COVID-19: DIGITAL AND REMOTE APPROACHES IN ELIMINATING FEMALE GENITAL MUTILATION AND CHILD MARRIAGE

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01 INTRODUCTION

Digital information technologies and social media platforms have become important means of communication used by UNICEF and its partners. The physical distancing requirements during the COVID-19 pandemic have further strengthened reliance on mass media, social media and mobile technology as a way of reaching and engaging with intended audiences. Even where access to digital resources remains limited, country programmes are launching innovative approaches to continue social and behaviour change activities despite the physical distancing challenge, combining new and more traditional communication methods. This guidance note is designed to support country programmes to conduct quality, evidence-based, meaningful and measurable engagement for prevention of harmful practices programming, even when interpersonal communication is not possible. In particular, this note will:

- Outline commonly used digital communications resources and their functions
- Provide insights into information that can help design and/or refine behavioural and social norms programming for digital approaches
- Highlight a series of tips for conducting effective digital engagement activities
- Outline complementary channels to enhance the reach of digital approaches
With continual advances in the digital sphere, more options emerge for engaging remotely with intended audiences. Table 1 aims to give readers an overview of commonly used digital platforms and the functions they can perform. A more detailed description of each platform can be found in Appendix 1.

The choice of digital engagement option(s) will depend on the country context and communication ecosystem. Developing a plan for digital engagement requires an understanding of the social, political and economic context, as these often define access and use of digital resources by intended audiences. Mapping the digital landscape, including identifying channels, resources and communication spaces, as well as identifying communities with limited access to digital and media channels, can help define a comprehensive strategy, where digital and traditional approaches intersect to ensure greater reach.

Table 1 provides a list of remote mobile and digital engagement options, noting the requirements for implementing them and their suitability for two-way communication. This information is intended to help programmes identify the most suitable approaches for their individual context.

### TABLE 1: FUNCTION

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<tr>
<th>FUNCTION</th>
<th>BRIEF DESCRIPTION OF POSSIBLE USES</th>
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| Gather social data                    | • Polling and surveys, such as RapidPro, U-Report, GeoPoll, IPSOS ODK/Ona/Kobo, and Viamo, can be used to quickly assess important elements such as knowledge, attitudes, perceptions, perceived expectations, intention and behaviours of communities regarding harmful practices.  
• These tools can also be used to identify information gaps.  
• Tools that provide data visualization options, such as Magicbox and Power BI, can help better present information to facilitate evidence-based decision making by packaging feedback to allow for real time monitoring. |
| Share information and promote services | • Messages around harmful practices can be disseminated across UNICEF, Government and partners’ websites and social media platforms, mass media and mobile networks.  
• These platforms can also be used to advise the public of available services, including trusted information sources and helplines. |
| Facilitate dialogue and engagement with intended audiences | • Digital platforms can be used to facilitate two-way communication and dialogue with intended audiences (e.g. adolescents, parents, influencers, service providers).  
• RapidPro platforms can support and set up additional tools such as the Internet of Good Things (IOGT), Chatbots, U-Report and Viamo to provide an interactive space for dialogue and engagement around specific content.  
• Selection of the appropriate platform will depend on the needs, infrastructure, capacities of intended users and context.  
• Social media and messaging platforms such as Viber, WhatsApp, Facebook Messenger and Facebook groups, as well simpler SMS technology, can be used to disseminate correct information and solicit feedback.  
• Interactive Voice Response (IVR), such as Viamo, Echo, and Orange Voice Pro, can be effective in low literacy settings to share information and solicit feedback. |
| Support training and capacity building | • Existing digital platforms and resources can be used to support key workers, by sharing essential information and training packages, providing them with resources and digital solutions to enhance their reach to intended audiences.  
• Remote training and virtual instruction can be provided to community and faith leaders, mobilisers, mentors and peer educators through platforms such as RapidPro, Chatbots, U-Report, the Internet of Good things, and Viamo. |
| Tracking and addressing sentiment and misinformation | • Digital engagement resources, such as call-centres, social media platforms, and digital engagement solutions, can be harnessed to gather information on the dominant sentiment about a given topic (e.g. harmful practices, COVID-19, education, gender).  
• Social mobilizers, peer educators, mentors and partners can be capacitated as users of social media to conduct social listening and to track and address misinformation.  
• Social media platforms can be used to promote referral to trusted sources of information and services. |

1 Adapted from UNICEF’s “Digital Community Engagement Strengthening Polio C4D Strategies” Concept Note, UNICEF, June 2020
When it comes to harmful practices and the COVID-19 pandemic, it is important to recognize how the pandemic and the restrictions imposed are affecting people’s behaviours, including those related to harmful practices. For instance, there is evidence that in parts of the world, child marriage is on the rise as families try to cope with financial burdens brought about by the pandemic, while in some communities, the female genital mutilation (FGM) season is being anticipated to take advantage of schools’ closure and disruption in protection systems.

Programmes need to devise ways to keep abreast of how the pandemic is affecting people’s thoughts, beliefs, attitudes, feelings, motivation and intention around FGM and child marriage. Such information, as well as information on the communication landscape and available digital options, can be gathered via a rapid desk review and rapid assessments. Together, these will shed light on important elements for behaviour and social norms change programming, such as identifying key audiences and influencers, which may have changed as a result of the pandemic, determining appropriate channels to reach them both on and off-line, and tailoring messages and content to the new situation.

**GATHERING INFORMATION TO HELP DESIGN AND REFINE BEHAVIOUR AND SOCIAL NORMS PROGRAMMING**

A rapid desk review should look at media habits of intended audiences, trusted and utilized information sources, and credible spokespersons. In exploring digital media habits, remember to look at mobile device ownership and access (noting the distribution of smart phones versus low-end devices, such as feature phones), network strength, availability, speed, popular data packages and utilization of any low-bandwidth applications, such as Facebook Lite, or applications that are available free of data charges through Mobile Network Operator partnerships, such as Free Basics by Facebook.

**A. RAPID ASSESSMENT AND SURVEYS**

These will give you insights into if and how people’s perceptions, attitudes, intentions and intended behaviours are changing. Assessments should be conducted both with your intended audiences as determined by the desk review (girls, boys, women, parents, and other relevant community members), and with key stakeholders, such as community and faith leaders, current and former excisors, social workers, women and youth leaders, and other individuals who are likely to have a good understanding of how

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<th>TABLE 2: COMMONLY USED DIGITAL PLATFORMS AND THEIR FUNCTIONS</th>
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<td><strong>REMOTE ENGAGEMENT OPTION</strong></td>
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<tr>
<td>Radio</td>
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<tr>
<td>Television</td>
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<tr>
<td>Interactive Voice Response (IVR)</td>
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<tr>
<td>SMS*</td>
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<tr>
<td>Web, Free Basics (e.g., Internet of Good Things)</td>
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<tr>
<td>Web, Facebook Lite</td>
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<td>Facebook Messenger*, WhatsApp*, Viber*</td>
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* Platforms where U-Report and RapidPro function
harmful practices are evolving in the community. Consider conducting the assessment at regular intervals (every 2 to 3 months) during the pandemic to monitor any changes and adapt interventions accordingly.

B. REMOTE SURVEY OPTIONS

These will be necessary when physical distancing measures are in place. Table 1 provides a list of possible options of commonly used applications. You can find an example of how IVR has been successfully used in Ghana to assess media exposure and behavioural determinants in this monitoring and evaluation note.

Wherever possible, prioritize solutions that do not require data bundles in order to reach the widest audiences. IVR, USSD and SMS (via RapidPro or other solutions) are generally preferred to social media applications such as WhatsApp, Viber and Facebook Messenger. For ideas on how to conduct remote assessments, you can refer to this summary of methodologies in the era of social distancing and review this guidance on SMS and IVR surveys.

