Ascend COVID-19 flex: Making social behaviour change more accessible and inclusive

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Acronyms

CRPD  Convention of the Rights of People with Disabilities
FCDO  Foreign Commonwealth and Development Office
LNOB  Leave No One Behind
MOH  Ministry of Health
NTDs  Neglected Tropical Diseases
OPDs  Organisations for People with Disabilities
SBC  Social Behaviour Change
SDGs  Sustainable Development Goals
TVC  Television Commercial

Key terms and definitions

Accessibility means that appropriate measures are in place which ensure that people with disabilities can access information and communications, facilities and services on an equal basis with others as outlined in Article 9 of the Convention on the Rights of People with Disabilities (CRPD).

Disability Inclusion means ensuring that people with disabilities can participate in all aspects of society on an equal basis with others, as defined in the UN Convention on the Rights of Persons with Disabilities.

Social Behaviour Change (SBC) is about influencing healthy and inclusive behaviours within society and refers to the actions that people carry out to make this happen.

Assets or creative assets refer to communication materials such as billboards, posters and leaflets, radio jingles and TV commercials.
1. Background

The Ascend West and Central Africa programme (hereafter referred to as ‘Ascend’ or ‘the programme’) is an ambitious integrated neglected tropical disease (NTD) programme funded by the UK Foreign Commonwealth Development Office (FCDO). It is led by a consortium of partners including Sightsavers, the Liverpool School of Tropical Medicine, Mott MacDonald, and the SCI Foundation. Collectively, these organisations have over 100 years’ experience working in partnership with national NTD programmes. They provide strategic and technical oversight, working alongside other partners including M&C Saatchi World Services and in-country implementers.

The programme is providing millions of treatments to prevent, treat and eliminate five NTDs across 13 countries within three years (from April 2019 to March 2022). These diseases include intestinal worms, lymphatic filariasis, river blindness, trachoma, and schistosomiasis. Many of the countries supported through Ascend have suffered decades of civil conflict, have vulnerable health systems, and face severe shortages of trained health workers. The Ascend approach is to ensure that all programme activities are owned by government partners and are integrated within the health system. This strengthens building blocks in the health system to ensure the sustainable delivery of NTD control and elimination activities.

1.1 Ascend COVID-flex response

The far-reaching implications of the COVID-19 pandemic hit when the Ascend programme was nearing the end of its first year and resulted in the rapid adaptation of planned activities. Ascend funding was repurposed in 11 countries for approximately nine months to deliver activities that supported Pillar 2 of the World Health Organization’s COVID-19 Strategic Preparedness and Response Plan, with focus on risk communication and community engagement. Highlights of the Ascend COVID-flex response are visualised in an ArcGIS StoryMap. The emphasis was on ensuring that all COVID-19 health messages were delivered on a large scale, in line with national public health containment recommendations. Furthermore, the SBC campaign and messages were intended to be motivating, inclusive and accessible to vulnerable groups, particularly people with disabilities who are often missed out in response measures. The key stakeholders for this component can be found in Annex 3.

Evidence demonstrates that people with disabilities are disproportionately impacted by COVID-19. Firstly, they are at greater risk of contracting COVID-19, developing serious illness and experiencing more severe social consequences as a result. Secondly, they have been systematically left out of - and discriminated against - during pandemic responses.

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For these reasons, the Ascend SBC campaign set out to ensure that messages and assets were both inclusive and accessible to people with disabilities.

Delivering inclusive and accessible SBC is a specific action that supports the ‘leave no one behind’ (LNOB) guiding principle of the 2030 Agenda for Sustainable Development and its Sustainable Development Goals (SDGs)\(^3\).

### 1.2 The learning action review

**Scope**

A learning action review was conducted in October 2020. The main aim of the review was to gather qualitative data on the design, development, and delivery of a more inclusive and accessible SBC campaign within the rapid and ongoing adaption of Ascend’s response to COVID-19. Good practices applied during the project and the areas of improvement could apply to future projects. The learnings intend to strengthen the impact of SBC for people with and without disabilities:

- For the LNOB strategy and the SBC approach of Ascend more broadly.
- Within Sightsavers’ approaches to providing technical advice and guidance for inclusive and accessible SBC.
- Across wider NTD programming and health sectors, with both government and commercial partners.

**Methodology**

Semi-structured key informant interviews (KIIs) were conducted with 20 individuals from the Ascend programme, including staff from government ministries and consortium partner organisations. These representatives were selected based on their involvement in the SBC component of the Ascend COVID-19 response. Interview questions focused on inclusion and accessibility with the SBC campaigns (shown in Figure 1 Focus areas of the learning questions).

The interview scripts were analysed to look for emerging patterns and themes, and additional information was gathered through the review of programme documents and communications. The results and learning from this process are discussed throughout this learning brief.

