Communication and Engagement with Older Persons, Persons with Disabilities, Persons with Underlying Medical Conditions and their Caregivers during COVID-19 Response

Protection Working Group _ April 2020

> *NOTE :*
>
> *While COVID 19 can be contracted by all age groups, groups at risk of severe disease include[1]:*
>
> *-Elderly persons (with and without disabilities)*
>
> *-People (with and without disabilities) with underlying medical conditions*
>
> *Note: Some (not all) persons with disabilities have underlying medical conditions*

Tips for inclusive communication

Mainstream actions

1. Use <u>simple, non-medical language</u> in all communication
2. Ensure all communication is in <u>multiple accessible formats</u>. Examples:
   - *TV, radio, community announcements, leaflets/posters/pamphlets, Social media, SMS, whatsapps*
   - *Leaflets/posters/pamphlets/SMS/Whatsapp messages shared to be accompanied with audio format (eg. simple voice recording on telephone)*
   - *Using larger font size and clear images vs. lots of text when printing leaflets/posters/pamphlets*
   - *Informational videos to be produced in Arabic, with Arabic sub-titles*
   - *In face-to-face settings (where/if possible), speak slowly and clearly*

Targeted actions (specifically for older persons/ persons with disabilities/persons with medical conditions/caregivers)

1. Ensure communication in multiple accessible formats is <u>reaching</u> PoC. Examples:
   - *For organizations (providing WASH, Shelter, Health, CM, through CDCs, Specialized Service Providers etc.) that are already in regular contact/follow-up with beneficiaries: create whatsapp groups to share information and answer questions with PoC/caregivers*
   - *Collect FAQs from PoC/caregivers and provide answers through whatsapp groups.*
   - *OVs, CBOs/CSOs, Social Workers to prioritize households with at-risk persons for delivery of information and to maintain frequent contact through whatsapp/telephone calls[2], where safe and appropriate*
   - disseminate hotlines and helplines' numbers and scale-up capacities to respond to calls/two-way communication.

Note: if persons with disabilities, older persons, persons with medical conditions have been identified in needs assessments, consult them on the type of accessible format they require.

2. Develop <u>specific messages</u> in multiple formats for households with <u>most at-risk persons</u>. Examples:
   - *Stop all non-vital visits to household; for essential visits (eg. CBOs, Health personnel) ensure use of masks, hand sanitizer, and maintain safe distance from PoC*

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[1] https://www.un.org/en/un-coronavirus-communications-team/un-working-ensure-vulnerable-groups-not-left-behind-covid-19

[2] *Explain to beneficiaries that remote modalities of communication are for the sake of safety of both staff and beneficiaries within the current situation.*

- o *Removal of shoes when entering household*
- o *Frequent hand/respiratory hygiene for caregivers, especially before feeding, bathing, dressing, assisting PoC*
- o *Separate towels, sheets, cutlery, plates, glasses for PoC to minimize risk of transmission*
3. Develop specific <u>tips for caregivers</u>. Example:
- o *How to provide care if PoC has Covid-19*
- o *Encourage the importance of rest*
- o *How to dispose waste generated from isolated patients*
- o *Share emotional distress helpline 1564, and link to organizations providing MHPSS*

Tips for inclusive outreach

Mainstream actions

Identification: Use Washington Group Short Set (at minimum) or Enhanced Short Set in <u>all</u> Rapid Assessments to identify disability (for older persons and persons with disabilities).
Assessment must also be age and gender sensitive to generate useable data.
Identification will also help you adapt your communication/service delivery
(**Annex 1** WGQ short set household level; **Annex 2** WGQ ENSS household level)
Note: A 2 hr e-learning module is available online for enumerators
https://fr.disasterready.org/collecting-data-for-inclusion

Targeted actions (for older persons/ persons with disabilities/persons with medical conditions/caregivers)

1. Once disability is identified (using WGQs) consider the following questions to identify most-at risk:
- o *Do you/they have any medical conditions?*
- o *Are you/they currently taking any medication on a regular basis? If yes, for what? How do you usually procure medication? Is it free? Is it still easily available?*
- o *Do you/they have a trusted caregiver/support person?*
- o *How to do you/they receive/access information?*
- o *What are the main channels of communication available to you/your household?*
- o *What are the channels of communication you/your household trust most?*
- o *What difficulties do you/they face in accessing information (general)/ information of Covid-19?*
- o *Do you/they have a trusted caregiver/support person who can assist you in accessing information?*
- o *What topic(s) would you like more information on?*
2. Additional questions on PSEA must also be considered to ensure most vulnerable populations have information:
- o Do you know that all assistance is provided free of charge? You should never have to provide any payment or favours to receive any kind of humanitarian assistance, employment, goods or services.
- o Do you have access to means of providing feedback and/or sharing complaints about the services and assistance you receive, including reporting misconduct?