You should also be aware that, while digital and mobile platforms allow you to gather data, they remain inaccessible to many. You can refer to Box 1 for some considerations on how to keep your surveys inclusive.

To capture information that can help shape your behaviour and social norms change programme and integration of digital components, your surveys should aim to ask questions that shed light on the following three areas:

**PRACTICES, BEHAVIOURS AND DRIVERS:**
- If and how the prevalence of harmful practices is changing during the pandemic
- What families think and feel about engaging in harmful practices during the pandemic
- Who engages in the harmful practices
- Who, in the household, decides if the girl marries and/or undergoes FGM
- Why respondents think it is important (if at all) to engage in harmful practices at this time
- Whether families/respondents intend to engage in the practice now

**NORMS:**
- Whether respondents believe/think that a majority of community members will engage in harmful practices during the pandemic
- Whether respondents believe/think they are expected to engage in the harmful practices at this time by those who matter to them

**INFORMATION, COMMUNICATION AND SOCIAL NETWORKS:**
- How respondents employ their time during periods of confinement
- The people respondents communicate/engage with regularly in these times
- The spokespersons who are most trusted in the community/among your intended audiences
- The trusted and utilized sources of information in these times, especially around harmful practices

**BOX 1: CONSIDERATIONS FOR INCLUSIVE REMOTE ASSESSMENTS**

Wherever possible, prioritize solutions that do not require data bundles in order to reach the widest audiences. IVR, USSD and SMS (via RapidPro or other solutions) are generally preferred to social media applications such as WhatsApp, Viber and Facebook Messenger.

Where access to mobile phones is limited, ask local leaders to conduct the assessments with community members. They can do this by using tablets provided by your organization or paper-based questionnaires that can then be collated by the programme.

Local leaders can also help people with impairments to complete the survey. Encourage them to approach people with disabilities in their community so that their views are also reflected in your assessments.

Where lockdown orders do not allow for direct interactions, try to include the views of the most marginalized by asking questions about their needs to groups and leaders who represent them.

Translate the questionnaires and assessments in relevant languages, paying particular attention to the languages spoken by women and by vulnerable and remote communities.

*(Please refer to the Resources section at the end of this note for more ideas on inclusive approaches)*
Respondents’ media habits, in particular their digital media habits and who their online influencers are

Respondents’ network access, data access, device sharing practices and phone type

Information gathered from these rapid assessments will provide insights into how the pandemic is affecting people’s engagement with harmful practices, and help you shape and adapt your programme and digital engagement activities accordingly.

**TIPS FOR CONDUCTING EFFECTIVE DIGITAL ENGAGEMENT**

Digital and online modes of engagement allow users to connect virtually, share content and ideas, and engage in discussions with unprecedented reach, usability and immediacy. They represent a channel that can complement and enhance communication interventions for behaviour and social change. The 14 tips summarized in Box 2 will help you make the most of your digital approaches, ensuring they are evidence-based and promote meaningful engagement with intended audiences.

**LINK YOUR DIGITAL EFFORTS TO YOUR PROGRAMME’S THEORY OF CHANGE:** When you devise your programme’s theory of change, you need to consider behavioural determinants beyond the individual level, and include contextual, environmental and inter-personal factors too. Your digital approaches should align to your existing theory of change and reflect the findings from the desk review and rapid assessments described above. You can find links to behavioural theories in the reference section at the end of this note.

**TAILOR ACTIVITIES TO YOUR INTENDED AUDIENCES’ HABITS AND PREFERENCES:** It is crucial that you meet your intended audiences where they are. For this, you will need to understand their media and technology access and use, including information about devices, channels, media sources, influencers, popular data packages, and more.

**BOX 2: 14 TIPS FOR EFFECTIVE DIGITAL ENGAGEMENT**

1. Link your digital efforts to your programme’s theory of change
2. Tailor activities to your intended audiences’ habits and preferences
3. Reach both girls and boys
4. Provide opportunities for audiences to interact with your digital content
5. Build trust and use credible champions
6. Develop engaging concise content
7. Pre-test your concepts
8. Think carefully about language and literacy
9. Factor in costs and data limitations
10. Promote your digital platform
11. Budget for moderation and management of content and comments
12. Avail capacity to respond to additional demand generated
13. Put digital safeguarding in place
14. Make a plan for feedback to your users

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2 Adapted from iMedia’s *Digital and Social Media for Social and Behaviour Change Communication*, (2019)
network strength, and other elements that are related to whether and how they access and use digital devices, programmes and platforms. The assessments described above will shed light on many of these areas.

3 REACH BOTH GIRLS AND BOYS: To address norms within the community as a whole, your digital interventions should not exclusively focus on girls. Gender norms interventions for example, should also engage boys and men. You can see an example of how men have been engaged against harmful practices in Box 3 and refer to UNFPA’s and UNICEF’s technical note on partnering with men and boys to end child marriage in the Global Programme to End Child Marriage for more information on this topic.

4 PROVIDE OPPORTUNITIES FOR YOUR AUDIENCES TO INTERACT WITH YOUR DIGITAL CONTENT: Digital interventions can be designed flexibly to include interactive components (two-way communication), opportunities for feedback, and timed messaging to engage users in targeted ways. Build-in opportunities for engagement such as closed discussion groups, virtual counselling, testimonials, challenges and feedback, that are adapted to the needs, and digital media habits of your different audience segments. For examples of innovative digital engagement you can read about mobile-phone based hygiene and sanitation promotion in Somalia, and the use of how adolescent girls in Mozambique are empowered through SMS Biz. Co-creating activities with your intended users is an effective way of engaging them while ensuring that your activities resonate with them. You can provide opportunities for them to input into the design process, either virtually or in person through workshops or sprint design events. For a practical example of how to co-create with your audience, read here about how UNICEF Latin America and the Caribbean Regional Office co-created UPSHIFT with adolescents, a programme aimed and empowering young people to become social innovators and entrepreneurs through leading approaches in youth development and private sector tools.

5 BUILD TRUST AND USE CREDIBLE CHAMPIONS: The use of trusted and credible influencers, spokespersons and champions is a well-established practice in the field of social and behaviour change, including within the digital sphere. Select your spokespersons based on the findings from your initial assessments, and test whether they really are credible, popular influencers that resonate with your intended audiences and your programme. Examples of such champions include, national and local celebrities, political figures, government agencies, international or national/local non-governmental organizations, and even fictional characters developed exclusively for your intervention.

6 DEVELOP ENGAGING, CONCISE CONTENT: The content you develop should command attention and encourage users to engage with it. For this, it needs to be appealing and concise. Use an eye-catching headline of no more than eight words (suggested number of words for highest click-rate) and pre-package your content so that it is easily sharable. When using images remember that low-end devices have a low screen resolution and digital images should therefore not include text in them. Text should be formatted around the images. This will also increase the application opportunities of content across platforms.

BOX 3: ENGAGING MEN FOR THE ELIMINATION OF HARMFUL PRACTICES

In Senegal, UNICEF’s supported programme, used a combination of education and social mobilization to empower women and communities to reduce FGM and child marriage. The strategic approach involved seeking the buy-in of male village leaders, employ local facilitators to teach education sessions, tap into local communication channels and use community dialogue with both men and women. The programme purposely targeted men to enlist their support and mobilized male community and religious leaders, as well as engaging women and girls, in an effort to ensure that abandoning FGM was a collective and explicit decision, involving a whole-community approach. Evaluation results from the male engagement component of this work showed positive changes in knowledge, attitudes and behaviours, which ultimately led to a public declaration against FGM and early marriage, as well as a slight reduction in child marriages.
7 PRE-TEST YOUR CONCEPTS: Factor in time and money to pre-test your concepts with your intended audiences to ensure they resonate and are received and understood the way you expect them to be. For guidance on pre-testing, you can refer to this pre-testing guide developed by UNICEF during the COVID-19 pandemic. Try to personalize data and feeds based on your users’ characteristics generated from click-data research that indicate the type of content they are more likely to engage with.

