survival and development.</i> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | Conduct mapping/ assessment. Identify priority countries, develop overall strategy and toolkit to guide country develop their local communication outbreak interventions. | Mapping conducted, priority countries identified, and annotated outline of strategy developed. Draft strategy being developed. | 15% |

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| Office: | West and Central Africa Regional Office (WCARO) | | |
| Funds Committed (Allocation): | \$612,000.00 | | |
| Date of Receipt of Funds: | 8 September 2010 | | |
| Funds Disbursed (Requisitioned): | \$ 603,589.00 | Percentage of Disbursed (Requisitioned): | 99% |
| Programme Completion Date: | 31 December 2011 | | |
| Purpose: | <p><i>Supporting countries to develop and integrate H1N1 communications and develop required capacities to respond to emerging and re-emerging disease and reduce the risks for children and families. Specific activities include:</i></p> <p><i>5.1 Support governments in their planning of communication activities</i></p> <p><i>5.2 Strengthen community participation, engagement and partnerships</i></p> <p><i>5.3 Support the development of materials – in real time as the situation evolves</i></p> <p><i>5.4 Support capacity building to facilitate effective delivery and adoption of messages across society</i></p> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | . Develop a framework for C4D Emergency and response planning and its roll it out in the seven countries that received the funding (CAR, Chad, Congo B, DRC, Mali, Sierra Leone and Cote d'Ivoire). | . Draft of a framework for C4D Emergency and response planning . Draft of a guideline to facilitate workshops for planning C4D strategy for water borne diseases in emergency available . C4D emergency preparedness and response framework developed Chad, Ivory Coast, Sierra Leone and three provinces of Congo DRC. . Draft of a training MLM (Mid-Level Managers for EPI) module on C4D | Handbook and guideline: 80% C4D Emergency frameworks: 57% (or 4 out of 7)-no other will be conducted |
| 5.2 | . Development of a handbook for community based C4D approaches for child survival in WCAR context. . Development of a handbook for M&E of community based C4D interventions for child survival in WCAR context. | . Draft of handbook for community based approached for social and behavior change available. . Draft of M&E handbook available. . Participatory appraisal by refugees in three Liberian camps about quality of humanitarian aid as a basis to inform humanitarian decision making in a way that supports community resilience to a disaster. | 80% |
| 5.3 | C4D communication material for promotion of protective behaviours in occasion of water related emergencies for adults and for children will be made available to all 24 countries in the region. | Images for a flipchart, a brochure and materials on the prevention and treatment of water-borne diseases available. Different versions of images have been developed in order to permit local adaptation. | 95% |
| 5.4 | . Training on C4D principles with a focus on Emergency in five countries (Benin, Chad, Congo B, DRC and Guinee Bissau). | Training on C4D principles conducted in Guinee Bissau, Chad, Congo B, DRC. | 80% |

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| Office: | Headquarters (HQ) | | |
| Funds Committed (Allocation): | \$1,036,414.00 | | |
| Date of Receipt of Funds: | 8 September 2010 | | |
| Funds Disbursed (Requisitioned): | 529,468.00 | Percentage of Disbursed (Requisitioned): | 51% |
| Programme Completion Date: | 31 December 2012 | | |
| Purpose: | <i>This project looks to primarily sustain the national Communication for Development (C4D) capacities for emergency responses, including emerging infections such as pandemic influenza. These funds complement those received from other sources to strengthen the C4D capacity.</i> | | |
| Summary of implementation of strategy/plan | | | |
| Activity | Planned | Achieved | % of completion |
| 5.1 | The staff supports countries in developing and integrating H1N1 communications and in developing required capacities to respond to emerging and re-emerging disease and reduce the risks for children and families. | On-going technical and strategic guidance has been provided to four regional offices and 20 country offices to improve their disease-related communications systems and be better able to develop, deliver and evaluate the effectiveness of health interventions messages. | 50 |
| 5.3 | Update and maintain global inventory of guidance, documents and creative materials and make it available in the www. | The inter-agency website (www.influenzaresources.org) and the pandemic influenza intranet site have been continuously updated | 50 |