



# Risk Communication and Community Engagement for **Contact Tracing** in the Context of **COVID-19** in the **Region of the Americas**



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and Community Engagement for  
**Contact Tracing** in the Context of  
**COVID-19** in the **Region of the Americas**



# Table of Contents



## Introduction

07

*Who is this guide for?*

07



## Chapter 1. Principles of contact tracing

08

*Identifying contacts*

11

*How contacts are managed and traced*

13



## Chapter 2. The role of risk communication

16

*Key risk communication tools for use in contact tracing*

18



## Chapter 3. Risk communication campaigns to educate and raise public awareness about contact tracing

19

*Steps in implementing a risk communication campaign for contact tracing*

21

Define the objectives of the campaign and call to action.

21

Define and map the campaign's target audiences.

22

Design the campaign's main messages.

24

Choose and prioritize the platforms to be used.

24

Create content for each audience or platform.

26

*Evaluating a campaign*

28

*Considerations for creating campaigns with a broad reach*

29



## Chapter 4. Participatory communication strategies to engage community members in the contact tracing process

31

*Eleven essential principles for engaging a community in contact tracing*

33

*Essential aspects of communication on contact tracing in the community*

36

*Identifying the socio-cultural profiles of target audiences*

36

*Suggested language for establishing direct dialogue about contact tracing with audiences*

37

*Why community engagement is essential for contact tracing*

38





*Community outreach activities in the context of COVID-19*

39

## **Chapter 5. Tools for implementing a communication strategy for contact tracing**

40

*How to use social networks to give greater credibility to information*

42

● **References** 43

● **Bibliography** 44

● **Glossary** 45

● **Annex 1. Posters** 47

*“If you were in contact with someone who had COVID-19 or tested positive, you have a lot to gain if you act fast.”*

*Poster: “With contact tracing you have a lot to gain”* 49

● **Annex 2. Sample video script: “I communicate and I act”** 50

● **Annex 3. Audio and video of “This is my story”** 51

● **Annex 4. Contact tracing: myths and realities** 52

● **Annex 5. Script of the radio soap opera “Following the trail”** 53

● **Annex 6. How to use social media to make information more credible** 56

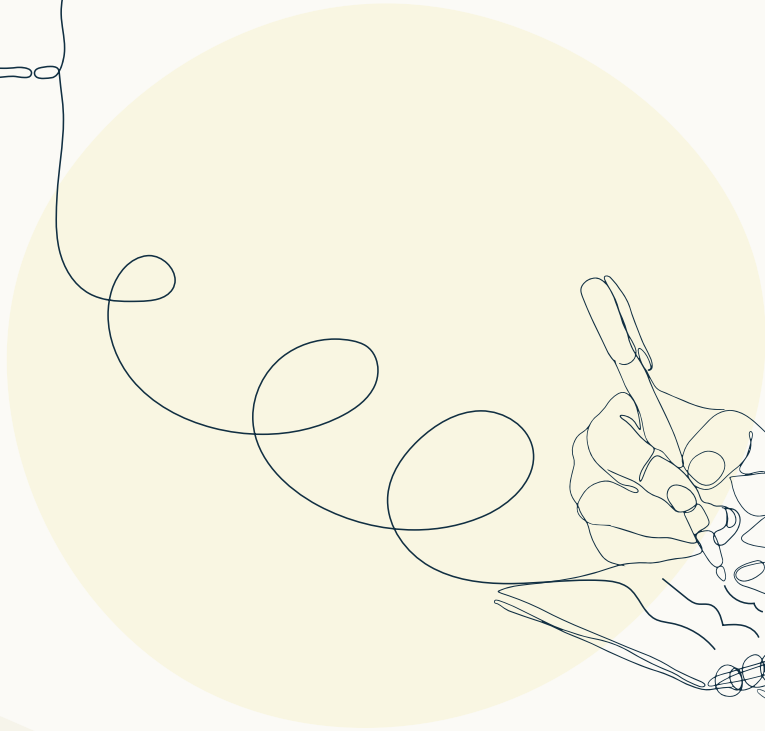
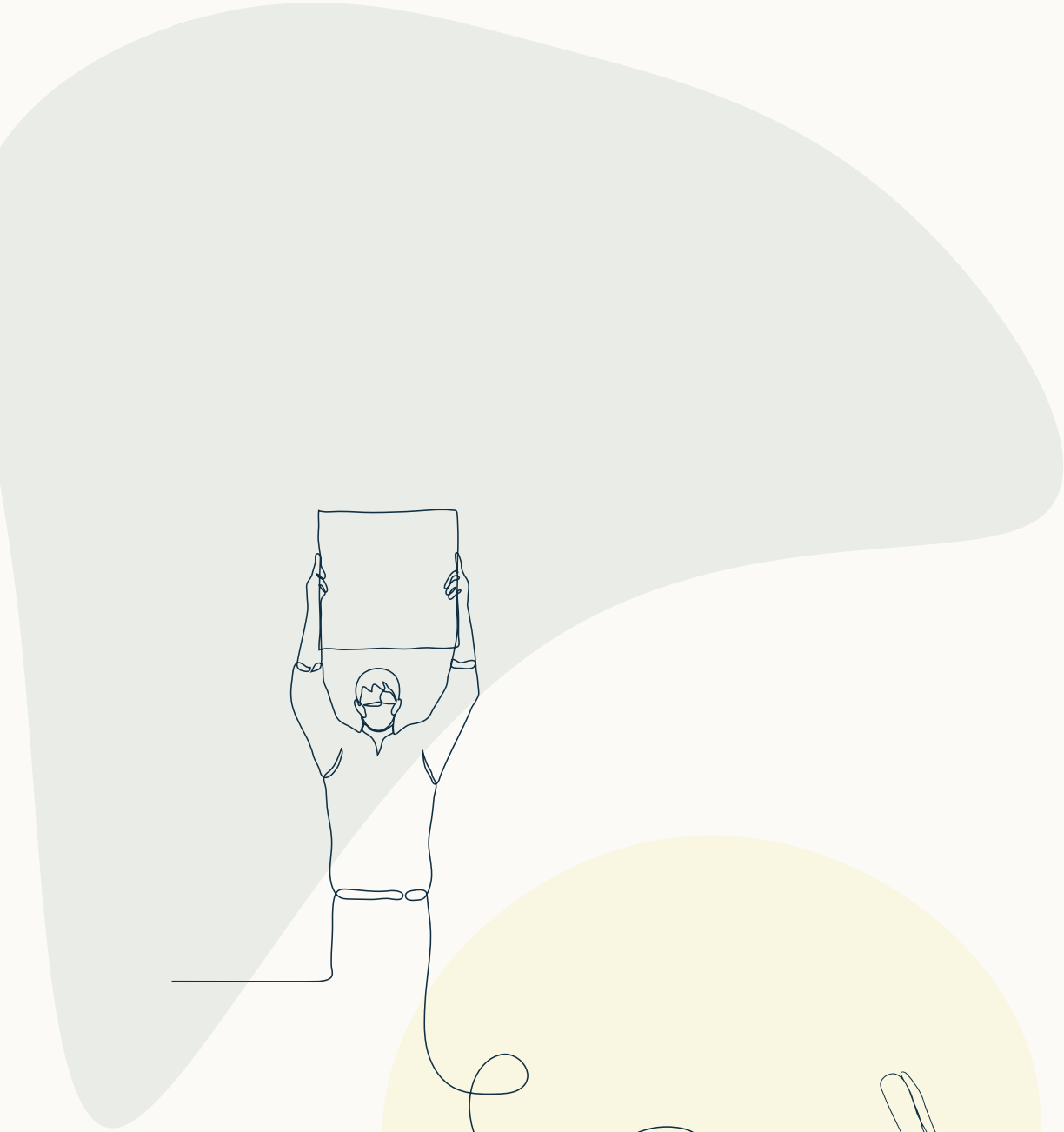
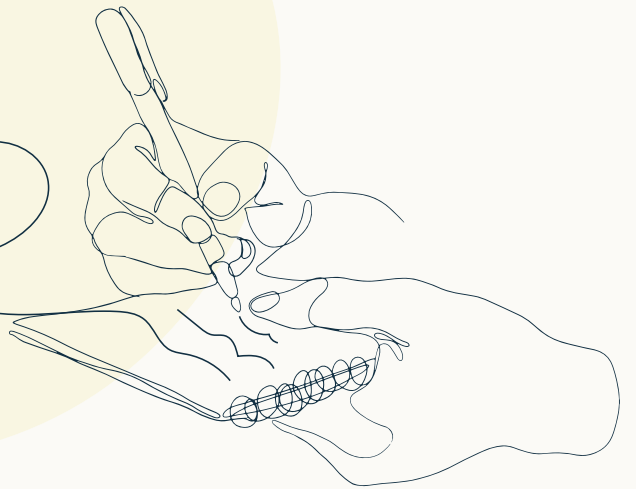
● **Annex 7. Sources of information** 58

*General information* 58

*Communication guides and orientation for contact tracing* 58

*Materials for disseminating information on contact tracing* 59





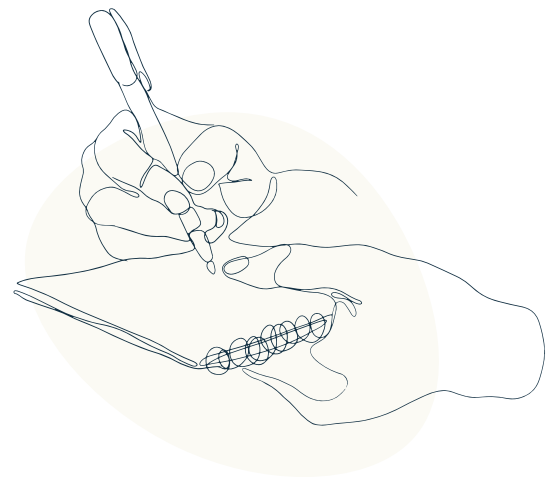
# Introduction

Risk communication is essential in preventing and responding to health emergencies. During the emergency caused by the SARS-CoV2 virus, which causes coronavirus disease (COVID-19), one of the greatest challenges to slowing down the chain of transmission has been to communicate effectively, truthfully, and in a timely fashion to the various audiences, so that they are sensitized and follow preventive public health measures properly.