(To learn more about this, see this story from UNICEF Senegal on rural outreach on health and human rights: https://www.unicef.org/infobycountry/senegal_53695.html)

8 THINK CAREFULLY ABOUT LANGUAGE AND LITERACY: Assess the level of literacy of your intended audiences to determine how to engage with them digitally and what language and terms to use. Where literacy levels are low, IVR and audiovisuals may be more appropriate. Ensure that your content is available in relevant languages and remember that language can also be a politicizing factor in some contexts.

9 FACTOR IN COSTS AND DATA LIMITATIONS: For greater and more equitable reach and utilization of your digital platforms, explore how to minimize data consumption. Your programmes should be cognizant that a portion of your audience (sometimes the majority) will have limited minutes, data and text message allowances. Consider also that smartphones often come equipped with pre-installed applications (for example Facebook Lite), and with free minutes available for specific platforms. Knowing the common, standard, free applications supported by data packages will help you select digital channels that are more likely to be accessed by your intended users. Web-based solutions often have greater potential to reach remote or low-income communities than application-based solutions, as many low-end devices do not have access to an application store but come with built-in web browsers.

10 BUDGET FOR MODERATION AND MANAGEMENT OF CONTENT AND COMMENTS: If your platforms include an interactive component (discussion groups, virtual sessions, questions and answers etc.), allocate the required resources to respond to and moderate those activities. Moreover, in recent years, online platforms such as Facebook and WhatsApp have been increasingly used to spread false and misleading information, including during the current COVID-19 pandemic. Women and girls are especially likely to face harassment online, in particular when they speak out on gender discrimination or against deep-seated cultural and social norms. It is recommended that you budget sufficient resources to monitor, moderate and manage content within your digital communication platforms, looking out for and removing any harmful content and comments. If your country benefits from U-Report, consider engaging existing U-Partners for content moderation. Often, these partners are trained in comment moderation.

11 AVAIL CAPACITY TO RESPOND TO ADDITIONAL DEMAND GENERATED: It is likely that your digital activities will generate increased demand for services and information. Indicate clearly in your online communication where users can go and/or call for support, and ensure you have the capacity in place to respond. Inability to respond to increased demand for services will frustrate your participants, reduce their trust in your activities.
and drive them away, ultimately making behaviour change less likely in the future and impacting negatively on your programme goals.

12 PUT DIGITAL SAFEGUARDING PRACTICES IN PLACE: Digital safeguarding covers important dimensions such as data privacy and protection, data security and how to keep people safe when using digital devices and platforms. Determine appropriate safeguarding measures for your context and chosen platforms. You can find more information on this in the Safeguarding Tips and Guidance and the UNICEF-supported Guidance on Responsible Data for Children documents.

13 CONSIDER HOW TO ENGAGE WITH OFF-LINE USERS THROUGH MOBILE TECHNOLOGY: IVR and RapidPro systems allow you to engage with off-line users using low-end mobile phones. IVR for example, allows people to call and leave messages, or to listen to pre-recorded messages left by other users. Such a system enables information sharing and collection of feedback and opinions by encouraging intended audiences to call and leave a message. These messages can then be used to inform mass-media programming (for example radio or TV), which in turn encourage audiences to call-in and answer or ask questions, or provide comments, thus generating a continuous dialogue with intended audiences. For an example on how IVR technology can be used, please refer to Box 4.

14 MAKE A PLAN FOR FEEDBACK: As your digital solution inquiries about users’ preferences and opinions inform your activities and services, make a plan to share feedback with your users as often as possible. Inform them about how improved information sharing services are available to them or how what they share will be used. This creates a virtuous data cycle, incentivizing your users to share more information, more frequently, with greater honesty and accuracy.

USING COMPLEMENTARY CHANNELS FOR GREATER IMPACT

Despite the extensive reach of digital approaches, and their flexible options for various degrees of engagement, there is little evidence that they will succeed in changing behaviours and social and gender norms if used in isolation. For effective engagement, digital approaches need to be complemented by other channels and reinforced through multiple media. Even in times of physical distancing, interventions should continue to operate across levels of the socio-ecological model (SEM).

Table 3 provides some examples for engaging remotely with intended audiences across the SEM. Many of the examples listed are digital, however some non-digital, remote engagement channels are also suggested for message reinforcement.

BOX 4: MESSAGING FOR MATERNAL & CHILD HEALTH: THE A Ponjon EXAMPLE FROM BANGLADESH

Aponjon, meaning “dear one” in Bangla, is the Mobile Alliance for Maternal Action’s (MAMA) programme in Bangladesh aimed at reducing maternal and child mortality through mobile communication technology. Adaptable, time-sensitive and stage-based information on maternal and infant health issues is delivered directly to expectant and new mothers through SMS or interactive voice response (IVR). Almost 80% of users from rural areas selected to receive messages through IVR, indicating the popularity of this approach among rural populations. Aponjon delivers twice weekly messages that are entertaining and educational, formatted in ‘mini-skits’ with actors playing out real life scenarios as characters such as pregnant women, doctors, husbands and mothers-in-law. MAMA Bangladesh also created a unique messaging service specifically for husbands, to reinforce messages provided to their wives, and encourage their involvement in decision-making on pregnancy, birth and infant care.

An evaluation of Aponjon indicated that women reporting at least 6 months use of the service were approximately 3 times more likely than non-users to score high on both maternal healthcare knowledge and related practices, such as attending ante-natal care visits, taking iron-folic acid during pregnancy, or taking vitamin A after delivery. Further, women reporting receiving and listening to at least 3 messages per month, were almost twice as likely to have a higher knowledge score and better related practices for maternal health compared to non-users.

(For more information on Aponjon, please refer to this brief by the Mobile Alliance for Maternal Action (MAMA).)
**TABLE 3: REMOTE ENGAGEMENT OPTIONS ACROSS THE SOCIAL ECOLOGICAL MODEL – APPROACHES, TIPS AND CONSIDERATIONS**