### Figure 1 Focus areas of the learning questions.

- Capturing feedback on processes used for inclusive and accessible design
- Exploring benefits and challenges of embedding inclusive and accessible design
- Dissecting the inclusive and accessible design process
- Understanding impact and legacy of the project for inclusion and accessibility

## 2. Inclusion and accessibility guidance

Sightsavers provided technical advice and coaching to the Ascend COVID-19 response project stakeholders on disability inclusion and accessibility throughout the SBC campaign design, development, and delivery. Table 1 describes the type of guidance provided to the project teams during coordination calls and email correspondence, as well as the online resources that were recommended and referred to throughout the guidance.

### Table 1 Guidance and online resources provided to COVID-19 project stakeholders.

<table>
<thead>
<tr>
<th>Inclusion and accessibility</th>
<th>Type of technical support</th>
<th>Details of technical inputs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Communications approach</strong></td>
<td>Guidance on formats – TV, radio, billboards, leaflets and digital</td>
<td>A combination of formats is a useful strategy to increase the likelihood of people with different impairments being exposed to key messages.</td>
</tr>
<tr>
<td>Key local touchpoints</td>
<td>Considering community radio and key touchpoints for communication with those in marginalised communities.</td>
<td></td>
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</tbody>
</table>
| **Accessible format and content** | Text and printed materials | Simple, brief, clear messages with plain language, especially on the priority behaviours of prevention and safety. Combine written text with relevant pictorial information so it can be understood by all, including those with intellectual disabilities or those who have difficulty reading. Accessible design details:  
  - Colour contrast (important for people with visual impairments). 
  - Size of text and visuals (important for people with visual impairments). 
  - Font type, sans serif and letter shape (important for people with dyslexia). 
  - Structured messages using bullet points (clearer for everyone, and easier to follow for people with intellectual disabilities). |
| Visuals and images          | Colour contrast of different elements in an image, size of images in leaflets etc.  
  - Consideration given to facial expressions as a channel of communication. 
  - Sign language interpreter position, size and background. 
  - Logos at a reasonable size and position for easy readability. |
<table>
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| **Accessible format and content** | Videos | - Captions to be included in all videos (for people with hearing impairments) and inputs to ensure adequate size (big enough), speed (not too fast), colour contrast and case (avoid all uppercase) of captions.  
- Recommendations were made on sign language in video content, to promote the inclusion of Deaf people (people with hearing impairments who belong to a Deaf community, use their local sign language as their native language, etc.)  
- Advice was provided on audio descriptions for people with visual impairments. |
| Social media | Brief and clear. Posts should always be combined with pictorial information so they can be understood by all, including those with intellectual disabilities. |
| **Representation and participation** | Visual display of a diversity of people, including people with disabilities | - Showing a range of characters in the visuals.  
- Emphasising the importance of ensuring positive representation of people with disabilities. Suggestion to consider including people with disabilities across information materials (such as portraying a person in a wheelchair among other characters portrayed in an image).  
- Recommendation to avoid visuals representing people with disabilities performing negative actions, such as not wearing masks or sneezing into their hands, to avoid unintended stigma (i.e. to avoid people with disabilities being perceived as spreaders of the virus). |
| Language | Supporting the production of assets in minority languages to reach minority groups (which might be missed by national governments). For more information, please see Annex 2. |
| Clothing and fabric | Consideration of appropriate clothing and fabric based on local geography, socio-economic status, religion, gender, etc. |
Online resources for inclusion and accessibility (recommended by Sightsavers’ Programme Advisor for Social Inclusion)

- WHO Disability considerations during the COVID-19 outbreak
- International Disability Alliance and International Disability and Development Consortium COVID-19 accessibility campaign
- Sightsavers Guidance for including people with disabilities in responses to the COVID-19 pandemic
- Sightsavers Inclusive Health portfolio and organisational inclusion strategy
- Sightsavers accessibility standards (audit pack) and make your work accessible guidebook provides useful tips on accessible person-centred design, with a particular emphasis on visual, text, layout, video, presentations, and digital
- NTD NGO Network cross-cutting group: Disease Management, Disability and Inclusion (DMDI)
- Font recommendations for people with dyslexia
- Sign language guidance for TV
- Examples of TV adverts produced during the 2016 Paralympics by Channel 4 show accessibility at the centre of the creative design process and content that has a strong focus on positive representation: video with captions and British Sign Language and a video with the audio description

3. Planning for inclusion and accessibility

Ascend country teams undertook a rapid and intensive consultation with government partners to develop concept notes for the COVID-19 response. Interventions were prioritised based on gaps identified in national plans.

The SBC component of the concept notes focused on combatting misinformation, encouraging behaviour change in line with WHO guidance, and facilitating community participation. The objectives for inclusion and accessibility for each of the country campaigns were conveyed in the concept notes, yet country specifics on the approach, requirements and expectations to inclusion and accessibility were not detailed. The rapid nature of the response placed constraints on the extent of discussion and level of detail in the planning process.

As shown in Annex 1, concept notes from Ghana, Guinea, and Nigeria provided the greatest level of detail on inclusion and accessibility.

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4 Countries covered: Benin, Burkina Faso, Chad, Cote d’Ivoire, DRC, Ghana, Guinea, Guinea Bissau, Liberia, Nigeria, and Sierra Leone.