This guide aims to strengthen the work of communicators in the health sector responding to the COVID-19 pandemic – work that goes beyond disseminating information. For this purpose, it offers recommendations and tools for informing audiences and raising awareness of the importance of contact tracing and community participation in the process.

## Who is this guide for?

This guide is designed for people working in risk communication, community engagement, or health promotion initiatives related to contact tracing, and for coordinators of contact tracing projects. It will be useful for those working in government entities such as health secretariats or ministries, as well as in other health sector organizations involved in COVID-19 pandemic response.



# Chapter 1

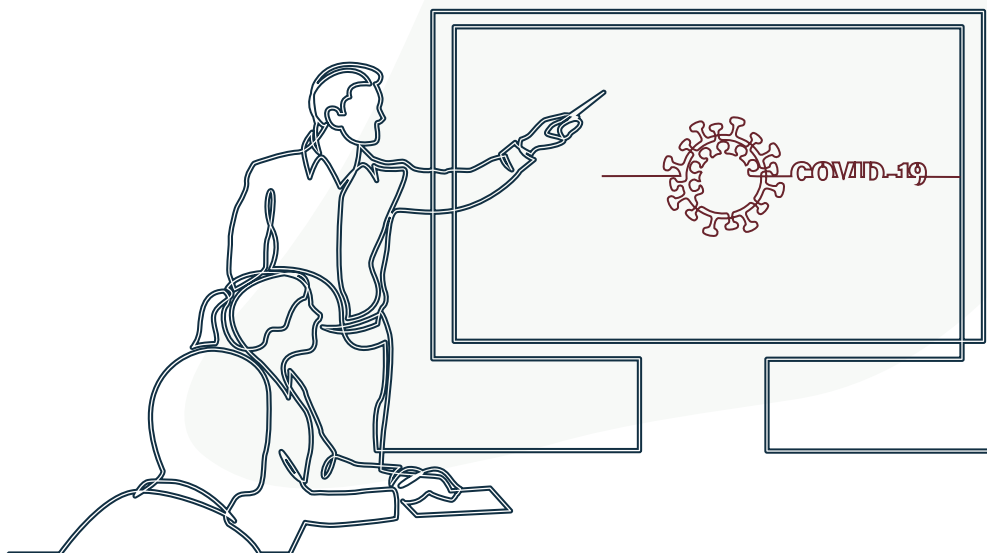
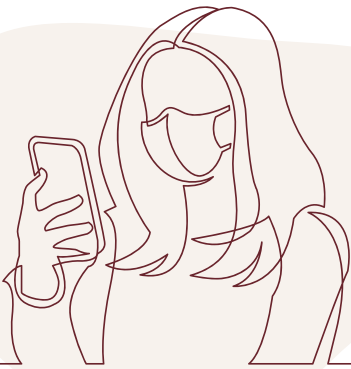


## Principles of contact tracing

# Chapter 1.

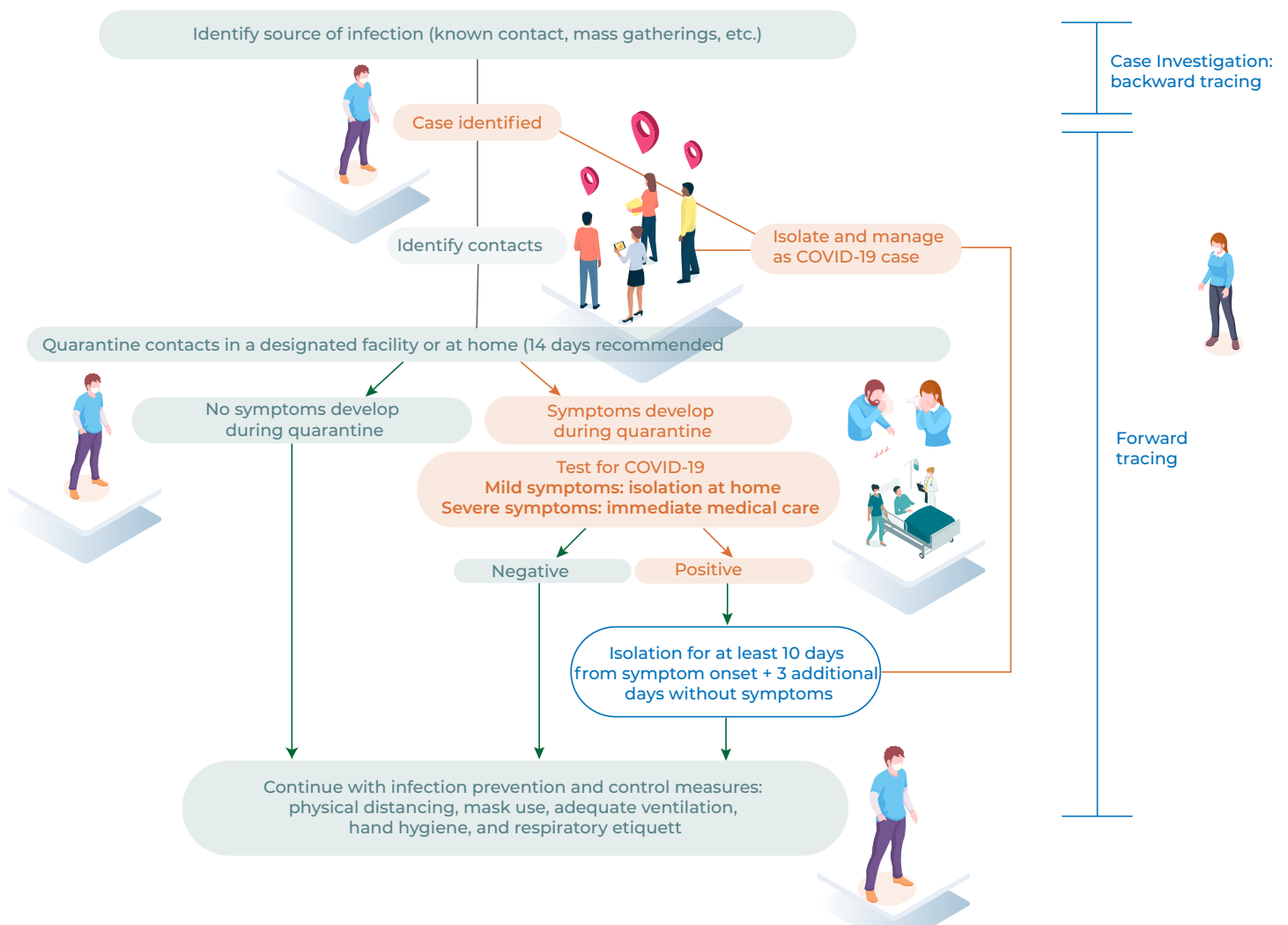
Contact tracing is an activity that has been used for decades to contain the spread of infectious diseases (Figure 1).

In the case of the COVID-19 pandemic, the basic public health measure for locating the virus consists of tests to detect its presence. However, contact tracing is essential for preventing the disease's propagation, since it makes it possible to quarantine people who have had contact with positive cases, and isolate those who have symptoms and have tested positive for COVID-19. Consequently, in all countries, and in any epidemiological situation, contact tracing is indispensable for interrupting the chain of infection, as it can prevent individual cases from becoming clusters—and clusters, in turn, from becoming community transmission (1).





**Figure 1. Tracing, monitoring, and managing contacts of probable or confirmed COVID-19 cases.**



Source: World Health Organization. *Contact tracing in the context of COVID-19*. Washington, D.C.: WHO; 2021. Available at: <https://www.who.int/publications/i/item/contact-tracing-in-the-context-of-covid-19>.



## Identifying contacts

Each country's health authority provides its own recommendations or practices for identifying contacts. Table 1 details some of the forms the process can take.