<table>
<thead>
<tr>
<th>SEM LEVEL</th>
<th>POTENTIAL APPROACHES</th>
<th>TIPS &amp; CONSIDERATIONS</th>
<th>EXAMPLES</th>
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<tr>
<td>Individual and Interpersonal</td>
<td>• Social media platforms such as Facebook, Twitter and Instagram</td>
<td>• Choose social media platforms that allow for two-way engagement such as Facebook Groups and Live Chats on Instant Messenger.</td>
<td>Family Choices is a game that aims to enhance the perception of a girl’s place in and value to her family, with an emphasis on keeping her and her peers in school. The game explores the outcomes of a family’s choices related to girls’ education early, early marriage and family planning. Players decide whether Anu (in India) or Mercy (in Kenya) will ultimately achieve their dreams of becoming a financially independent nurse.</td>
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<td>• Low-bandwidth, free-to-access websites, such as the Internet of Good Things</td>
<td>• Generate debate and discussion by running live sessions, such as Instagram Live or Live Facebook Chats on pre-defined topics. Involve your intended audience in the development and facilitation of these sessions.</td>
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<td>• Photo and video virtual challenges</td>
<td>• Use your platform as a safe space and opportunity for girls and vulnerable groups to interact with peers and increase their collective agency for change.</td>
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<td>• Hotlines</td>
<td>• Promote/maintain new norms challenging users to post videos or photos of themselves taking a stance against FGM and child marriage.</td>
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<td></td>
<td>• Interactive voice recordings</td>
<td>• Allow for callers to ask or type questions when they reach out to hotlines and IVRs.</td>
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<td></td>
<td>• Interactive video games</td>
<td>• Access or develop video games that mimic real life situations around the topic of interest where the user must determine the best course of action.</td>
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<td>• Interactive applications</td>
<td>• If you use avatars in your games, select them carefully as avatars chosen by young people especially have been shown to inspire and influence their behaviour and identity offline.</td>
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<td>• U-Report</td>
<td>• If you develop an application for your programme, build-in engagement opportunities such as quizzes, discussion groups, and peer-to-peer support. Encourage continued engagement by exploring opportunities to partner with the private sector to provide gifts, prizes, vouchers or free data as users interact with the activities in the application.</td>
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<tr>
<td>Community</td>
<td>• Communication applications such as WhatsApp, Viber or Facebook messenger groups</td>
<td>• Closed groups such as WhatsApp, Viber or Facebook messenger can enable two-way communication with key stakeholders such as community and religious leaders, women’s groups and other relevant civil society organizations. The groups can be used to exchange information, continue promoting key messages, organize virtual calls to debate issues arising in the community, and monitoring if and how the situation is evolving.</td>
<td>Shujaaz is a multi-media platform using comic books, social media, and SMS messaging to engage with young people in Kenya and Tanzania. Telling the story of a 10-year old DJ and influencer living in the outskirts of Nairobi, Shujaaz has created a digital environment that brings young people together to talk about their experiences, the changes they want to make and the barriers that are standing in their way.</td>
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<td>• Videos and leaflets at places that continue to be accessed by community members such as essential shops and services</td>
<td>• Radio and TV shows can have extensive reach. Build in opportunities for interaction with the audience by providing a call-in number that people can use to ask questions or comment on a topic to generate debate and discussion. Where a local radio exists, people who do not have access to a phone can be encouraged to write their comments and questions and leave them at the radio station.</td>
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<td>• Live chats and virtual meetings with community/faith leaders and other influential stakeholders</td>
<td>• Megaphones only provide one-way communication; however, they can be helpful in informing community members of opportunities to engage in activities.</td>
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<td>• Radio and TV shows with call-in opportunities</td>
<td>• Videos, leaflets and information boards can be placed strategically in places that people continue to access even with confinement restrictions. Again, these do not provide two-way communication opportunities, but they can help reinforce key messages and desired actions, as determined by your initial assessments.</td>
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*Silent Reflection* is a UNICEF-funded social media campaign in Thailand aimed at raising awareness of gender roles and gender expectations. A Facebook page shows thought-provoking content encouraging followers to post videos and engage with peers. The campaign also targets adults allowing for a virtual intergenerational dialogue.
### TABLE 3: REMOTE ENGAGEMENT OPTIONS ACROSS THE SOCIAL ECOLOGICAL MODEL – APPROACHES, TIPS AND CONSIDERATIONS (continued)

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<tr>
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<th>POTENTIAL APPROACHES</th>
<th>TIPS &amp; CONSIDERATIONS</th>
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</table>
| Services  | • Virtual counselling  
            • Videos and leaflets at points of services | • You can integrate opportunities in your digital platform for virtual one-to-one discussion and counselling with users. This will afford deeper discussion to address barriers to change.  
            • Some essential services will continue to operate even during the pandemic. Medical facilities, maternal and child health services, the police and other social services are likely to be open. Explore opportunities to integrate messages and materials at these points of service.  
            • Some service providers may benefit from learning more about FGM and child marriage and may be well placed to advocate for the elimination of these practices among their service users. Consider options for virtual training to equip them with the necessary skills to discuss key messages with their service users. Radio can also be used for remote training. | Flying Youthhood was an entirely web-based sex education programme in Shanghai, China. Users accessed a password protected website providing information on sexual and reproductive health and services. Online professional counselling was also offered through the site, providing an opportunity for users to interact virtually with service providers. |
| Social and structural level | • Advocacy with media  
                               • Virtual training for media  
                               • Online engagement with local and national celebrities and key opinion leaders  
                               • Online civic engagement | • Work with media providers to ensure they continue covering stories and information regarding FGM and child marriage despite the demands for COVID-19 information.  
                               • Provide virtual or distance training to media providers on key messages and content on FGM and child marriage.  
                               • Engage with local and national celebrities, and relevant key opinion leaders to actively take a stance against FGM and child marriage and promote your messages through their social media channels.  
                               • Use the digital space to increase civic engagement to drive participation and advocacy. | This video was developed for COVID-19 messaging and how training can be delivered online, in a simple and rapid manner.  
CrowOutAids is a UN AIDS online project across Africa that seeks to influence policy on HIV and AIDS. Through social media platforms and crowdsourcing solutions, it gathers and integrates the youth perspective into the policy process and political advocacy.  
See UNICEF’s rapid analysis on digital civic engagement by young people for an analysis of enablers and constraints of youth civic engagement. |
MONITORING AND EVALUATION

Even in the realm of digital engagement, it is important to put in place key metrics that allow you to monitor if and how your digital engagement activities are contributing to the programme goals. Many social media platforms, such as Facebook and Twitter, come with built-in analytic dashboards. Third-party software platforms also exist that can help you monitor social media analytics. Both the in-built and third-party platforms can track metrics such as clicks, likes, tags, shares and reposts. In most cases, these metrics give information about reach, with little insight into uptake, interest or actual changes in attitudes or behaviours.

Social media sentiment analysis metrics go beyond reach to measure user interest by grouping together different actions by users, such as comments and engagement with content and categorizing them as negative, neutral or positive. In social norms programming this can give a sense of the users’ attitudes and feelings about the topic. When choosing the metrics for your digital activities, consider the following tips:

- **Use few, carefully selected core metrics.** Define key metrics that can help you measure your intervention. Understand the user journey and how metrics along the way (engagement with particular content, journey completion) can provide insights into their experience with and response to your digital content.

- **Measure quickly and often.** Digital technologies are iterative and fast-changing, with users accessing and interacting with them in constantly evolving ways. Short, iterative evaluations at regular intervals help you monitor the user experience and make prompt, required adjustments to your digital content.

- **Explore ways to investigate impact.** Find ways to explore how online engagement translates into offline behaviour. Online surveys, comment analysis, and analysis of user-generated content can help understand feelings, intention, and impact among users. If you are conducting regular assessments as described at the start of this note, add some questions on respondents’ engagement with your digital content (for example utilization and recall). Coupled with the other questions in your assessment, information about respondents’ engagement with your digital activities can give an indication of its contribution towards any changes in other metrics measured by the assessments (attitude, intention, beliefs, feelings). In Nepal, the Rupantaran empowerment programme for example, has been adapted to run through the radio and changes in girls’ knowledge are being assessed through random SMS messages after each show.

- **Offline measurement is still important.** Where possible, supplement your digital data with offline approaches such as case studies, focus group discussions, observations, and other qualitative methods. Such assessments help explore why and how users engage with your digital approaches, and if and how they apply what they have learned offline. When lockdown measures prevent face-to-face meetings, and where connectivity allows, you can conduct these qualitative assessments remotely using online media, such as zoom calls, Facebook Messenger, and other communication applications.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT INDICATORS

As part of its Global Risk Communication and Community Engagement (RCCE) response for COVID-19, UNICEF has developed three key indicators pertaining to digital and traditional media that are also included in the global Humanitarian Action of Children (HAC) appeal and the global Situation Report (SitRep) on COVID-19. To align approaches, the three RCCE indicators listed below can also help in obtaining a sense of how activities around harmful practices are progressing:

- **Reach:** The number of people reached through one-way channels of communication

- **Engagement:** The number of people involved in participatory actions

- **Feedback:** The number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms

For a breakdown on each indicator and how it can be adapted to harmful practices, please refer to Appendix 2.
While digital channels offer potential for increased reach and engagement, there are also important challenges around equitable access. Gender, disability, income, education and geography can all affect if and how your intended users engage with your digital activities. The following questions will help you assess the feasibility of including digital approaches in your social norms interventions, reflect on potential risks, and consider ways to reduce exclusion and exacerbation of pre-existing power imbalances.