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Other countries were able to overcome a lack of detail in their concept notes by incorporating considerations during the design stage. Benin is an example where inclusive and accessible design considerations were incorporated during the development of creative assets, despite a lack of detail being provided in concept notes and time and/or budget constraints, and how these considerations were incorporated. Discover more in the section on Developing inclusive and accessible assets in Benin.

Establishing consensus for inclusion and accessibility design considerations is most advantageous during the development of concept notes. One project stakeholder expressed that reaching agreement earlier on may have reduced the number of amendments required and would have managed expectations of the project team and other stakeholders.

4. Designing for inclusion and accessibility

Across all countries, inclusive and accessible design considerations were applied to the SBC component of the Ascend COVID-flex response. In some countries, participation was more active with requests coming directly from government partners. In other countries, guided discussion led to the consideration and adoption of recommendations. An example of widely applicable and accepted design consideration was the use of colour contrast, highly readable fonts, and visual information.

A more in-depth approach that was adopted in some countries was the use of sign language interpreters and subtitles for video assets such as TV commercials. Sign language interpreters were used in Benin, Burkina Faso, Ghana, Nigeria, and Sierra Leone.

Whilst temporal, financial, and cultural parameters arose during the design of creative assets - influencing what could be developed - suggestions and adjustments to improve inclusion and accessibility were able to be made. Some SBC illustrations positively represented people with disabilities, such as those developed in Benin. In some circumstances, as in the case of Guinea, influential people with disabilities from the local disability community were involved in the shooting of SBC videos.

This was achieved through a consistent emphasis on the importance of mainstreaming inclusion and accessibility. This involved drawing on technical support from Sightsavers Programme Adviser for Social Inclusion within the Sightsavers Social Inclusion team. The following sections reviews the design process in Nigeria and Benin, with example of assets produced.

“If we didn’t make them inclusive, the materials wouldn’t have reached these groups, and that means a section of the population is getting left behind and forgotten about. When it comes to comms in an emergency response, when people’s lives are at stake, we have to consider making them as inclusive as possible.” M&C Saatchi
The case studies below show the progression to a more inclusive and accessible campaign and provide examples of the assets produced in Nigeria and Benin.

Refer to Annex 3 for examples of assets from other countries including Ghana, Guinea, and Sierra Leone.

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**Case Study: Nigeria**

During participatory design meetings, project stakeholders were asked to vote on typography/font, colour palettes, and diversity of design materials. Initial selections did not meet accessibility standards for people with dyslexia.

**Action:**
- Adoption of more suitable font and colour options.
- Development of creative assets in local languages.
- Increase the diversity of people represented in communication materials.

**Results:**
- Fonts improved clarity for people with dyslexia.
- Colours were easier for people with visual impairments.
- Increased diversity of people portrayed in visual materials through the use of appropriate clothes, colours, and patterns.
- Language options increased access for people who spoke minority languages.

**Sign-off on signing in Nigeria**

The Federal Ministry of Health requested their campaign to be inclusive and accessible, specifically the TV commercial.

**Action:** Use of a sign language interpreter and adjustments to text on screen.
Figure 2 The three key accessibility and inclusive components raised by M&C Saatchi in Nigeria: typography, colour palette, and inclusivity of design.

Three styles of typography

1. Eating garlic will not protect you from the virus.
3. Coronavirus has not gone away. Keep your friends and family protected. Stay at least 1 metre apart.

Colour palette

The virus has not gone.
Keep your friends and family protected. Wash your hands often and for 20 seconds.

Cultural representation
Figure 3 A still shot from a TV commercial in Nigeria. Aired in Kaduna State with a sign language interpreter.

Figure 4 An accessible poster used in the Nigeria campaign.
Case Study: Benin

**Creative asset:** A television commercial (TVC) was pre-produced by M&C Saatchi in six local languages with subtitles. Other assets included radio, billboards, posters, flyers and training guides for health workers, religious and traditional leaders.

**Inclusive and accessible design recommendations:**

- Use lower case for subtitles, increase font size and slow down animations.
- Use slightly longer sentences to reduce transition effects and jumping from one sentence to another.
- Amplify ‘singing’ words by using a different colour.
- Use a sign language interpreter and engage a local expert to consider which sign language to use (i.e. the Deaf community is not homogenous and may use different types of sign languages and dialects).
- Consider the position and size of the signer on the screen and the impact of the signer wearing a face mask, which can reduce the use of facial expression and mouthing. See an example from the BBC.
- Ensure a wide range of people are portrayed in the assets, considering age, gender, disability, and religion.

**Results:**

- The design supported people who have hearing loss, are Deaf or have issues with working memory, processing speed or dyslexia.
- The Ministry of Health representative took the position of supporting accessibility before official approval was granted on the TVC.
- The first version of the TVC had been booked before sign language interpretation was finalised. The second version – 72 hours later – incorporated the approved sign language, which was included in all future adverts.
- Illustrations portraying people with disabilities, including a wheelchair user and older women and men using walking canes, were included in some of the assets.
- Training guides for health workers and Christian, Muslim, and indigenous leaders were produced, including use of appropriate traditional clothing, and a variety of characters of different ages and genders. The health workers guide includes recommendations on the higher risks of contagion and severe health consequences experienced by older people, people with disabilities, and pregnant women.
Through guidance, repetition and consistency of inclusion and accessibility technical support, the project teams absorbed the key considerations for inclusive and accessible design (refer to Table 1 Guidance and online resources provided to COVID-19 project stakeholders).