**Table 1. Identifying contacts in different settings**

Setting	Ways to identify contacts
<p>Contacts in closed settings (long-term living facilities, prisons, shelters, hostels, social settings, household settings other than the case's home, gyms, meeting rooms, etc.)</p>	<ul style="list-style-type: none"> <li>• Direct interview with SARS-CoV-2 case their caregiver</li> <li>• List of residents, visitors, and all staff members working during the relevant timeframe</li> <li>• Sign-in sheets</li> <li>• Membership lists of gyms or other access-restricted facilities</li> <li>• Interviews with coordinator or manager of facility</li> </ul>
<p>Healthcare settings</p>	<ul style="list-style-type: none"> <li>• Direct interview with SARS-CoV-2 case their caregiver</li> <li>• List of residents, visitors, and all staff members working during the relevant timeframe</li> <li>• Sign-in sheets</li> <li>• Membership lists of gyms or other access-restricted facilities</li> <li>• Interviews with coordinator or manager of facility</li> </ul>

<p><b>Public or shared transport</b></p>	<ul style="list-style-type: none"> <li>• Contact identification is generally possible only where there is allocated seating</li> <li>• Airlines and transport authorities should be contacted to obtain details of passengers and flight manifests. Passengers at highest risk will be those sitting within two rows of cases (in any direction), travel companions or persons providing care and crew members serving in the section of the aircraft where the case was seated. For public or shared transport where passenger lists or allocated seating is not available, a media release may be required to request passengers to self-identify. The media release may specify the date, time, pick-up location and destination and stops along the way, requesting people to self-identify as a potential contact.</li> </ul>
<p><b>Other well-defined settings and gatherings (places of worship, schools, private social events, restaurants and other places serving food or drinks)</b></p>	<ul style="list-style-type: none"> <li>• Undertake a local risk assessment and collaborate with organizers and leadership to notify potential contacts either actively or passively (for example, through media messages to an audience of possible attendees).</li> <li>• Communication with focal points, such as faith leaders, about potential transmission events.</li> <li>• For private social events, work from guest registration and booking lists.</li> <li>• When necessary, consider media release specifying the event day and time, with request for people to self-identify as a potential contact.</li> <li>• For commercial settings, use registries of visitors where possible, and consent-granted records. For schools, conduct a risk assessment in the school with support from the school authorities. List possible high-risk contacts (e.g. close friends, classmates); follow up with family of confirmed cases to identify possible exposure.</li> </ul>

Source: World Health Organization. *Contact tracing in the context of COVID-19*. Washington, D.C.: WHO; 2021. Available at: <https://www.who.int/publications/i/item/contact-tracing-in-the-context-of-covid-19>.

## How contacts are managed and traced

In the contact tracing process, community engagement is key because of community members' physical and social proximity and familiarity with the local context. This guide offers some participatory communication strategies designed to encourage community managers to participate in the process.

Contact management involves numerous steps, with actions that must be observed methodically and must be consistent with the technical guidelines for epidemiological surveillance. In August 2021, PAHO published an updated guide for contact tracing that should be read in detail in order to become familiar with the recommended methodology (2).

The channels of communication most commonly used for conducting contact tracing are:

- **Phone contact (voice):** the safest way to conduct contact tracing and offer information and provide support during the period of isolation or quarantine.



- **Telephone contact (SMS or messaging platforms):** a method that depends on access to text messaging services or the internet.

- **Home visit:** in-person visit in which all preventive public health measures must be followed, and where entering the dwelling is not recommended (3).



- Some countries use new geolocation technologies or applications to identify and follow up on contacts.

Whichever of these means of communication is employed, it is of the utmost importance to use questionnaires validated by epidemiological teams as well as forms to record interactions with contacts (Table 2), in addition to conducting periodic monitoring of the contact (Table 3), always following the national health authority's guidelines.

Below are examples of forms for registering contacts and doing daily contact monitoring. There are several countries in the Region that already carry this process out digitally, and where it is important to continue the process that way. The template below can be useful for countries that need to use a physical form.

**Table 2. Form to list all contacts identified**

CONTACT LIST FORM												
Contact list filled in by:												
Case name _____					Case ID (if assigned) _____							
Case neighborhood/village _____					Chief or Community Leader _____							
District/town _____					Province/region _____							
LAST NAME(S)	FIRST NAME	RELATIONSHIP TO CASE	AGE (YEARS)	SEX	VILLAGE OR NEIGHBORHOOD	DISTRICT OR TOWN	TYPE OF CONTACT*	DATE OF LAST CONTACT	LAST DATE FOR FOLLOW-UP	ASSIGNED CONTACT ID	DATE OF FIRST VISIT	CONTACT OUTCOME

\*Options include household member, health-care worker, co-worker, neighbor, or other (list).

Source: World Health Organization. Protocol to investigate non-seasonal influenza and other emerging acute respiratory diseases. Geneva: World Health Organization. Available at: <https://apps.who.int/iris/handle/10665/275657>.

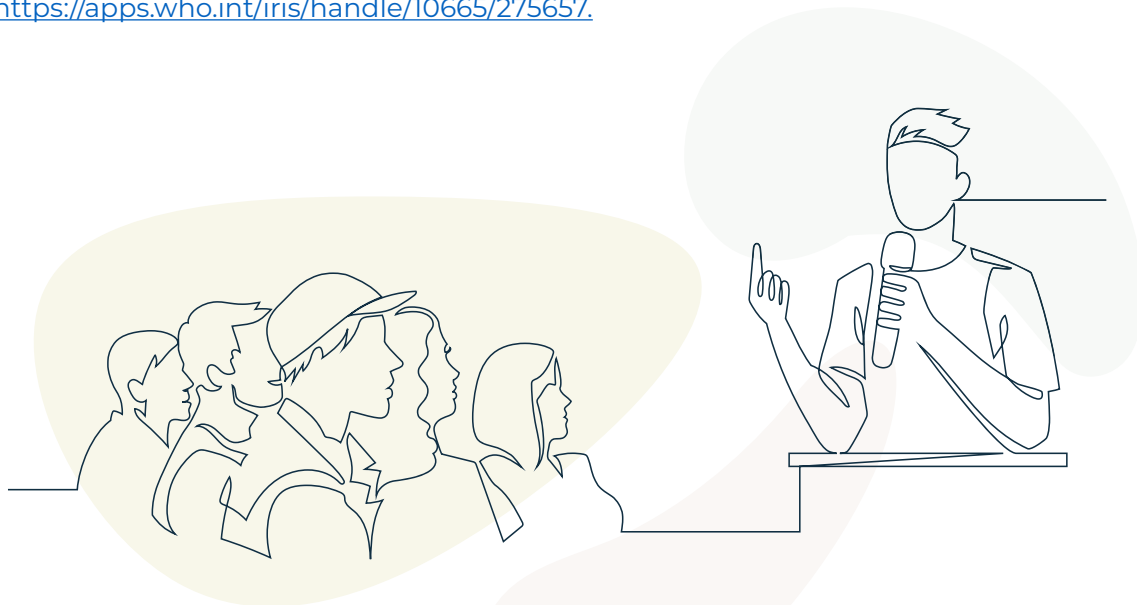
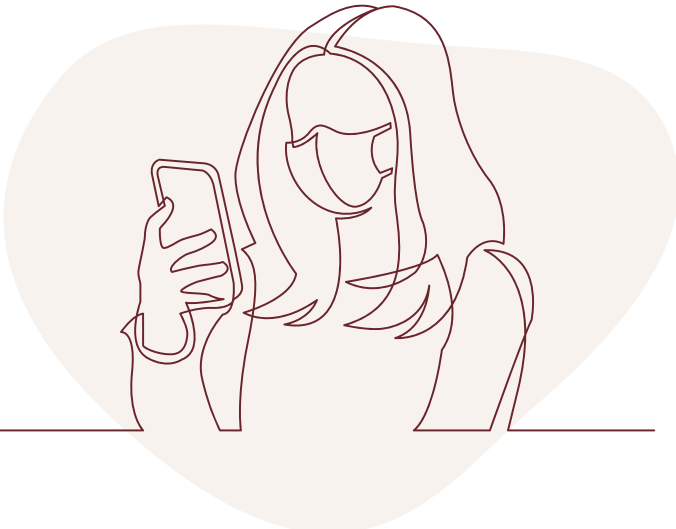