- **Cost**: Consider the cost of your digital programme and assess whether your intended audience is able to afford engaging with your content.

- **Literacy and language**: Ensure that the digital channel you choose uses the language of your intended audience and is in an accessible format. Lower literacy levels will require more visual and audio content. Remember that in some settings, women and girls have lower literacy levels than men and boys.

- **Technology skills**: Assess whether your intended audience has the technology skills and confidence required to interact with your content. Consider any differences in skills between audience segments, for example rural versus urban populations, girls/women versus boys/men, young versus older people, or wealthy versus poor.

- **Cultural norms**: Reflect on any local customs that may limit or prohibit access to digital technology and mobile devices. In some cases, there may be negative cultural reactions to some audience segments, particularly girls and women, using mobile phones and the internet.

- **Gender digital divide**: The gender digital divide is rooted in discriminatory social and gender norms which affect the ability of girls to access and engage with digital technologies. In some contexts, girls do not have the same access to digital technologies or to devices as boys, or they may only be able to access a mobile device through a male household member. Often, girls and women have limited time for media consumption due to high volumes of chores. They may also have limited opportunities for learning and development, which impacts their skills and confidence to interact with digital content, denying them a voice for sharing experiences and speaking out against harmful practices. Programmes need to reflect on whether including a digital component may exclude girls and women and further exacerbate gender imbalances.

- **Disability**: Consider how accessible your digital content is to people with impairments. Assess what assistive technology is available to make your content inclusive.

- **Phone lines, internet connection and electricity supply**: Consider the available infrastructure, phone lines, and connectivity, as well as electricity supply. Disparate infrastructure may mean that a segment of your audience is unable to access your digital programme.

- **Ethical considerations**: The digital age has amplified existing risks and, in some cases, created new ones. Child abuse, exploitation and trafficking online still occur, and children are increasingly facing a range of other online risks such as cyberbullying, hate speech, harassment and exposure to unsuitable content. It is essential that children are able to participate in a safe online environment, benefit from safe devices, applications and platforms, and have the ability to use the internet safely. Ethical considerations need to be at the heart of any digital engagement strategy to ensure protection of young users. Please refer to UNICEF’s Policy guide on children and digital connectivity.
With increased mobile penetration, digital engagement is steadily increasing reach across the globe. In light of this, country programmes will need to revise, strengthen or update their strategies to include digital modes of communication. Below is a brief menu of the main mobile and digital platforms and technologies that can be used to support remote and virtual engagement with intended audiences.

**Chatbots** are computer programmes designed to simulate conversation with human users at scale. Programmes can design chatbots, or messaging experiences, and deploy them over many communication channels, including SMS, Facebook Messenger, U-Report, WhatsApp and Viber.

**GeoPoll** is a mobile-based platform that can administer remote, mobile-based surveys all over the world. Using SMS and voice calls to target specific populations it can be used to conduct surveys to gather insights into communities’ knowledge, perceptions, beliefs, expectations and behaviours around harmful practices.

**Google One Box** vetted sites (for example National Ministries of Gender, Social Welfare, Health or Education) can update their website’s code base to include an algorithm that, once enabled, allows relevant content to appear in a featured box during relevant searches. Google One Box, through its partnership with UNICEF and the Internet of Good Things (IOGT), offers
UNICEF country offices the opportunity to be a source of trusted information for communities of interest.

**Internet of Good Things (IOGT)** is a community engagement and system strengthening tool that offers free access to mobile-ready, web-based resources and applications configured for low-end mobile devices. It provides access to free educational and life-saving information. Currently, the topics and issues available on IOGT include harmful practices, such as child marriage and FGM, maternal health, hygiene, diseases such as Ebola, Polio, Cholera and COVID-19, sexual health advice for adolescents, Internet safety, positive parenting techniques and more. Content is delivered to three distinct user groups: parents and caregivers, adolescents and young people, and frontline workers and educators. It includes engagement tools such as surveys and polls. In the context of physical distancing, IOGT provides access to information in hard to reach communities. Country programmes interested in using this platform should explore whether it is already functioning in the country and add relevant content on harmful practices.

**MagicBox** is UNICEF’s big data platform which is involved in measuring the secondary effects of COVID-19 to understand the impacts on social behaviour, education, sentiment, opinion and vulnerable populations. In addition, it provides guidance on how to pinpoint and combat misinformation about COVID-19. While not strictly related to harmful practices, having an awareness of how communities are responding can help shape programming around harmful practices as well.

**RapidPro** is a digital messaging platform that powers programmes such as the Internet of Good Things, U-Report and Chatbots. It allows programmes to develop messages that can be disseminated to specific groups, while also collecting data via SMS and other channels such as a voice or social media, to enable real-time data collection and mass communication with intended audiences. RapidPro has traditionally been used to support immunization campaigns, conditional cash transfer programmes and monitoring of public services. Messaging can be adapted to address barriers and enablers around harmful practices.

**U-Report** is a digital mobile messaging solution that is built on the RapidPro platform. It is a social messaging tool and data collection system developed by UNICEF to improve citizen engagement, inform and foster positive change. The programme sends SMS polls and alters messaging to its participants, collecting real-time responses and subsequently publishes the data gathered.

**Vi amo** is a simple, low-cost technology for data collection and for the provision of public information via mobile phones. In countries where Vi amo is present, it can provide information to the general population or selected audiences, provide training to mobilizers, leaders

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**A2 | GLOBAL RCCE INDICATORS ADAPTED TO HARMFUL PRACTICES**

UNICEF’s global RCCE response efforts include the development of RCCE indicators to promote consistency in global, regional and country level reporting on RCCE indicators pertaining to digital and traditional media. These indicators are included in the global Humanitarian Action for Children (HAC) appeal and the global Situation Report (SitRep) on COVID-19. The three following indicators are proposed:

- **Reach**: the number of people reached through one-way channels of communication
- **Engagement**: the number of people involved in participatory actions
- **Feedback**: the number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms.

To promote alignment with these global indicators, the tables below provides the breakdown and description of each indicator. It is a slightly revised version of the ‘UNICEF Guidance for Country Offices on RCCE Indicators for COVID-19 Global Response’ to indicate application of indicators in the context of harmful practices programming.
**TABLE 4: INDICATOR 1: NUMBER OF PEOPLE REACHED**

<table>
<thead>
<tr>
<th>SUPPORTING PLATFORM</th>
<th>INDICATORS, DEFINITION AND RATIONAL</th>
<th>TOOLS</th>
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</table>
| Social media        | **Indicator:** The number of impressions per post (on content relating harmful practices).  
**Definition:** While the exact definition of an impression varies among different social media platforms it can be defined as the number of times your content enters a person’s screen.  
- **Facebook:** organic impressions are the number of times any content from your page or about your page entered a person’s screen. Facebook paid impressions measure how often your ads were on screen for your target audience.  
- **Instagram:** Impressions measure the total number of times users saw your post or story.  
- **Twitter:** Impressions are defined as any time a Twitter user sees one of your tweets.  
- **LinkedIn:** Impressions are the number of times the updates were shown to members.  
- For any other social media networks, please refer to their specific definitions.  
**Calculation:** Select your top performing social media channel (e.g. Facebook) and identify all posts relating to harmful practices during the reporting period. For these posts, take the total number of impressions and divide by the number of posts.  
**Rationale:** On social media, reach and impressions are related concepts that can indicate exposure to messaging. Prioritizing impressions is recommended as this is a standard, easily accessible metric across most major social media platforms. | Native analytics for each social media platform (e.g. Facebook, Twitter Analytics, Instagram Insights etc.) |
| Web                 | **Indicator:** The number of unique pageviews for content related to harmful practices.  
**Definition:** Aggregate number of unique views to the programme’s harmful practices web pages generated by the same user in the same session during the reporting period, i.e. the number of sessions during which the page was viewed, one or more times, within a 24 hour period.  
**Rationale:** The number of unique pageviews is an indication of how many times messages related to harmful practices on UNICEF or partner webpages are viewed. It also helps to identify which posts/pages are most popular to help shape future content strategies. This is an easily available metric that can be aggregated across relevant web pages relating to harmful practices.  
**Considerations:** The number of unique pageviews is a simple approach that is easily accessible to most country offices across different skill levels and capacity using Google Analytics. Alternatively, countries can choose to report on ‘# of users for specific harmful practices pages’ if they have the capacity to configure Google Analytics to limit this data to specific pages. | Google Analytics |
| TV and radio        | **Indicator:** The number of people reached through TV and/or radio.  
**Definition:** Maximum potential reach from radio and TV content on harmful practices (e.g. spots, news broadcasts, radio shows).  
**Rationale:** This aligns with the broader RCCE guidance on mass media channels.  
Use data provided on viewership, listenership, etc. by the broadcaster, a media monitoring agency, or similar sources. | |
| Print and online news | **Indicator:** The number of people reached through print/online news.  
**Definition:** Maximum potential reach for print/online news. Use the highest number of:  
- **print publications:** use the circulation number  
- **online news:** use the average number of monthly visitors  
**Rationale:** This aligns with the broader RCCE guidance on using audience size. | Media monitoring agency or media monitoring tool such as LexisNexis Newsdesk |
**TABLE 4: INDICATOR 1: NUMBER OF PEOPLE REACHED (continued)**