This meant that, over time, transfer of knowledge increased, requirement for support reduced and - when it was needed - became more targeted.

The quotes below show how the ‘penny dropped’ for many stakeholders in the project who expressed how they gained confidence and understanding on how to make their work more inclusive and accessible.

“This more inclusive SBC campaign has provided a great stake in the ground for how we should develop communications with inclusion in mind. **This should form our starting point for future campaigns**, in which we build on our previous work and look for ways to go further in delivering communications which are inclusive.” **M&C Saatchi**

“I feel it's super important in that we should always have the attitude of ‘leaving no one behind’ and unless we start to take inclusivity seriously, people with disabilities will always be left behind. **I also didn't realise how easy it can be to make the work inclusive**, as well as HOW to make it inclusive.” **M&C Saatchi**

“We knew some of the theory, but the technical guidance trained our eyes for accessibility and inclusion.” **Sightsavers**

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**Figure 5** A still shot from a TV commercial in Benin. A sign language interpreter and subtitles in yellow text was used for the words being sung.
5. Embedding inclusion and accessibility

5.1 Drivers and barriers

Each of the project stakeholders faced a range of drivers and barriers to designing and delivering an inclusive and accessible SBC campaign.

- For Ascend project stakeholders, embedding inclusion and accessibility into SBC supports the key objective of LNOB. There was a balance between reaching a wide audience and ensuring the mainstreaming of inclusion and accessibility. This was achieved through the process of developing concept notes and identifying which target population groups to focus on and reach, such as remote or border population groups, people with disabilities, children, people with low literacy or economic status, and women and girls.

“M&C Saatchi and Geopoll are known for applying best practices and are interested in acquiring new practices that enhance their work. Both organisations had to balance time, budget and the practicalities of learning and adapting to new approaches. This was achieved through engagement with Sightsavers’ Programme Advisor for Social Inclusion, allowing for flexibility in processes and communication, and responding positively to feedback.”

- Ministries of Health were key decision-makers on the final content and visuals of the creative assets. Decisions were guided by national COVID-19 response strategies and, in some cases, included existing communication plans that needed to be delivered and reach scale. In some instances, working with an external creative agency and inclusion adviser was a new process outside existing structures, and there was the need to build buy-in. Mainstreaming of inclusion and accessibility in SBC was only one component of the Ascend COVID-19 response and therefore their commitment varied.

Whilst none of the project stakeholders opposed the drive for inclusion, some project partners with a stronger interest influenced the success of recommendations being implemented.
5.2 Effective communication

“Having the social inclusion technical adviser involved gave us the confidence that this was being handled to a high level. His approach was polite, approachable, clear and concise in delivery.” **Project team, Sightsavers**

Effective communication was highlighted as a key factor that enabled inclusion and accessibility considerations to be incorporated into the design of creative assets.

- Project meetings focused on **listening to feedback** from a range of in-country and technical stakeholders **to balance context and good practice** in behaviour change and inclusion.

- Technical advice and guidance provided by the Sightsavers Programme Advisor for Social Inclusion was **delivered in a consultative communication style** that was **clear, approachable, and accommodating** for the diverse range of stakeholders.

“**The Sightsavers team was very supportive. They communicated effectively with timely and accurate feedback and made recommendations on special resources that helped our work.**” **M&C Saatchi**

- **Verbal communication** was strongly preferred and more positively received than written feedback. This was due to:
  - **Fast pace of work benefitting from immediate feedback and decision-making**, especially during meetings and to reduce email overload. It provided an opportunity to tackle the complexities, feasibility and acceptability of recommendations with the project team and decision-makers.
  - **Explaining what was recommended and why it was important.** This provided an opportunity to guide through examples and to humanise the advice, thereby creating empathy for the recommendations to be made.

Throughout the rapid onset response, there was a high volume of last-minute calls and email correspondence. The Programme Adviser attended as many of these meetings as possible and followed up by email on key areas of concern. M&C Saatchi pitched ideas and assets to be considered by a wide range of stakeholders, while the country team provided local realities on context, budget and time. The Ministry of Health had the final say on what would work (or not) in their context. Communication had to be clear, concise, and relevant to all of these stakeholders and for the purpose of decision making.
5.3 Compromise, adaptation, and limitations

Due to the need for a rapid response to COVID-19, compromises had to be reached and adaptations made along the way. It was also the first time that partners involved in this project specifically focused on embedding accessibility and inclusion in SBC approaches, particularly in the context of a rapid emergency response at national level and in multiple countries. As such, the project experienced some limitations in mainstreaming inclusion and accessibility across all processes and products – which offers important lessons for future initiatives.

