# Scenario exercise: CEA in Emergencies Epidemics

# TASK 2: Planning community-led solutions

**(20 mins)**

Unfortunately, cases of the new influenza virus are increasing rapidly in urban areas. The Alexa Ministry of Health has introduced mask wearing and physical distancing recommendations, but these are not being followed in densely populated areas such as urban slums, markets, or places of worship such as churches and mosques. They have asked Alexa Red Cross to step in and work with these communities to find effective ways to implement prevention measures and bring the outbreak under control.

1. Which groups will you work with and how will you go about identifying and supporting community-led solutions?

If you need help, refer to [module 7 of the CEA Guide](https://communityengagementhub.org/wp-content/uploads/sites/2/2021/11/RCRC_CEA_Guide_2022.pdf) and [CEA Tool 21: Behaviour change and RCCE Resources.](https://communityengagementhub.org/resource/cea-toolkit/)

**Influenza response assessment findings**

* Most people understood standard flu prevention measures, but people said they couldn’t afford to buy masks, and physical distancing and self-isolating when sick would not be possible as they needed to work each day
* The most common sources of information about the new influenza virus were radio (70%), social media (65%), TV (60%) and family, friends, and neighbours (50%)
* However, most people said it was difficult to know which information to trust. The most trusted sources of information about the new virus were community and religious leaders, health workers, and family, friends, and neighbours
* In the poburgs, informal community leaders, women’s groups and market associations said they were being lots of questions about the virus
* There was a higher level of mistrust and denial amongst the Rana communities, who believe the chicken flu has been made up by the Axa Government to destroy their businesses. As a result, a lower percentage of Rana are following key prevention measures like insisting on mask wearing in their shops or allowing staff who are sick to stay home.

**Reminder of information shared in the last task**

Reports of a new strain of influenza have started to emerge in Northeast Alexa. The virus is spreading in urban areas and causing fever, a cough, shortness of breath, headaches, muscle aches, diarrhoea, and vomiting. It seems particularly dangerous for infants, young children, older people, and those whose immune systems are already weakened by conditions such as cancer or HIV. There are already more than 300 suspected cases and 50 deaths, mainly in those whose symptoms developed quickly into pneumonia.

Initial findings by WHO suggest the virus is a new variant of avian influenza, and already the media has started calling the virus the ‘chicken flu’. Prevention measures being promoted by the Alexan Government and WHO include frequent handwashing with soap and water, covering the mouth when sneezing, staying home and self-isolating if you develop symptoms, and wearing a face mask in public places. People are also being advised to make sure any poultry products are thoroughly cooked before eating.

The Alexan Ministry of Health (MoH) is very concerned given the high mortality rates and limited access to healthcare in the Northeast Region. They have asked Alexa Red Cross (ARC) to help lead risk communication and community engagement (RCCE) efforts, as they have been running the resilience programme in this region and have many community-based volunteers. Secondary data available includes:

**Key points from a WHO report on the new avian influenza:**

* While respiratory infections and pneumonia are common in Alexa, this strain of influenza is new and more infectious than existing flu viruses. There are concerns people may not understand the seriousness of this new threat to public health
* The so-called ‘chicken flu’ is being heavily discussed on mainstream media and social media, with a lot of speculation and false information about causes, symptoms, and prevention measures, being widely shared
* Most cases are originating in densely populated areas, including urban slums, called poburgs. The poburgs have formal elected mayors but also informal community leaders, religious leaders, active women’s groups, market associations, and some criminal gangs. Around 70% of the people who live in the poburgs are from the Dali ethnic group.