<table>
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<th>SUPPORTING PLATFORM</th>
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</table>
| **RapidPro-enabled programmes (includes U-Report, 1000 days, chatbots, etc.)** | **Indicator:** The number of times users were reached with information on harmful practices  
**Definition:** An aggregation of  
• Total number of times users were sent at least one message in a RapidPro flow on harmful practices, and  
• Total number of times users’ questions were answered via Case-Pro/U-Partners, and  
• Total number of users reached/times users were reached through other RapidPro activities (e.g. via RapidPro API).  
**Rationale:** The number of messages sent by RapidPro-enabled programmes gives a reasonably accurate representation of receipt of content. Measuring unique users that receive messages in a specific time period is a more difficult metric to collect manually.  
**Considerations:** Not all outgoing messages are viewed, and for some channels there is no reporting on message delivery (e.g. SMS). This is the best possible indicator at this time given current data access. A RapidPro “user” is a single contact record, which in most cases represents a single SMS number, Facebook account, WhatsApp number, etc. A single person may create more than one “user” in RapidPro, but analysis showed this to be infrequent (3% of users). | **Rapid-Pro, Case-Pro/U-Partners, Realtime Data-driven Dashboards (R3D)** |
| **Internet of Good Things** | **Indicator:** The number of site visitors who access relevant content on IOGT  
**Definition:** Number of users accessing pages tagged for harmful practices and related content.  
**Rationale:** A “site visitor” represents a single person that may access multiple articles or messages on harmful practices on the IOGT site. This indicator, is defined by Google Analytics as “user,” tracks “site visitors” by IP address, that ensures no double-counting occurs of the same person visiting multiple sites. | **Google Data Studio Dashboard** |
| **Other digital tools** | **Indicator:** Can be adapted from some of the suggested indicators above.  
**Rationale:** Offices may employ additional digital tools, such as Viamo or CommCare, to reach target populations with information and messages. When measuring the reach of messages with these tools, reporting should focus on capturing the number of unique users reached. Ignored prompts do not qualify for reach reporting but can be used to inform programmatic decision making around priority messages and audience preferences. Effort should be made, where possible, to disaggregate reach by audience type (i.e. gender, age, location, profession). | |
**TABLE 5: INDICATOR 2: NUMBER OF PEOPLE INVOLVED IN PARTICIPATORY ACTIONS**

<table>
<thead>
<tr>
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</table>
| Social media        | **Indicator:** The number of engagements per relevant post on your top performing channel.  
|                     | **Definition:** Publicly visible engagements including likes, reactions, comments, replies and shares/retweets.  
|                     | **Calculation:** Select your top performing social media channel (e.g. Facebook) and identify all posts relating to harmful practices during the reporting period. For these posts, take the total number of engagements and divide by the number of posts.  
|                     | **Rationale:** Due to the limitations of existing tools, there is no simple, accurate way to convert the number of engagements to the number of people engaged. Accordingly, this metric aims to give an indication of the number of people engaged through social media while reducing the potential for double counting. Public engagements indicate support and interest in your content, and they are also more easily comparable across different platforms. Dividing the total number of engagements by the number of posts reduces the risk of double counting. Focusing on your top performing channel simplifies this process.  
|                     | **Considerations:** To simplify data collection across different platforms, country offices can use tools that aggregate engagements into a single dashboard.  
|                     | **TOOLS** | Native analytics (e.g. Facebook Insights, Twitter Analytics, etc.) Country offices can use tools that aggregate results across accounts such as: Talkwalker, Social Bakers, Hootsuite, Fan Page Karma, or similar. |
| Web                 | **Indicator:** Average time on page for relevant content relating to harmful practices.  
|                     | **Definition:** Average amount of time all users spend on pages relating to harmful practices.  
|                     | **Rationale:** Average time on page is an indication of how long users spend on a webpage before clicking to another page. A longer duration can indicate that users are finding the content interesting or informative. Please note that using “% of returning visitors” is not recommended as the Global Data Protection Regulation (GDPR) may affect the accuracy of data.  
|                     | **TOOLS** | Google Analytics |
| TV and radio        | **Indicator:** The number of people engaged through interactive radio and TV platforms/programmes (especially community radio).  
|                     | **Definition:** The number of people who call-in via interactive TV/radio programmes.  
|                     | **Rationale:** The number of messages received from a user in a message service relating to harmful practices is the strongest indicator of the level of engagement with your content. This is also comparable across different messaging platforms and accounts for the digital messaging channel modality, where due to length restrictions (e.g. length of SMS) content is often broken up across a series of messages.  
|                     | **TOOLS** | Varies by platform. May be reported by the station, broadcaster or digital tools. |
| Print and online news | N/A – not likely relevant | N/A |
| RapidPro-enabled programmes (includes U-Report, 1000 days, chatbots, etc.) | **Indicator:** The number of messages received in messaging programmes that have incorporated content on harmful practices.  
|                     | **Definition:**  
|                     | • The number of messages received from users on RapidPro flows on harmful practices  
|                     | • The number of messages received from users on CasePro/U-Partners platforms  
|                     | • The number of messages received from users through other RapidPro activities (e.g. via RapidPro API).  
|                     | **Rationale:** The number of messages received from a user in a message service relating to harmful practices is the strongest indicator of the level of engagement with your content. This is also comparable across different messaging platforms and accounts for the digital messaging channel modality, where due to length restrictions (e.g. length of SMS) content is often broken up across a series of messages.  
|                     | **TOOLS** | RapidPro, CasePro/U-Partners, Realtime Data-driven Dashboards (R3D) |
### SUPPORTING PLATFORM

| Indicator: The number of poll, survey and question responses and comments posted relating to harmful practices. **Definition:** Responses or comments represent the engagement with a single user. Aggregate the number of polls, survey and open-ended question responses relating to harmful practices that are submitted on the IOGT site, added with the total number of comments posted across articles relating to harmful practices that do not violate community terms and conditions. **Rationale:** IOGT has four opportunities for users to engage with the platform:
1. Polls
2. Surveys
3. Open-ended questions
4. Comments on the page **Considerations:** Poll participation requires the user to login to the website, and is therefore infrequently used, but represents the most engaged response a user can initiate. Comments, surveys, and open-ended questions can be configured to allow anonymous responses and therefore tend to have more engagement. This data cannot be successfully pulled from Google Analytics and requires login to the Content Management System of your IOGT site in order to access and aggregate total reporting.