Concept note stage

One challenge for the project team was to meet the needs of developing concept notes for 11 countries within 10 days. Most governments already had national COVID-19 task forces and existing risk communication plans in place, which set parameters for COVID-19 messaging and the design of creative assets.

However, national plans did not necessarily define inclusion and accessibility requirements - particularly not in detail - for the specific population groups targeted by the Ascend COVID-flex response.

The response concept notes mentioned inclusive and accessible design objectives yet provided limited details on how they would be achieved. Time was limited by the nature of the response, and specific budgets for inclusive and accessible design was not fully known or understood at the time.

Design stage

Achieving inclusive and accessible design required investments of both time and budget, and outcomes had to be balanced with other considerations such as creative concept and cultural context.

As a result, some recommendations such as sign language and audio descriptions for all videos were not feasible to set as a minimum standard. Through negotiation, one notable success across five countries (Benin, Burkina Faso, Guinea, Nigeria, and Sierra Leone) was the mutual agreement to use sign language in all TV commercials.

As part of initial planning sessions, project partners received guidance to make visual assets more inclusive (see Table 1 above). This involved, for example, portraying people wearing appropriate clothing and fabric based on local geography, socio-economic status, religion, gender, and other factors, which was consistently achieved across all countries. Guidance also encouraged partners to explore suitable approaches to portray people with disabilities across information materials. This was achieved in a few countries, although not across all materials, due to several factors. For example, project teams were concerned about causing unintended stigma by inadvertently portraying people with disabilities performing actions perceived as negative, such as not wearing face masks, sneezing into their hands, or simply having COVID-19, with a fear that the virus could be somehow associated to disability.
5.4 Engagement of people with disabilities

Due to the short timeframe of the COVID-19 response, M&C Saatchi had to condense the first three steps (define, discover, distil) of their design process which meant that formative research on inclusive and accessibility needs of the target population groups was not carried out. Recognising this as a limitation, insights and priorities detailed in the concept notes were relied upon, along with further insights and priorities from the country teams and the programme adviser for social inclusion.

In Benin, for example, formative research was conducted among 2,397 participants to gather information on community knowledge, perceptions, and attitudes on COVID-19. This provided valuable insight on cultural influencers, peer pressure and trust around government messages. This also added validity and made a huge difference to the targeting and quality of the final campaign. However, due to workload pressures, the country team did not manage to coordinate with local organisations of people with disabilities – and as a result, people with disabilities were not proactively targeted to be included in the focus groups, which was recognised as a significant limitation.
Comprehensive pre-testing with target populations – including people with disabilities – could not be carried out and verification of creative concepts was provided by project team members, country stakeholders, and the programme adviser for social inclusion.

However, organisations of people with disabilities were actively engaged in the monitoring and evaluation phase, as described in the following section.

6. Inclusive monitoring and evaluation

Geopoll is a data collection and market research agency with a large influence over the capture of global data. It was agreed at the design stage to contract this organisation to gather feedback on the SBC campaign from 300 people in each of the 11 countries using remote, telephone-based surveys.

The project team developed a strong and productive relationship with Geopoll, and the Sightsavers Programme Advisor for Social Inclusion highlighted two key accessibility and inclusion concerns to the project team:

- The use of incentive-based telephone surveys may exclude or create barriers for certain people with disabilities, such as people with hearing or intellectual impairments.
- The survey approach lacked demographic data on disability, which prevented the team from gathering evidence on the percentage of people with disabilities engaging in the surveys and from analysing the results from a disability perspective.

Potential solutions to these limitations were explored to find a cost-neutral and commercially viable solution to make the monitoring and evaluation process more inclusive. Eventually, the team agreed to conduct pilot exercises in Nigeria and Ghana, using an accessible web-based survey. Different perspectives helped to guide the decisions towards cost effective, practical, and scaled solutions.

It was agreed that Sightsavers would provide technical input on the inclusion elements of the survey and how it would be administered by leading engagement with existing partners (Organisations of Persons with Disabilities) to identify at least 30 people in each country with different types of impairments to be included in the monitoring study, thereby contributing to the wider survey results.

The survey was self-administered using smartphones, tablets and/or laptops – reasonable accommodations and support were provided to those participants who required this technology through organisations for people with disabilities. The targeted survey mirrored the process and questions of the broader cross-country survey and was quality-assured by Geopoll. Accessible videos with sign language interpretation and captions were used instead of the radio messages used in the main survey.

The team explored the use of the Washington Group Short Set of questions in the survey, to capture data on respondents with disabilities. Whilst the team felt it was not viable to embed these questions in the general surveys, Geopoll expressed interest in integrating them in the future as part of wider demographic data collected when people sign up to their panels.
As part of the pilot approaches in Ghana and Nigeria which specifically aimed to reach people who self-identify as people with disabilities, disability data was gathered using a single question on impairment groups (adapted from the COVID-19 disability rights monitor survey developed by International Disability alliance (IDA), International Disability and Development Consortium (IDDC) and other partners). Through this approach, the team aimed to capture more granular information on the population reached through the survey, and results show that participants included representatives of traditionally marginalised groups, such as Deaf people, people with mental health conditions, people with intellectual disabilities and people with deaf-blindness (the full results are presented as part of the main Ascend monitoring and evaluation report).