Table 3. Form to monitor daily contacts

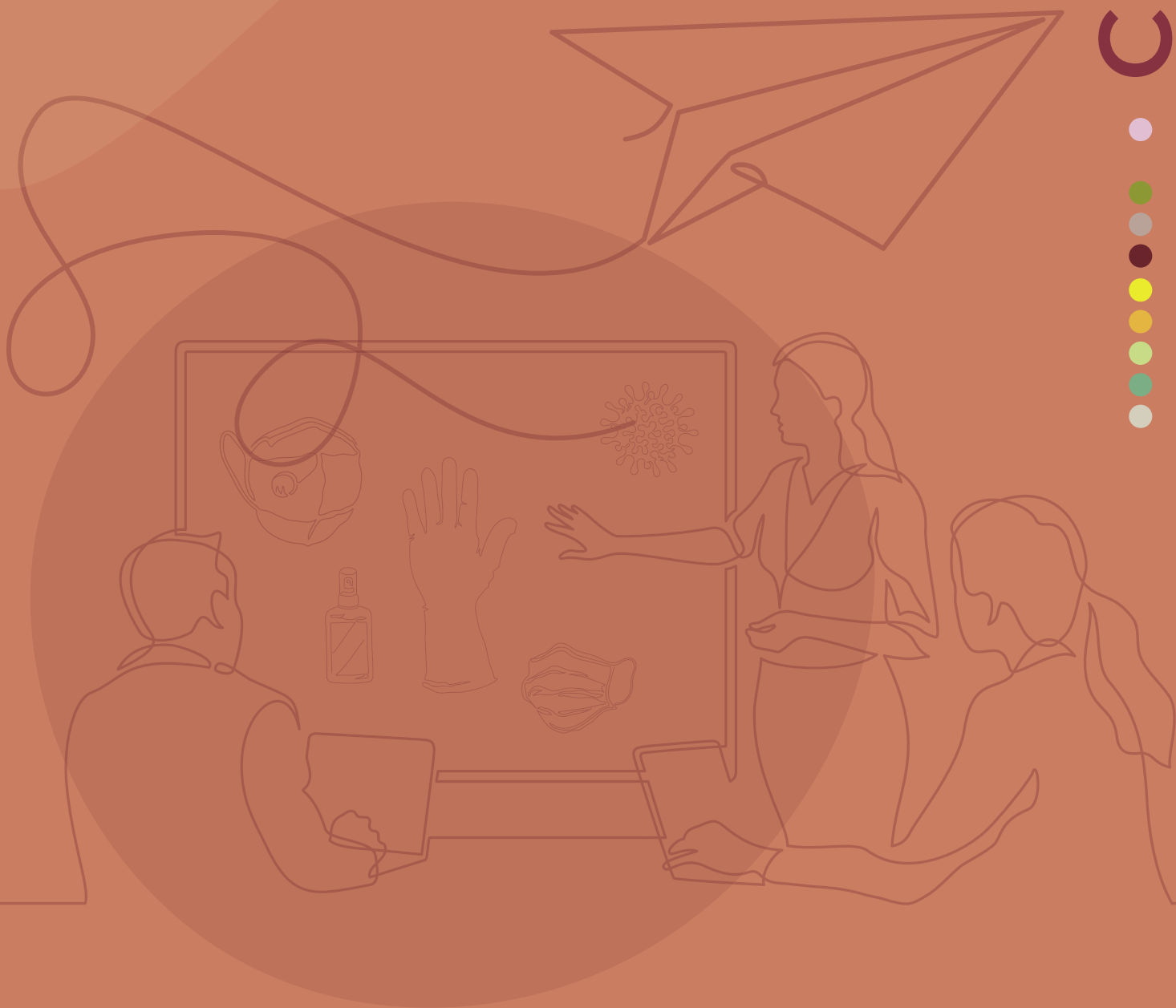
SURVEILLANCE OF CONTACTS													
Name of monitoring staff:													
Contact phone of monitoring staff:													
CONTACT ID	LAST NAME(S)	FIRST NAME	AGE	SEX	DATE OF LAST CONTACT WITH CASE	DATE OF LAST MONITORING VISIT TO CONTACT	FINDINGS ON DAILY FOLLOW-UP*						
							1	2	3	4	5	6	7

*\*Days of follow-up will depend on the event and can extend as long as necessary.  
 Mark “O” if the contact has not developed disease symptoms.  
 Mark “X” if the contact has developed symptoms or has died.*

Source: World Health Organization. Protocol to investigate non-seasonal influenza and other emerging acute respiratory diseases. Geneva: World Health Organization. Available at: <https://apps.who.int/iris/handle/10665/275657>.



# Chapter 2



The role of risk communication



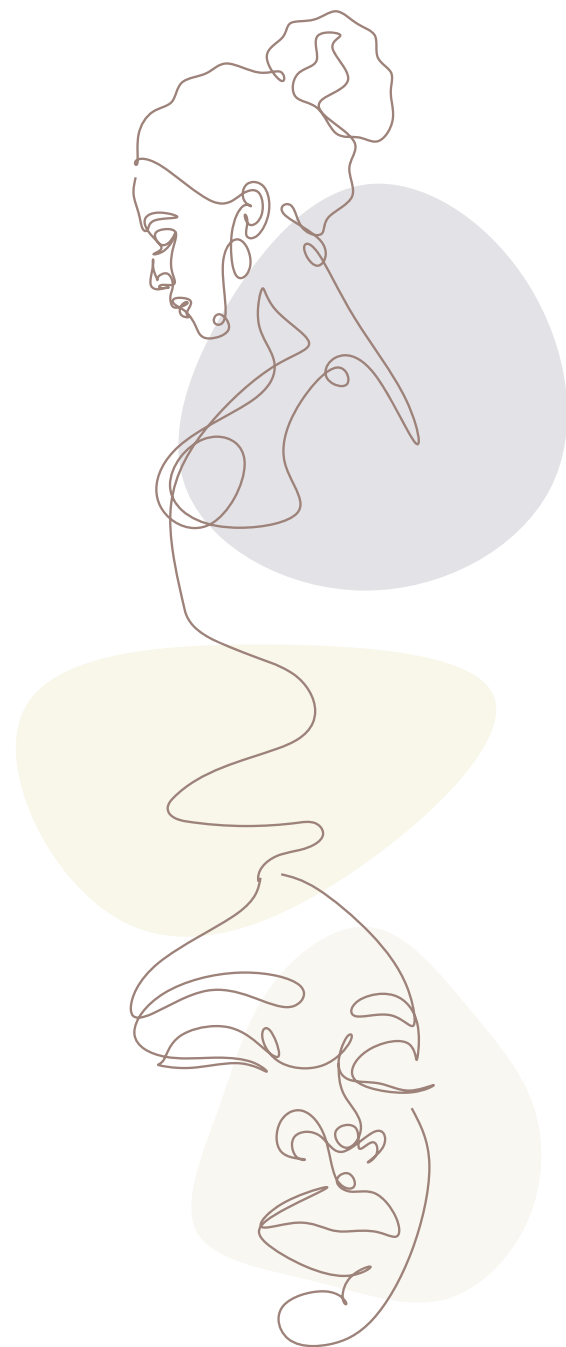
## Capítulo 2.

Societal changes – in this case, involving individual participation in actions to foster collective well-being – are not achieved quickly with information that is fragmented or that is limited to simply giving instructions. Ongoing participation with two-way communication must be established. Achieving this depends critically on risk communication.

The World Health Organization (WHO) defines risk communication as “two-way and multi-directional communication and engagement with affected populations so that they can take informed decisions to protect themselves and their loved ones.” (4).

Communicating with communities to build trust, create awareness, and involve them in the contact tracing process is critical for rapidly identifying contacts and slowing the spread of a virus. According to WHO, data and conclusions from previous contact tracing campaigns demonstrate that community trust is essential to success in any such situation. Trust is particularly important where people are marginalized or living in situations of vulnerability.

Contextualized communication that is frank and transparent, that is carried out by the professionals responsible for addressing the health emergency, and that includes participation by community leaders, broadens people’s understanding of the health problem they face. As a result, health risk communication promotes community involvement in putting measures in place for prevention and self-protection (including contact tracing). This process increases trust and contributes significantly to detecting the chain of transmission.



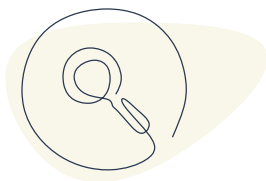


## Key risk communication tools for use in contact tracing

To achieve community participation in contact tracing, and for it to be effective, the public must first be made aware of its importance in slowing down the chain of COVID-19 infection. It is important to build trust with the population where contact tracing activities are to take place. Citizens and communities will not respond to a methodology that they are unfamiliar with. Activities and communications should be implemented to provide them with access to knowledge of the subject and allow them to appropriate it, and thus encourage them to take part in the contact tracing.

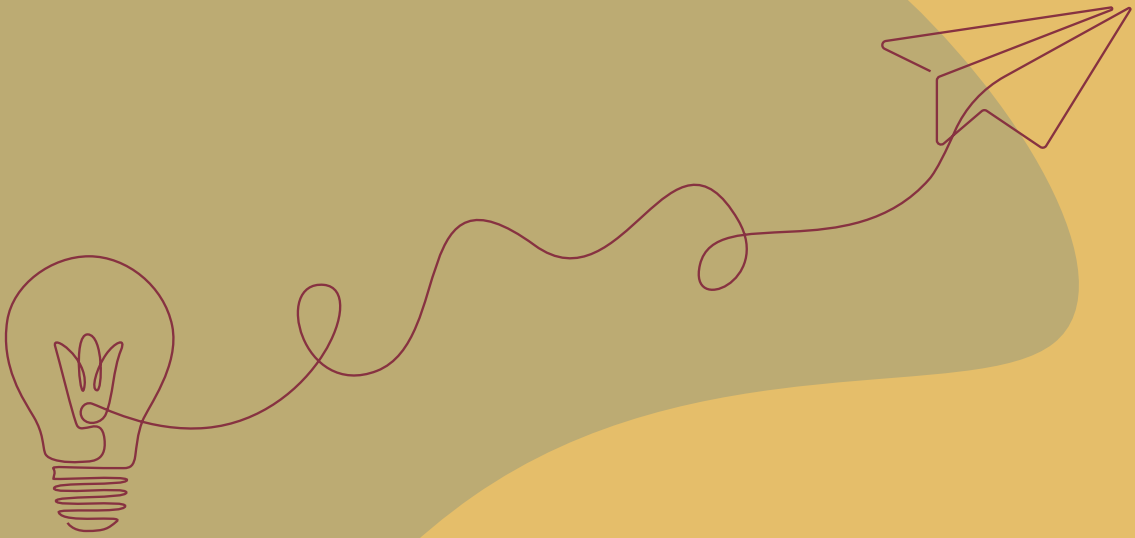
Two of the main tools to address these challenges through communication are:

- **Public risk communication campaigns on contact tracing:** campaigns that help build trust and awareness in the population where contact tracing activities are to be carried out.
- **Participatory communication strategy:** strategy designed to encourage community members to participate in the contact tracing process.