### Other digital tools

| Indicator Guidance: Can be adapted from some of the suggested indicators above. **Rationale:** Offices may employ additional digital tools, such as Viamo or CommCare, to engage target populations on actions relating to harmful practices. When measuring engagement through these tools, reporting should capture the number of unique, two-way user engagements completed (without regard to the number of unique users). **Consideration:** Two-way communication through a digital tool is defined as any time user feedback is solicited by the tool and responded to by the user.

### SOCIAL MEDIA/MASS MEDIA/WEB PLATFORMS

| This indicator relates to accountability to community members and closing the feedback loop related to available services. If you are using mass media, social media and web platforms for this type of purpose, you may report relevant results here. Otherwise, you may consider other available mechanisms such as hotlines, radio call-ins, etc. where applicable.

### OTHER DIGITAL TOOLS

| Indicators: These can be adapted from the suggested indicators above. **Rationale:** Offices may employ additional digital tools, such as Viamo or other established platforms deployed specifically as feedback mechanisms. When reporting on additional digital tools, this indicator should capture the number of unique users who share personal stories and opinions relating to harmful practices or who request, via a workflow-based engagement or open-ended response, information or support on harmful practices. **Consideration:** Two-way communication through a digital tool is defined as any time user feedback is solicited by the tool and responded to by the user.
Unless a link is provided, the resources listed below can be found in the COVID-19 RCCE Resource Package, which is updated regularly as new resources become available.

### TABLE 7: COVID-19 RESOURCES AND CONSIDERATIONS ON FGM AND CHILD MARRIAGE PROGRAMMING

<table>
<thead>
<tr>
<th>TITLE OF THE RESOURCE</th>
<th>MAIN CONTENT</th>
<th>CONSIDERATIONS FOR FGM &amp; CHILD MARRIAGE PROGRAMMING</th>
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<tbody>
<tr>
<td><strong>COMMUNITY ENGAGEMENT AND FEEDBACK MECHANISMS</strong></td>
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| Accountability to Affected Populations (AAP) Guidance in COVID-19 Response (7-page guide) | • Highlights 3 key principles in AAP (information provision; participation; complaints & feedback mechanisms)  
  • Refers to resources on how to assess community needs and their information sources, though these do not necessarily take into consideration physical distancing requirements  
  • Provides suggestions on participation and feedback approaches during social distancing (call centres, digital platforms such as U-Report and IDST, social media and social messaging apps, radio and TV channels)  
  • Includes some AAP indicators | • Some AAP indicators can be adapted to monitor how programmes and activities are meeting community needs.  
  • Some of the feedback approaches can be used to obtain community feedback and input to inform programming.                                                                                     |
| Tips for Engaging Communities During COVID-19 in Low Resource Settings, Remotely and In-person (31-page brief) | • Provides considerations for engaging communities in social distancing times (using phone lines, going through local leaders, coordinating with partners)  
  • Proposed action and considerations are very COVID-19 specific (shielding approaches, ways to access health services, mapping of high transmission areas, identification of vulnerable groups and individuals) | • Some approaches can be used to engage communities on FGM and child marriage content; however, there is nothing in this guide that is not covered in some way by other guides and documents looking and community engagement. |
| How to Include Marginalized and Vulnerable People in Risk Communication and Community Engagement (12-page guide) | • This lists vulnerable/marginalized people to consider when conducting community engagement: children; persons with disabilities; women and girls; pregnant women; people living with HIV; gender based violence survivors; refugees and migrants; elderly; people living in existing humanitarian emergencies; people with pre-existing medical conditions; sexual and gender minorities; ethnic minorities.  
  • Describes key actions that can be taken to ensure inclusion/engagement of identified vulnerable groups.  
  • All proposed actions are mostly related to RCCE activities | • Can help with considerations around ensuring that the most vulnerable are reached, but the suggested action in the guide are very much focused on COVID-19 communication and RCCE activities and not always transferable. |
| Community Action Guide (5-page tip sheet)                   | • Key steps on how a community can be engaged to prevent the spread of COVID-19  
  • Divides action in three domains: (1) Learn, (2) Act, (3) Help | • Could possibly adapted for engaging communities in keeping girls safe from FGM and child marriage.                                                                                                                                                                                                 |
TABLE 7: COVID-19 RESOURCES AND CONSIDERATIONS ON FGM AND CHILD MARRIAGE PROGRAMMING (continued)

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<tr>
<td>Community Engagement and Feedback Mechanisms (continued)</td>
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| **Guidance for National Societies on Safe and Remote Risk Communication and Community Engagement during COVID-19** | • Provides considerations for conducting face-to-face activities  
• Contains a list of questions to help determine level of risk in regard to COVID-19 for different activities  
• Include tips on how to reduce COVID-19 transmission during face-to-face communication  
• Lists options on how to mobilize, engage communities, share and collect information when face-to-face is not feasible. Options listed include: Social media, mass media, hotlines, WhatsApp, TV shows, remote survey, telephone calls with key informants and service providers, virtual focus-group discussions (FGDs). | • Contains some helpful ideas and tips on how to engage with communities while respecting social distancing regulations that can help FGM and child marriage programming engage in two-way dialogue with audiences.  
• Questions to assess and reduce level of risk for conducting face-to-face communication can be applicable to FGM and child marriage programming too |
| **Community Engagement from a Distance** | • Lists alternative approaches to face-to-face communication (use trusted information source to disseminate information virtually/via phone; use fixed loudspeakers; use front-line staff to conduct interpersonal communication) | • This is a very clearly written guide and the information can also inform FGM and child marriage activities, however there is nothing new or that isn’t covered elsewhere. |
| **Malaria Social and Behaviour Change Program Guidance in the Context of COVID-19 Pandemic** | • Lists different low risk channels in the context of COVID-19  
• Provides options for co-messaging on malaria with COVID-19 messages  
• Describes advantages, disadvantages consideration for different channel options in context of COVID-19  
• Advocacy packages for key stakeholders/ decision makers to be provided in print or digital copies and virtual meetings  
• Integration of reminders around malaria during existing COVID19 advocacy meetings  
• Radio and TV (spots, debates, Q&As, phone-in programmes)  
• Social media and social media monitoring to ensure correct information  
• Hotline number  
• Laminated print materials as job aids  
• Town-criers and mobile units  
• Virtual religious services  
• Phone calls instead of house visits  
• Include brief guidance on rumour tracking, rumour management, on gender and stigma (how to ensure that women also received messages and increased risk of gender-based violence)  
• Defines desired behaviours (around malaria) for different audience groups (communication agents, health facility staff/ SBC staff; community health workers; community members, community members at health facilities) and how to integrate promotion of desired behaviours into standard health activities | • Considerations for different, low-risk channels can be used to guide choice of channels for FGM and child marriage programming too  
• Guidance on rumour tracking, gender and stigma also relevant for FGM and child marriage programming. |
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<td><strong>COMMUNITY ENGAGEMENT AND FEEDBACK MECHANISMS (continued)</strong></td>
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| Community-based Health Care Including Outreach and Campaigns in the Context of COVID-19 Pandemic | • Provides guidance on continuation of essential services delivered at the community level and how to leverage and strengthen community platforms for COVID-19 response  
• Includes ideas on how to adapt health system functions in the pandemic context and how to protect workers and communities with infection prevention and control measures and use of personal protective equipment (PPE)  
• Contains guidance on how to continue providing support and services around life-course issues (family planning, maternal and newborn health, adolescent and elderly health etc.)  
• Provides recommendations for teleconsultations with adolescents and utilization of mHealth platforms  
• List key elements of effective communication, building trust, reducing fear and strengthening collaboration  
• Provides ideas on expanding digital platforms to include training, supervision, peer-to-peer | • Could some of the guidance on continuation of essential services be applied to FGM and child marriage services?  
• Tips for leveraging and strengthening community platforms can be adapted to FGM and child marriage activities.  
• Infection prevention & control, and guidance on PPE can be used to guide any community activities, including around FGM and child marriage.  
• Could explore opportunities for integrating FGM and child marriage messaging in some of the life-course issues recommended for continuation in the manual (e.g. in family planning, maternal, newborn and child health, and folic acid supplementation activities).  
• Find entry points with Community Health Workers/health service providers and health platforms, all of which are at the centre of community-based health care.  
• Consider similar model described in the manual around teleconsultation with adolescents for FGM and child marriage?  
• Advice on how communication should be conducted can be transferred to FGM and child marriage activities.  
• Considerations around expansion of digital platforms can be used to guide FGM and child marriage programming too. |
| Social Science in the Era of Social Distancing: a summary of methodologies | • Lists methodologies for doing fieldwork during physical/social distancing.  
• Lists and describes each methodology as well as tools required for each (e.g. smartphone, pen and paper, computer etc.).  
• Although it talks about fieldwork, the methodologies described are types of communication activities and ways of engaging with communities. | • The methodologies/approaches listed can be used to inform communication activities in the context of FGM and child marriage too.  
• The document is very clear and brings together approaches that are described in different documents. |
| **DIGITAL APPROACHES** | | |
| UNICEF’s Approach to Digital Health (43-page roadmap) | • Roadmap on how to build capacity of staff, partners and government to implement digital health, leverage information and communication technology (ICT) solutions to overcome bottlenecks in health systems, improve health service delivery, strengthen health systems, engage communities and civil society in decision making  
• Lists types of digital health platforms that may exist in different countries that can be leveraged (e.g. RapidPro, open medical records, district health information systems)  
• Defines principles for developing a digital health approach (design with user, build for sustainability etc.)  
• Lists different digital functions (SMS, MMS, IVR, audio clips, video images) | • Explore options for integrating FGM and child marriage data collection into existing systems?  
• Digital functions can provide ideas to consider for digital communication around FGM and child marriage. |
**TABLE 7: COVID-19 RESOURCES AND CONSIDERATIONS ON FGM AND CHILD MARRIAGE PROGRAMMING (continued)**