“This process is giving a voice to people who have disabilities. This business doesn’t have a packaged solution to this that is not expensive. Working with Sightsavers and similar organisations to find the solutions together – it has worked really well.” Geopoll

“I am pleased we have managed to include people with disabilities within our surveys in Ghana and Nigeria, but it would have been nice to have the facility to do this in more countries.” M&C Saatchi

How will we see the impact?

Measuring the impact of SBC can be challenging. Adding the aspect of inclusion and accessibility within a fast-paced public health response is even more so. The work with Geopoll looks to fill some of the gaps on disaggregated data on people with disabilities but we must acknowledge that the sample size is small and not representative of the wider population.

Three key aspects that generated positive outcomes for this project are:

- Different perspectives helped to guide the decisions towards cost-effective, practical, and scaled solutions.
- Designing inclusion into the monitoring and evaluation approach allowed Ascend to understand the impact of inclusive and accessible SBC.
- The approaches introduced through the project extend beyond COVID-19 and will support the process for Geopoll to mainstream inclusion into its global monitoring platforms.
7. What have we learned?

The Ascend COVID-19 response has been highly collaborative and truly pioneering. It is the first time a large-scale integrated NTD programme has delivered a more inclusive and accessible SBC campaign using a mass media approach. Across West and Central Africa, Ministry of Health partners and Ascend consortium partners have been on a learning journey, with many respondents reporting an increase in knowledge, awareness, and capacity on what inclusive and accessible SBC looks like in practice. The experience has helped to define processes and approaches that deliver inclusive and accessible SBC.

The project teams brought together a unique combination of strong local knowledge and insight, with technical expertise on social inclusion accessibility, and SBC. Despite the lack of impact data, the stakeholders interviewed were positive and optimistic about the level of inclusion and accessibility that was included in this rapid, multi stakeholder, 11 country SBC campaign.

The impact of the work will result in a commitment from the project stakeholders in taking forward lessons learnt on inclusive and accessible design to adapt future projects. Sightsavers, M&C Saatchi and Geopoll team members all expressed that they had acquired new knowledge as a result of being part of the project and conveyed strong commitment to take forward and embed learning into their respective organisational systems, structures, and approaches for future projects.

“The SBC materials are absolutely better due to the input of technical advice on accessibility and inclusion. They are simpler, clearer, and more accessible. The materials are a measurement of success themselves.”

Sightsavers

“We want to build on this and do it [inclusion] better in our NTD work. I am hoping that by incorporating inclusion elements in SBC for NTDs now, it becomes expected and is consistently done, even in an emergency.”

Project team, Sightsavers

“I will certainly make sure I consider accessibility and inclusivity in future when developing communications for other organisations.”

M&C Saatchi
**Recommendations for future projects**

Through this learning action review project stakeholders were able to pause and reflect on the successes and challenges of the COVID campaign in the Ascend programme. This has helped to capture learning and to make recommendations on how future programmes can adapt to make SBC more accessible and inclusive.

1. Create a shared understanding amongst the project team and stakeholders on **what accessibility, inclusion and/or LNOB means for the project and how this looks in practice**.

2. Consider **SBC as an approach to mainstream social and disability inclusion** and how the creative process, assets and messages can be usable by all people - to the greatest extent possible - and to those who may be left out or experience barriers.

3. Convert inclusive and accessibility ideals into **practical recommendations**. Embed ‘universal design’ throughout the project cycle, and frame inclusion and accessible design of SBC around the needs of the target audience(s).

4. **Encourage dialogue in meetings with decision-makers** where commitments can be made. Emphasise and **articulate why** inclusive and accessible design of behaviour change is important for the project through **humanising the impact** it has on the people it intends to reach and by providing practical examples. Use empathy and persuasive, simple communication as a driving force throughout the design process to mitigate or remove potential barriers.

5. Present a perspective that the time and cost for **inclusive and accessible design is an investment** that generates a greater impact for more people – and **allocate sufficient budget and time** to embed inclusion and accessibility throughout all aspects of the design process.

6. Inclusive and accessible design of SBC does not exist within a vacuum. During a public health emergency, it is even more essential to **coordinate and collaborate** with different ministries (Ministry of Health, Information and Communication, national taskforces, etc.) to **reinforce messages around inclusion and accessibility** of SBC.

7. Be **willing to make compromises and adjustments** on what is feasible for the scope of the project and the drivers of stakeholders. The design process can be a matter of negotiation between technical, management, and national stakeholders. Embrace different perspectives and seek consensus on priorities. The outcome requires a balance of local realities, budget, and time available to deliver.

8. **Utilise existing online tools and resources** to strengthen understanding on inclusion and accessibility. Written guidance is important but not sufficient when looking to embed accessibility into organisational processes and decisions. Consider an **approach that suits the communication style of stakeholders and decision-makers** – whether that be verbal and consultative or written and instructive, etc.
9. Right expertise at the right time, in the right way. **Seek out technical support early on** to understand the ‘what’ and ‘how’. Knowing what is and is not inclusive and/or accessible is not always intuitive or obvious.