Chapters 3 and 4 provide details on the main components of each of these two tools.

# Chapter 3



Risk communication campaigns to educate and raise public awareness about contact tracing



## Chapter 3.

Many citizens are unaware of the purpose and importance of contact tracing for containing the COVID-19 pandemic. Therefore, it is important to begin by creating messages and activities that include information on basic concepts, data, analysis, and recommendations, as a way of inviting communities to assume responsibility and act in time to stop the chain of infection.

A communication campaign on contact tracing can help meet some of the following challenges:

- 1 Educating the public on the principles and importance of contact tracing.
- 2 Combating the stigma that affects people who have COVID-19 and are required to observe periods of quarantine or isolation.
- 3 Highlighting the importance of prevention and of halting the chain of transmission.
- 4 Raising awareness about the importance of using the provided communication channels to report or self-report a contact.
- 5 Providing information about the support system or benefits for contacts in the case of quarantine or isolation.

Success here depends on defining objectives and identifying your audience, as well as designing messages for the proposed campaign and deciding what channels will be used for dissemination. The steps described below explain the details of this process.

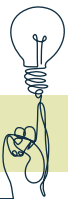




## Steps in implementing a risk communication campaign for contact tracing

Campaigns can involve mass communication or be community based. The following steps can be adapted to the varying scopes of different initiatives.

For community-level campaigns, different community leaders should be identified and involved in each step of the campaign. This is a social process and feedback and the community should be invited to give feedback on the materials involved in each step. The community can participate through telephone interviews or video platforms if the pandemic makes in-person meetings impossible.



### **Define the objectives of the campaign and call to action.**

The objectives will define what you want to achieve with the campaign. To formulate the objectives, it is useful to ask, “What change do we intend to generate in the population receiving the campaign’s messages? What particular action do we want people to take after being exposed to the message?” The following questions can help to define a campaign’s objective:

- Is it intended to educate and sensitize people about the importance of contact tracing?
- Do we hope to build trust so that people report their own COVID-19 case or someone else’s to health authorities?
- Are we trying to reduce stigma or false beliefs about compliance with quarantine or isolation?



Possible objectives of risk communication campaigns for contact tracing include:

- Improving people’s knowledge about contact tracing and its importance in responding to a pandemic.
- Promoting compliance with the contact tracing procedures established by the local health authority.
- Encouraging citizens’ trust in the contact tracing processes implemented by health institutions.



The next steps have to do with the tools that will help achieve your campaign objectives.



### **Define and map the campaign's target audiences.**

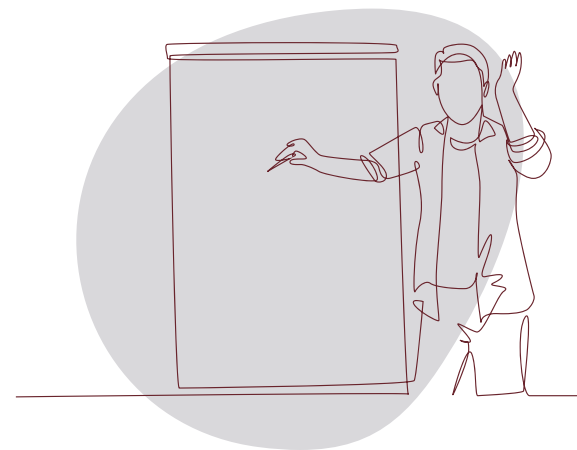
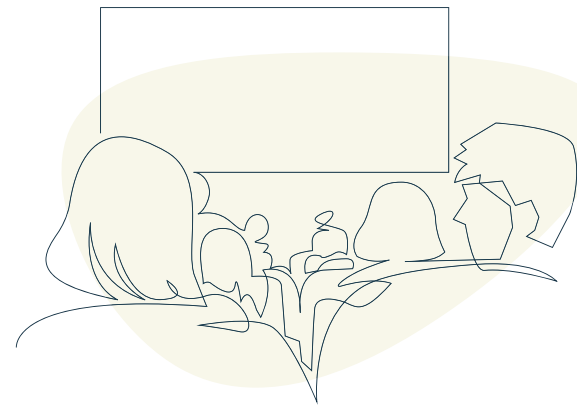
This step is very important, since the type of audience will determine the nature of the campaign's messages, as well as the channels and platforms to be used for disseminating them. Different audiences use different media. For example, a young woman in an urban area may use social media more than an adult in a rural area, who is more likely to listen to news on the radio.

In the end, what audiences you prioritize will determine what media the campaign uses, as well as determining the style of the messages (see steps 3 and 4 below). Since the media to be used will depend on the audiences prioritized, this step is also of paramount importance in determining the budget for the campaign.

A mass campaign can include different types of audiences. The important thing is the message and the suitability of the dissemination platforms for each audience.

A campaign at the community level must consider the socio-cultural context and anticipate the main obstacles that people will encounter in answering the call to action (which is the objective). Whenever possible, campaign messages should offer ways of dealing with the obstacles facing the community.

Some meaningful questions can help define the campaign's target audience:





### What are the characteristics of the audience that the campaign is addressing?

- Is it primarily an urban or peri-urban population, or is it mostly rural?
- Does it involve populations in vulnerable situations, such as migrants, refugees, or communities in low socioeconomic brackets or that depend on the informal economy?
- Does it involve indigenous populations?



### What age groups does the campaign target?

The following is an example of age ranges that are commonly used in communication campaigns:

- o 18-24 years
- o 25-34 years
- o 35-49 years
- o 50-64 years
- o 65 years and over



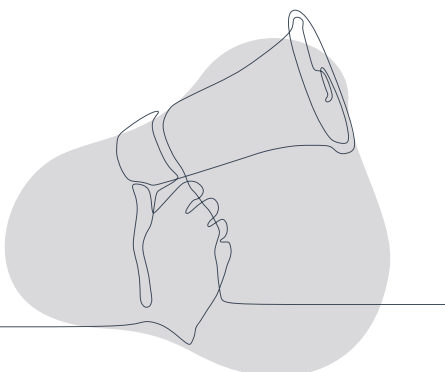
### Who are the key influencers for the target audience?

They may be influential bloggers or other social media leaders, local leaders, women's or youth groups, religious groups and elders' groups, health experts or volunteers associated with local and international NGOs, or people who have experienced COVID-19.



### What types of media or platforms does your target audience use?

The above questions can be answered through observation or by researching existing information about the community or population to be addressed. Another possibility is interviewing key informants who can provide information about the most widely used forms and channels of communication, as well as about the community's religious beliefs or practices, health services, and social realities.








## Design the campaign's main messages

The messages must be clear, specific, and objective. It is important to avoid technical terms that may be confusing. The language should be inclusive in relation to prioritized and culturally sensitive audiences. The messages should take a tone that the audience can relate to, and they must adhere to the latest public health recommendations from local authorities (Table 4)

Ideally, the messages should include one or more of the following:

- An instruction to follow.
- A behavior to adopt.
- A piece of information that can be shared with friends and family.

**Table 4. Example of a campaign with a message for its target audience that is based on the campaign's objective.**

 <b>Objective*</b>	 <b>Audience</b>	 <b>Message*</b>
<p>To create a situation where people follow the contact tracing procedures established by the local health authority</p>	<p>Urban adults between the ages of 25 and 34</p>	<p>If, for over 15 minutes, you were within one meter of someone who has symptoms of COVID-19, you may have been infected. Isolate yourself and get tested as soon as possible. Communicate with [name and contact information] to begin monitoring your health status. Inform the people you had contact with, so that they can take action, too. Together, we can break the chain of COVID-19 infection.</p>

\* An objective can be set out in a number of messages.



## Choose and prioritize the platforms to be used.

The audience profile will determine what channels to choose to reach the maximum number of people. The following are some of the media most commonly used in public health campaigns.

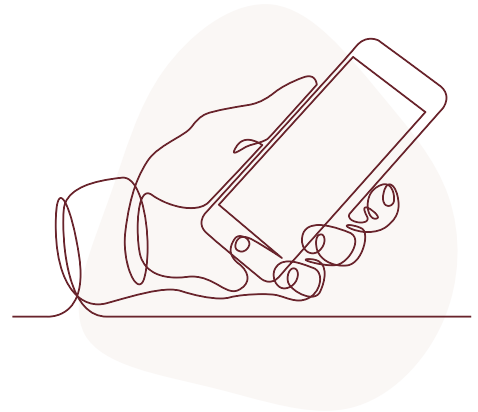
At the community level, many neighborhood or local leadership groups use Facebook pages (or other social media) as a tool for getting information to their audiences. When mapping your audiences, consider seeking this type of information so as to include the appropriate channels of communication in your campaign.



Ideally, you will use a combination of several platforms to maximize the population's exposure to the messages. This also respects public health recommendations in the context of the COVID-19 pandemic, which call for avoiding crowds and maintaining physical distance between people.