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<td><strong>DIGITAL APPROACHES (continued)</strong></td>
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</table>
| **Internet of Good Things** | • A set of free, mobile-ready, web-based resources and application containing educational and lifesaving information, provided for free.  
• Currently includes information on topics such as maternal health, hygiene, emergency information on diseases such as Ebola, Polio, Cholera, and sexually transmitted infections, advice for adolescents on sexual health and internet safety, positive parenting and more  
• Provides localized, updated quality content for free. | • Should determine reach and utilization of IoGT in the country. If adequate reach, could also add FGM and child marriage content. |
| **U-Report** | • A free tool for community participation to run polls, collect and map responses in real time.  
• Users are generally young people aged 10 to 25 years  
• The UNICEF East and Southern Africa Regional Office is using U-Report to assess level of knowledge on COVID-19 among U-Reporters and to clarify any wrong beliefs about the disease through a “Myth Buster Quiz” | • Check reach and utilization of U-Report in the country.  
• Can be used for quick pulse on whether and how perceptions, attitudes, expectations and behaviours around FGM and child marriage are changing in the context of COVID-19 |
| **ASSESSMENT TOOLS** | | |
| **Focus Group Discussion Guide for Communities** | • Guidance on how to conduct FGDs (seating arrangements, facilitator and notetakers, introduction and conclusion)  
• Questions to assess perceptions, knowledge, attitudes around coronavirus  
• Developed prior to enforcement of physical distancing and does not provide alternative ways for conducting FGDs | • Some helpful information on how to conduct FGDs however does not address issue of physical distancing |
| **COVID-19 Rapid Assessment Tool** | • Rapid assessment containing questions to assess knowledge, attitudes and practices around COVID-19.  
• Can be used for key informant interviews or to guide FGD | • If country offices are conducting these rapid assessments regularly to monitor knowledge, attitudes and practices around COVID-19, could some key questions to capture perceptions/ intention around FGM and child marriage behaviour be added? |
| **MONITORING & EVALUATION** | | |
| **RCCE M&E Framework for RCCE** | • Contains indicators, means of verification, and frequency for different behavioural drivers: knowledge and awareness; social accountability and community feedback; stigma; intent; self-efficacy; risk perception. | • Framework can be used to guide key questions for FGM and child marriage activities to measure beyond reach. |
| **RCCE Indicator Guidance Package** | • Guidance summarizing key information on data collection, measurement, and indicators for UNICEF RCCE in relation to COVID-19 response  
• Includes HAC, WHO and HRP indicators  
• Provides suggestions on how to collect data | • Some information can be used to help inform data collection for FGM and child marriage activities, however the RCCE Monitoring and Evaluation Framework described above is more comprehensive |
| **UNICEF’s COVID-19 Global Response 2020: Indicator Methodology** | • Description of the 3 HAC indicators and approaches for collecting them | • HAC indicators focus mostly on reach (Number of people reached through COVID-19 messaging; Number of people through RCCE activities; Number of people sharing their concerns and asking questions/clarifications)  
• Not necessarily relevant for FGM and child marriage monitoring and evaluation, however if country offices have established, regular data collection mechanisms for HAC, they could explore opportunities for adding some questions relating to FGM and child marriage activities. |
TABLE 7: COVID-19 RESOURCES AND CONSIDERATIONS ON FGM AND CHILD MARRIAGE PROGRAMMING (continued)

<table>
<thead>
<tr>
<th>TITLE OF THE RESOURCE</th>
<th>MAIN CONTENT</th>
<th>CONSIDERATIONS FOR FGM &amp; CHILD MARRIAGE PROGRAMMING</th>
</tr>
</thead>
</table>
| Faith in Action COVID-19 Initiative | Key objectives of the initiative are to:  
- Manage communication/misinformation and rumours  
- Dispel fear, discrimination stigma  
- Promote adaptation of religious gatherings, practices of rituals, handwashing and hygiene  
- Address specific needs of vulnerable groups  
- Prevent violence against children and engage children actively in the initiative  
- Promote and support the recovery of social services  
Contains a series of resources and guides for faith leaders (Communicating to end misinformation, discrimination and to instil hope; Maintaining health & hygiene; Adapting how we gather together, pray and practice rituals; Helping people who are at risk of COVID-19; Addressing vulnerable groups; Preventing violence against women and children; Children and youth participation; Supporting recovery and social services; Digital and media engagement) - see below |  
- FGM and child marriage specific information could be added to some of the guides.  
- Initiative is useful for FGM and child marriage activities that rely on faith leaders |
| Protecting Children and Women from Violence During COVID-19 Guidance for Faith Leaders | Series of recommendations on what faith leaders can do to reduce violence against women and children and support families at risk of experience violence.  
- Refers to religious and sacred texts to reinforce messages  
- Does not contain content on FGM or child marriage  
- Not finalized yet |  
- Guidance includes FGM and child marriage content is included (Alessia working with Kerida and Faith Initiative group on this) |
| Promoting Child and Youth Participation Guidance for Faith Leaders | Principles of effective participation  
- Recommendations on what faith leaders/faith communities can do to address some of the challenges experienced by children during COVID-19 times  
- Refers to religious teachings and quotes to reinforce guidance and messages in the handbook (e.g. Scriptures valuing children and child participation)  
- Not finalized yet |  
- Some messages around the role of young people in preventing FGM and child marriage can be included. |
| Pre-testing of Materials | Pre-testing templates for newly developed materials  
- Contains COVID-19 specific questions but can be easily adapted to any type of material |  
- Can help programmes to pre-test new materials |

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For more information, please contact:

Child Protection, Programme Division, UNICEF HQ  
Email: childprotection@unicef.org  

Communication for Development, Programme Division, UNICEF HQ  
Email: c4dhq@unicef.org