10. **Foster connections** with national organisations and/or community groups that represent target audiences for LNOB, for example organisations for people with disabilities (OPDs). **Make it count** by promoting meaningful participation and feedback loops from project planning through to creative design, pretesting, monitoring and evaluation.

11. Formative analysis and comprehensive pre-testing may not be possible within short timeframes and/or resource constraints, such as a public health emergency, yet where possible they are corners that should not be cut. **Plan and budget for formative analysis and pre-testing to add confidence that the approaches are relevant and appropriate** for all audiences, but especially those who may be left behind. In the absence of formative analysis or pre-testing, leverage the knowledge and experience of the project team, technical advisors and connections with other stakeholders such as OPDs.

12. Explore opportunities to better monitor the desired behaviour change (outcomes and impact), by **tracking the primary audience and embedding disability data within project monitoring and evaluation** approaches.

13. **Apply inclusive and accessible principles to monitoring and evaluation**, such as survey questions and delivery formats.

14. Expand on relationships with organisations like Geopoll to provide examples and **opportunities to mainstream inclusion into global monitoring platforms** and reach people with disabilities who would otherwise not be included in monitoring data.
Annex 1 – Concept notes: inclusive and accessible design consideration for SBC

Table 2 shows SBC components of the Ascend COVID-19 response concept notes across 11 countries, outlining the level of detail provided on inclusion and/or accessibility.

<table>
<thead>
<tr>
<th>Country</th>
<th>SBC components of the concept note</th>
<th>Inclusion or accessibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>Mobilisation of community networks with a mass media campaign</td>
<td>Community awareness and social inclusion, particularly targeting women’s groups, people with visual and hearing impairments, and minority language groups.</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>Community engagement activities</td>
<td>Focus on engaging and reaching people living with disabilities, elderly people, pregnant and lactating women, and those with chronic or underlying health conditions. Use of local language.</td>
</tr>
<tr>
<td>Chad</td>
<td>Behaviour change community response</td>
<td>Ensure messages are accessible to people with disabilities, slum dwellers, people who are illiterate, nomads and minority language groups. Consider accessible formats, language, and font size.</td>
</tr>
<tr>
<td>Cote d'Ivoire</td>
<td>Dissemination of awareness messages</td>
<td>Include a wide range of stakeholders and consider local language and illiteracy.</td>
</tr>
<tr>
<td>DRC</td>
<td>Mass communication campaign which focused on low update of prevention behaviours, rumours and misinformation, and fear and anxiety.</td>
<td>The main aim was to increase the reach of mass information, with recognition of adapting communications to reach specific audiences such as hard to reach locations, and vulnerable and at-risk groups.</td>
</tr>
<tr>
<td>Ghana</td>
<td>Risk communication through mass communication (TV, radio and social media) alongside border community engagement.</td>
<td>Target risk communication for children and border communities. Tailor messages to be context-specific and use appropriate language, characters, stories, music, and humour for these audiences.</td>
</tr>
<tr>
<td>Country</td>
<td>SBC components of the concept note</td>
<td>Inclusion or accessibility</td>
</tr>
<tr>
<td>---------------</td>
<td>----------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Guinea</td>
<td>Risk communication through community awareness sessions, radio/TV, and production of tools.</td>
<td>Ensure all communication formats and messages are accessible to people with disabilities and considering high rates of illiteracy. Consideration of sign language, adapted audio and visual enhancements. Recognition of additional caring needs of people with disabilities to carry out key behaviours.</td>
</tr>
<tr>
<td>Guinea Bissau</td>
<td>SBC was not on the list of gaps identified.</td>
<td></td>
</tr>
<tr>
<td>Liberia</td>
<td>Risk communication through jingles, talk shows on local radio for community engagement, posters, and brochures.</td>
<td>Mention of vulnerable communities.</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Behaviour change communication response through culturally accessible communication materials and interactive channels: TV, radio, social media, posters, pamphlets, and billboards.</td>
<td>Existing risk communication materials were not accessible in formats for people with visual and hearing impairments. Design of SBC materials to consider indigenous languages and materials that are accessible to people with disabilities, young people, and women in purdah without adequate access to information.</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>Risk communication and social mobilisation to raise awareness in border communities.</td>
<td>Context and audience-specific information. Recognition of LNOB in messages and materials.</td>
</tr>
</tbody>
</table>
Annex 2 – Creative assets: summary of assets produced for the Ascend COVID-19 response

Table 3 shows the range of assets across nine countries produced for the Ascend COVID-19 response SBC campaigns.