- **Social media and messaging services (such as WhatsApp or Telegram):**

These have been one of the mainstays of communication during the pandemic, but you must determine whether your priority audiences have access to them and use them. In any case, social media are a principal component of any communication campaign and are used as a central or supplementary channel of dissemination for a campaign, always considering the prioritized audiences. One of their great advantages is that they allow you to interact with audiences and be informed about receipt of the messages and their reach. Also, these media offer advertising schemes that may allow you to reach a greater number of people.



- **Information distributed through official ministry websites or portals:**

Campaign materials should be available on local authorities' websites to get information to members of the public who consult these portals regularly.



- **Working with the media:**

The press is an important ally in a campaign. Press releases about how the risk communication campaign intends to contribute to contact tracing are fundamental for any mass campaign, as is making authorized spokespersons and experts available for interviews.



- **Work with influencers or opinion leaders:**

People recognized in the community can be brought into the campaign, making messages more memorable and widening dissemination.

- **Printed material or visual advertising:**

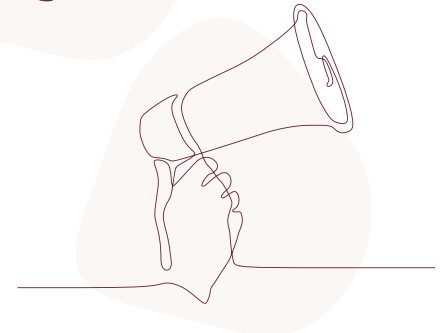
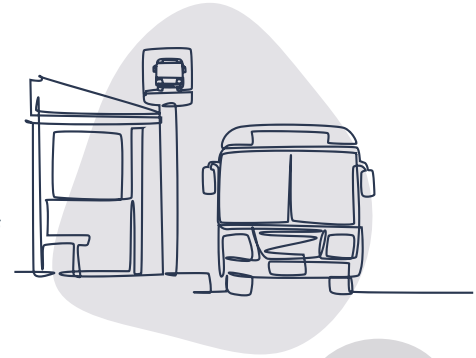
Although the cost of using printed material can be somewhat steep due to the expense of printing and distribution, its impact should not be underestimated. Visual





advertising in places with a lot of traffic, such as public bus stops, can be very effective in forms such as brochures, posters, or murals located or distributed in these places.




- **Radio or television messages:** The cost of putting messages on commercial broadcast media can be high, but these media do continue to enjoy large audiences in Latin America and the Caribbean. Alternatively, you can look into options with low-cost State-operated or community media, or explore the possibility of reduced rates applicable to official entities.
- **Text messages (SMS) to mobile phones:** By partnering with cell phone companies, free text messages can be sent to subscribers with a central campaign message and a link to a website for more information.
- **Vehicle-mounted loudspeakers:** Distributing a message over mobile loudspeakers can be very useful in rural communities or areas where other communication platforms have low penetration, or for campaigns conducted at the community level.



### **Create content for each audience or platform.**

In addition to the appropriate audio message, visual and design work play an essential role. Seek advice from graphic designers. Images must appeal to your target audience and be attractive in the cultural context in which they will be received. (Table 5).

Table 5. Sample campaign content template

 <b>Audience</b>	 <b>Platform</b>	 <b>Message or content</b>
<p>Adults 45 to 60 years old living in the La Primavera neighborhood.</p>	<p>Facebook</p>	<p><b>Text of the post:</b>                      If you tested positive for COVID-19 or have symptoms, inform the people you've been in contact with in the last 14 days. Remind them of the importance of getting tested, isolating, and monitoring their symptoms.</p> <p><b>Text on the card:</b>                      By warning your contacts about possible infection, you break the COVID-19 chain. Take care of yourself and protect your loved ones and community from COVID-19.</p> <ul style="list-style-type: none"> <li>• Get tested.</li> <li>• Inform your contacts.</li> <li>• Monitor your symptoms.</li> </ul>

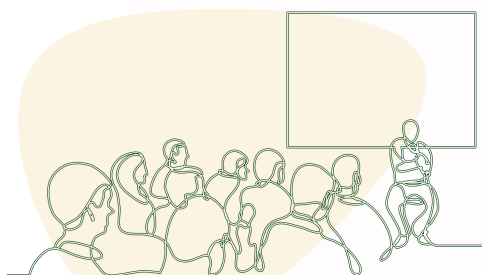


Finally, a design must reflect the saying that “less is more.” Too much information increases uncertainty, and technical language can alienate some audiences, so clarity and concision should be a priority. To promote memorability and comprehension, it is advisable to use short sentences accompanied by related graphic content.



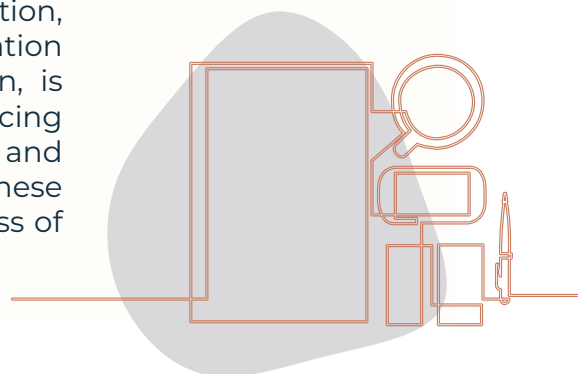
## Evaluating a campaign

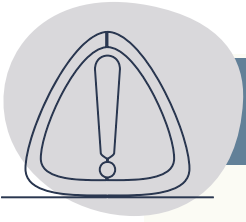
It is important to find out what impact the messages, communication pieces, and activities have had on the priority audiences. Measuring this calls for instruments that can measure the degree of acceptance that a campaign or strategy achieves. In the context of this guide, telephone or digital surveys are the instruments suggested for obtaining feedback from the public while reducing in-person contact and the concomitant risk of COVID-19 infection.



Similarly, regular meetings with the target communities to follow up and evaluate progress can offer a more accurate view of how community-directed activities and communications are affecting contact tracing. Consult leaders and community representatives frequently to adapt or make adjustments to the campaign so as to meet community needs.

Another way of analyzing how messages have contributed to people's response to the call for action, and ascertaining the impact of communication pieces and of the contact tracing campaign, is to compare the self-reporting or contact tracing figures with their levels before the messages and communication pieces were disseminated. These indicators can give clues as to the effectiveness of communication activities.





## Considerations for creating campaigns with a broad reach

For a campaign to have impact and be memorable, the following elements must be considered (other specific recommendations are provided in Table 6):

- **Power:** an image that makes an idea clear.
- **Relevance:** direct importance for the person.
- **Frequency:** needs to be sufficient but not excessive. Too much repetition of a message leads to saturation, and it can provoke rejection if, for example, it contains graphic images.

Other key factors that need to be considered:



### Use relatable elements:

- » **Language:** The tone of the message must be positive, not punitive. Also, account must be taken of the different second-person forms (tú, usted, vos) used in different parts of Latin America.
- » **Images:** need to reflect the diversity present in Latin America and the Caribbean, which includes people of African descent, indigenous peoples, and young people.



### Use channels of communication that are easy to access:

- » In remote regions where connectivity is a problem, use audio channels such as community-based radio and vehicle-mounted loudspeakers.
- » Make use of tools such as posters, elevators in buildings, public transportation, notices on walls, etc.
- » Take advantage of hypertext in digital media: include links, hashtags, and other elements that encourage promotion and dissemination.



**Identify local influencers whose collaboration can strengthen campaigns and dissemination:** people with wide recognition, or micro-influencers who are part of the community.

**The impact of emotion in communication:** People do not always make decisions logically or rationally. The role of emotions in human behavior is fundamental. Incorporating the following components into communication pieces can make them more effective:

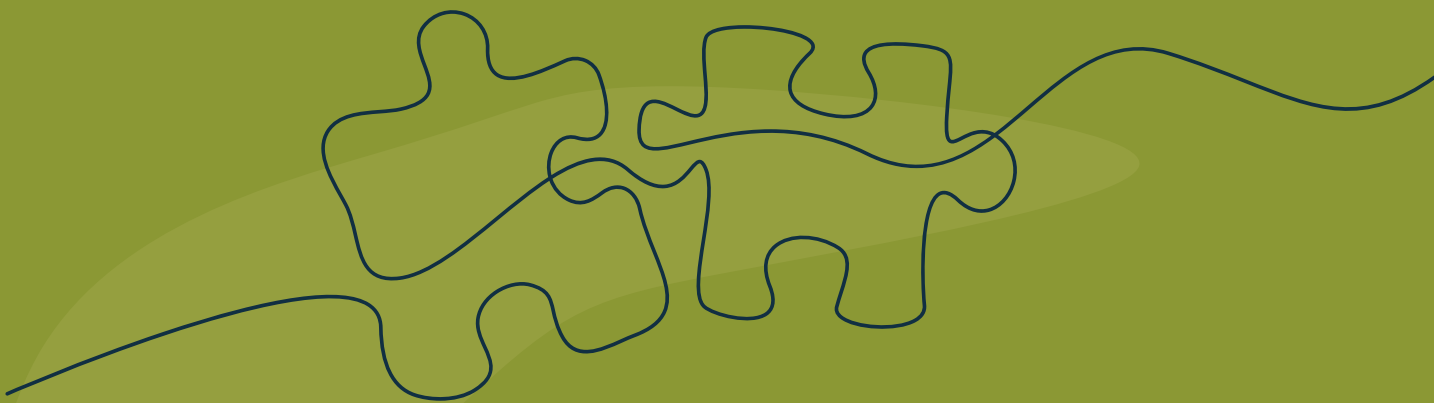
- Emotional component: use of positive emotions (such as friendly faces, smiles, and positive language).
- Cognitive component: messaging based on technical and scientific facts, but using simple language.
- Behavioral component: direct invitation in the form of a call to action. In addition to telling people what to do, it is important to tell them how to do it.