<table>
<thead>
<tr>
<th>Country/Asset type</th>
<th>TV commercial</th>
<th>Radio</th>
<th>Billboards</th>
<th>Training guide</th>
<th>Poster/leaflets</th>
<th>Social media</th>
<th>Influencer videos</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>7 languages - French subtitles</td>
<td>7 languages</td>
<td>3 designs</td>
<td>4 (Muslim, Christian, Animism and Health workers)</td>
<td>2 posters 1 flyer 1 banner</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>4 languages</td>
<td>4 languages</td>
<td></td>
<td></td>
<td>1 poster</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chad</td>
<td></td>
<td></td>
<td>2 designs</td>
<td></td>
<td>5 posters 1 leaflet</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DRC</td>
<td>4 adverts in 5 languages</td>
<td>15-minute interviews in 5 languages</td>
<td>4 adverts in 5 languages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Country/Asset type</td>
<td>TV commercial</td>
<td>Radio</td>
<td>Billboards</td>
<td>Training guide</td>
<td>Poster/leaflets</td>
<td>Social media</td>
<td>Influencer videos</td>
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</tr>
<tr>
<td>Ghana</td>
<td>1 advert in 1 language</td>
<td>1 advert in English</td>
<td>2 designs</td>
<td></td>
<td></td>
<td>5 versions in 7 languages</td>
<td></td>
</tr>
<tr>
<td>Guinea</td>
<td>3 versions</td>
<td></td>
<td></td>
<td></td>
<td>2 posters</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nigeria</td>
<td>3 adverts in 3 languages</td>
<td>3 adverts in 3 languages</td>
<td>22 layouts in 3 languages</td>
<td>1 training video in 3 languages</td>
<td>2 leaflets in 3 languages</td>
<td>3 versions in 3 languages</td>
<td>8 versions (4 videos in 2 languages)</td>
</tr>
<tr>
<td>Liberia</td>
<td></td>
<td>2 adverts in 13 languages</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>2 adverts in 4 languages</td>
<td>3 designs</td>
<td></td>
<td></td>
<td>3 (A2) posters 1 (A1) design 1 leaflet</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Annex 3 – Creative assets: country SBC campaign examples

Watch the SBC video material on the Sightsavers YouTube channel.

Figure 6 A billboard from Sierra Leone. Young people are shown washing their hands and wearing face masks.

Figure 7 A still shot from a video in Guinea. A representative of the Guinean Union of the Blind and Visually Impaired promotes handwashing best practice.
Figure 8 An image from the Ghanaian social media commercial which targeted children. It focused on the importance of communication via phone as a way to stay in contact with friends during lockdown.

Figure 2 (below left) A Muslim religious leader is illustrated sharing the ‘truth’ about how to stop the spread of Covid-19.

Figure 3 (below right) In the training manual for health workers, volunteers distribute face masks and soap, and are illustrated interacting with an older woman using a walking cane.
Each project stakeholder shown in Figure 11 played a key role in the SBC campaign of the Ascend COVID-19 response. Key contributors for inclusive and accessible SBC were M&C Saatchi, Ascend country principals, and the Sightsavers team.

**M&C Saatchi** is a world-class communications expert under contract with the Ascend programme to address social and behavioural change challenges as part of the integrated NTD work. They have extensive experience developing behaviour change communications for social issues and public health, both in Africa and other regions, and are currently the leading advisor on COVID-19 messaging for Public Health England and the Ministry of Information in Pakistan. As such, they are used to working in partnership with governments to ensure emergency health communications are effective, nuanced, and innovative.

The specialised team brought a clear process to the design and development of creative assets, using a ‘6Ds’ model to ensure a strong understanding of the target audience for the campaign choices. The insights gained through following this process informed high-quality creative designs that are engaging with clear, visible, and impactful messages that resonate with the target audience. In collaboration with local media agencies and national delivery partners, M&C Saatchi led the mass media communications components of the Ascend COVID-19 response. Local agencies and partners worked closely with the Ascend country principal and the Ministry of Health.
Ascend country principals are the key points of contact for Ascend work in each country. They oversee and coordinate Ascend workplans and implementation to ensure activities are part of the integrated NTD programming. For the Ascend COVID-19 response, country principals leveraged existing relationships and built new ones, identifying, and engaging the right stakeholders for the project. Working with national governments, they advocated for and communicated the role of M&C Saatchi, Sightsavers’ social inclusion and design recommendations and the Ascend processes for review and approvals.

They also provided insights into local contexts so that the design and development of creative assets was applicable to contextual realities.

Sightsavers has distinct expertise in social inclusion and accessible design within the organisation. The Social Inclusion team provides technical expertise across the organisation on disability inclusion and ensures the rights of people with disabilities in all their diversity. The design team has expertise and experience in the accessible design of assets such as posters and billboard, graphics, video production, social media, events and copywriting, and can provide internal accessibility testing.

Sightsavers’ approach to SBC aims to use a systematic, evidence-based set of steps to promote positive social and behavioural change. Often (but not always), SBC is delivered using strategic communication tools and social mobilisation approaches. We have a Behaviour Change and WASH team (BeWat) within NTDs who provide technical guidance on using a systematic, evidenced-based and innovative approach to promote positive behaviour change, especially in WASH and NTDs.
We work with partners in low and middle income countries to eliminate avoidable blindness and promote equal opportunities for people with disabilities.

www.sightsavers.org