During the pandemic, emotions such as fear and uncertainty weigh heavily in the context of communication. Therefore, the emphasis should be on empathic communication.



Table 6. Additional recommendations for creating messages

Do	Don't
Use comparatives, percentages, and examples.	Dar cifras sin contexto.
<i>Example: "One of every two people may require hospitalization."</i>	<i>Ejemplo: "La tasa de complicación es del 50%".</i>
Use the first person, and avoid words with possible negative connotations.	Usar la función apelativa, de forma muy directa.
<i>Example: "If I have symptoms, I stay home for two weeks."</i>	<i>Ejemplo: "Aíslese si está enfermo"</i>
Replace long videos (over 5 minutes) that use text generators with infographics.	El exceso de información causa confusión.
Replace technical reports with short guides.	Las comunicaciones largas y con muchas páginas provocan rechazo en el lector.
Use language that all types of audiences can understand.	Usar lenguaje técnico y especializado.
Messages should conclude with a call to action.	Usar mensajes no enfocados a la llamada a la acción, que aunque sean claros y verdaderos, no inciten a actuar.
<i>Example: "Making a list of people who were with me in the last week can save the lives of my loved ones and friends."</i>	<i>Ejemplo: "El rastreo de contactos ayuda a detener la cadena de contagio".</i>

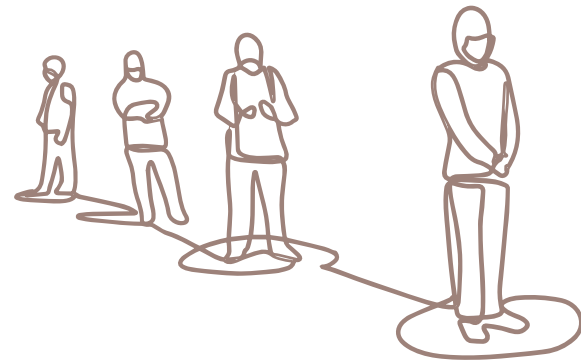


Participatory communication strategies to engage community members in the contact tracing process



## Capítulo 4.

It is essential to raise public awareness and encourage people to accept and adopt contact tracing as an additional public health measure. Also, it is essential to engage community members in the process of identifying, managing, and following up contacts. Only such an approach can ensure successful implementation of this control measure. Community participation in the contact tracing workforce is central, especially for communities in vulnerable social contexts with high levels of poverty or poor coverage of health services.



WHO offers the following 11 principles for developing a strategy to engage a community in contact tracing (5). These principles involve a series of actions designed to make community participants part of the human resources involved in contact tracing activities. The principles should be analyzed and adapted in coordination with the epidemiology and surveillance teams of the health institution that is leading the contact tracing process in the area.





## Eleven essential principles for engaging a community in contact tracing

1

**Learn what circumstances affect each community.** Obtain the existing information (health-related, social, cultural, epidemiological, geographic, linguistic, and historical), and get acquainted with the community. Seek information on community dynamics and social and political power structures, as well as on attitudes, perceptions, and practices around contact tracing.



2

**In crisis situations, people are more likely to make decisions based on trust and perceived credibility.** Hence, trustworthy community entities (local government, informal leaders, community committees, religious institutions, community groups, and other influential individuals or groups) as well as experts on their own local culture, tradition, and practices should be identified and engaged. They can be partnered with in planning, implementing, and evaluating contact tracing programs. Community representatives play an especially important role where vulnerable populations are concerned. They help to ensure that the best community-based solutions are identified and taken advantage of.



3

**Gaining and maintaining community acceptance.** Contact tracing is best done when the community fully understands why it is necessary, and when it is done in the least invasive and most culturally appropriate way. The more the contact tracing process is understood by the community and incorporates the community's perspectives, the more disposed its members will be to involve themselves in contact tracing activities.



4

**Work with the community's own solutions.** It is essential that local leaders, representatives, and other influential people be committed to the cause, since they are often accountable to their communities and are knowledgeable





about the best entry points for community action. Specifically, consult community representatives of vulnerable populations by contacting women, children and schools, young people, refugee and migrant populations, seniors, and people with disabilities, to ensure that the best community-based solutions are identified and taken advantage of.



5

**Create a community workforce.** Make recruiting contact tracers from the community a priority in order to take advantage of their cultural, linguistic, and social understanding. Provide them with adequate training to ensure efficiency, accuracy, and the communication skills needed when investigating cases and contacts, and integrate them with the broader response team.



6

**Commit to frank, two-way, inclusive communication.** Effective and transparent communication is essential to ensure that the community understands and embraces contact tracing. The information conveyed should include information on privacy rights and the confidentiality of the information collected; resources available to contacts who are quarantined; and the personal, household, and community risks and benefits connected with participating in contact tracing procedures. Work with local groups to decide what activities, verbal and graphic messages, and local languages should be used. Ensure that two-way communication channels are evaluated for accessibility and trust, not only on the basis of how much they are used.



7

**Listen to, analyze, and respond to feedback.** Continual listening is important for understanding the dynamics of the local context. Pay attention to the fears and concerns that people may have about contact tracing, and make sure that they are addressed. Adapt contact tracing to meet the needs expressed by the communities.





8

**Consider whether to use technology for contact tracing activities.**

Communities will respond differently to the use of cell phone apps or technological tracing tools. Many may express concerns around geolocation, data privacy, and safeguards to protect health information. These issues can generate distrust and hesitancy. Public health agencies implementing contact tracing for COVID-19 should be prepared to communicate how the information will be used, stored, and accessed, and how individuals will be protected from harmful disclosure or identification. Contact tracing workers should be prepared to answer such questions and concerns.



9

**Do not criminalize actions.**

It is critical that contact tracing and associated measures, such as quarantining of contacts and isolating cases, not be used for punitive ends or be associated with security measures or other concerns outside the realm of public health. Understanding the full ramifications of punitive action for non-compliance is imperative to ensure high levels of participation in reporting and fully disclosing activities and contacts.



10

**Discourage stigma, discrimination, and rumors, and address them.** Take special care not to attract stigma or undue attention to individuals or families affected by COVID-19 (6).



11

**Coordinate with all actors involved in the response.**

COVID-19 impacts multiple aspects of community life that go beyond health, such as access to food and water, sanitation and hygiene, livelihoods, security, and education. Collaborating with other actors who support the community will help mitigate opposition to contact tracing, facilitate relations with the community, and increase the effectiveness of solutions.

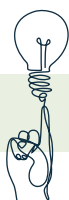




## Essential aspects of communication on contact tracing in the community

It is important to establish trust and generate empathy (7), which then facilitates subsequent communication.

To accomplish this, it is essential to know the culture, values, and social features of the community being addressed. A matrix should be developed to create a profile of the key features of the community. All of these elements will be essential to a strategy for intervention at the community level.



## Identifying the socio-cultural profiles of target audiences

The following are some of the basic factors needed to establish trust with communities:

	<p>Prevailing religious beliefs</p>	<p>Understand them, but never use them in messages.</p>
	<p>Interests such as music, cultural consumption (media), fashion, sports, etc.</p>	<p>Categorize these interests, use shared languages, and identify opinion leaders and influencers.</p>
	<p>Beliefs around COVID-19</p>	<p>Debunk myths and emphasize scientific data.</p>
	<p>Socioeconomic context</p>	<p>Be aware of income and poverty levels, employment conditions, coverage of health services, and the forms that family groups take.</p>
	<p>Social context</p>	<p>Determine whether insecurity or violence is affecting groups and social organizations in the community, since these factors can play a role when building trust with people.</p>
	<p>Indigenous peoples, Afro-descendants, and other ethnic groups;</p>	<p>Make sure that the information will be appropriate. In the case of indigenous communities or other groups with a common cultural heritage, make sure that the information you offer will be appropriate in that context.</p>

Because cultures in the Region generally feature emotional closeness between people within a community, and a high level of social (word-of-mouth) interaction and group culture, as well as a need for bonding, it is understandable that measures such as isolation and contact tracing provoke emotional reactions. This should be taken into account when communicating with these communities.



### Suggested language for establishing direct dialogue about contact tracing with audiences

It is important to remember always to use terms free of negative connotations for the various audiences, countries, or administrative levels being addressed (Table 7). The goal here is to soften the language to foster empathy with the audience.

**Table 7. Terms with possible negative connotations, and potential alternatives**

Possible negative connotation (x)	✓
Lockdown	Isolation
Confinement	Home care
Contact tracing	Monitoring people
Contact reporting	Identifying contacts
Restrictions	Measures
Control	Prevention
Sick people	Patients who test positive
Focus of infection	Chain of infection
Avoiding contact	Establishing virtual, digital, or remote contact
Inactivity	Rest, home care
Incubation	Development of the virus
Exposure	Vulnerability
Contaminated people	Sources of infection
Incapacitated	Quarantined
Propagador, peligroso	Persona expuesta al virus
Prender el virus	Exponer al contagio
Vigilancia	Control, monitoreo



## Why community engagement is essential for contact tracing

Community engagement is imperative for contact tracing because:

- It brings the process of imparting knowledge and information about contact tracing to a larger audience.
- It enhances the collective attitude about and receptivity to contact tracing.
- Information paths are created that facilitate and more rapidly detect possible contacts.
- It creates a sense of co-responsibility around health status and the environment.
- The social fabric becomes stronger around community care.
- Collective work takes place in disseminating and promoting communication pieces for community appropriation, education, and participation.
- The disseminated communication pieces are better positioned.
- It increases community members' commitment as health promoters.
- It increases the community's monitoring of biosafety measures.
- Participation by the community and its leaders should help identify challenges that may arise for contact tracing, including language and literacy, access to food and medical care for other illnesses, education, information, stigmatization, and marginalization.





## Community outreach activities in the context of COVID-19

Communities can be reached through women's groups, youth groups, teachers' groups, religious leaders, and leaders of other community organizations.

Come to agreements with these groups on setting up planned activities, which may include campaigns to promote awareness about contact tracing, trainings for community agents who will conduct contact tracing, radio programs designed to defuse the stigma attached to contact tracing, or the use of vehicle-mounted loudspeakers in the community to disseminate information.

It can be a challenge, during the COVID-19 pandemic, to engage in such activities and at the same time follow public health measures for prevention: using masks, maintaining a distance of at least one meter from other people, avoiding enclosed spaces and crowds, and observing constant hand hygiene, all of which are recommended even after vaccination.

If possible in the social context, opt for online activities, or activities that can be carried out remotely (in meetings via cell phone or other devices with internet access).





Tools for implementing a communication strategy for contact tracing



## Capítulo 5.

For communication strategies to address contact tracing, messages must be created that generate empathy, a sense of ownership, and interaction. This chapter describes a series of communication tools designed for that purpose. The people who develop a communication strategy around contact tracing can evaluate these tools.

- **Posters declaring that “With contact tracing you have a lot to gain”:** messages to make individuals and communities aware of the benefits of timely reporting, and of participating in life-saving contact tracing (Annex 1).
- **Script of the “influencers” video:** The story presented in this video shows a path of action that can help people decide to report contacts more quickly and effectively. It is advisable to engage opinion leaders, influencers, or others who are recognized in the community (Annex 2).
- **Audios and videos of “This is my story”:** scripts for audios or videos that can be shared on social media, or on messaging services such as WhatsApp (Annex 3).
- **Myths and realities about contact tracing:** An excess of information about COVID-19 has spread both in traditional media and on digital platforms. Often the information has been false, leading to greater confusion, fear, and skepticism in communities. Annex 4 presents a list of myths surrounding contact tracing, along with the corresponding realities. This may be useful to post on social media.





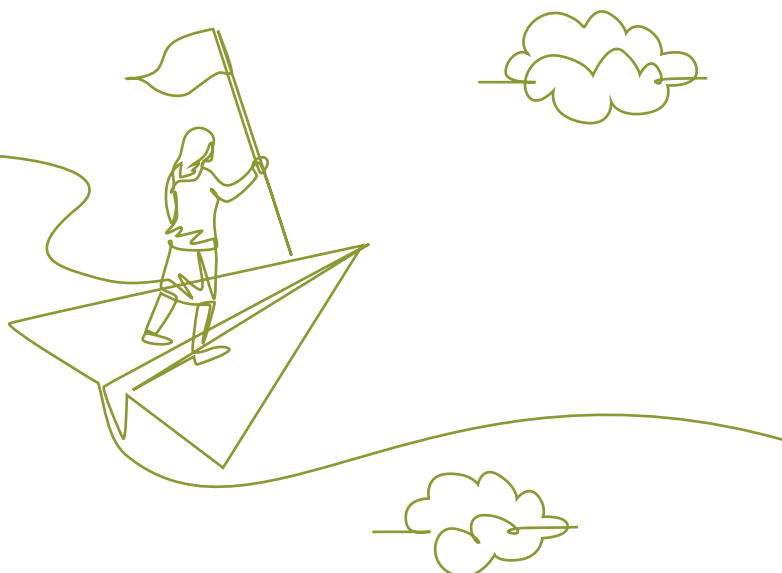
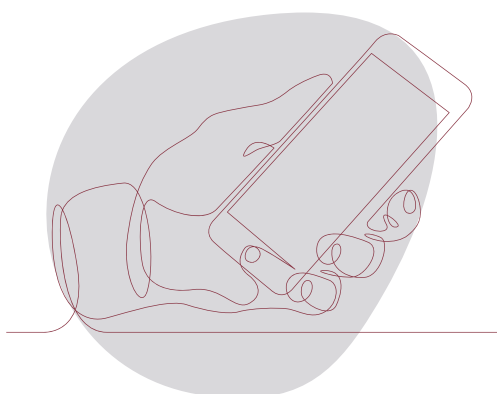
- **Script of the radio soap opera “Following the trail”(Siguiendo el rastro):** Radio is a basic way of disseminating information in a pandemic, especially in communities and rural areas. Hence, it is important to develop innovative formats that are not limited to presenting news, interviews, or opinion, and that not only raise awareness but also take in information and replicate it (Annex 5).



### How to use social networks to give greater credibility to information

On social media, reaching a large number of people is seen as a very positive thing, because it means that many are exposed to the information posted. For communication in emergencies and public health situations, it is very useful to use principles of communication that facilitate using social media in this way (Annex 6).

**Source of useful links on contact tracing:** Annex 7 provides a list of documents, guides, and tools that is organized in categories and can facilitate the work of communication teams.





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# Glossary

**Isolation:** separating people who are sick or have had symptoms so that they cannot infect others.

**Confirmed case of SARS-CoV-2 infection (three options, A through C):**

- A. A person with a positive nucleic acid amplification test (NAAT) (such as the PCR test);
- B. A person with a positive SARS-CoV-2 antigen test (Ag-RDT) who fits the definition of a probable case or criterion A or B for a suspected case;
- C. An asymptomatic person with a positive SARS-CoV-2 antigen test (Ag-RDT) who is a contact of a probable or confirmed case.

**Probable case of SARS-CoV-2 infection (four options, 1 through 4):**

1. A patient who meets the WHO clinical criteria and either is a contact of a probable or confirmed case or is associated with a COVID-19 cluster.
2. A suspected case with chest imaging showing findings suggestive of COVID-19 disease.
3. A person with recent-onset loss of smell (anosmia) or taste (ageusia) in the absence of any other identified cause.
4. Death, not otherwise explained, in an adult with respiratory distress preceding death who was a contact of a probable or confirmed case or linked to a COVID-19 cluster.

**Risk communication:** Real-time exchange of information, recommendations, and opinions between experts or officials and people who face a threat (risk) to their survival, health, or economic or social well-being. The ultimate goal of risk communication is to make anyone exposed to a risk capable of making informed decisions to mitigate the effects of the threat (such as a disease outbreak) and to take protective and preventive action.

**Contact:** A contact is a person who has experienced one of the following exposures to a probable or confirmed case of SARS-CoV-2:

1. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes;
2. Direct physical contact with a probable or confirmed case;
3. Having provided direct care for a patient with probable or confirmed COVID-19 without using appropriate personal protective equipment.

Exposure must have occurred during the infectious period of the case, as the following definitions indicate:

- **Exposure to a symptomatic case:** between 2 days before and 10 days after symptom onset, plus at least 3 additional days without symptoms (including without fever and respiratory symptoms), for a minimum of 13 days total after symptom onset.
- **Exposure to an asymptomatic case:** between 2 days before and 10 days after a positive test for SARS-CoV-2. Contacts should be managed in the same way as for a symptomatic case.

**Quarantine:** Restriction of activities and/or separation of persons who are not ill but who may have been exposed to an infectious agent or disease, in order to monitor their symptoms and ensure early detection of cases. Quarantine can be conducted in a medical facility or other setting established by public health authorities for that purpose (hotels, dormitories, etc.) or in the person's home (home quarantine). Quarantine is different from isolation, which is the separation of sick or infected people from others to prevent the spread of infection or contamination.

**Physical distancing:** maintaining at least 1 meter of physical distance from others to prevent exposure to the SARS-CoV-2 virus.

**COVID-19 cluster:** Group of symptomatic individuals linked by time, geographic location, and common exposures, with at least one case confirmed by nucleic acid amplification test (NAAT) such as the PCR test, or at least two epidemiologically linked symptomatic cases (meeting clinical criterion 1 or 2 for suspected cases) with a positive antigen (Ag-RDT) test result.

**Contact tracing:** The process of identifying, evaluating, and managing cases of exposure to a disease to prevent onward transmission. When systematically implemented, contact tracing will break the chain of transmission of an infectious disease and is thus an essential public health tool for controlling infectious disease outbreaks.

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<sup>4</sup> World Health Organization. WHO COVID-19 Case definition. Geneva: WHO; 2020. Available at: <https://apps.who.int/iris/handle/10665/33391>.

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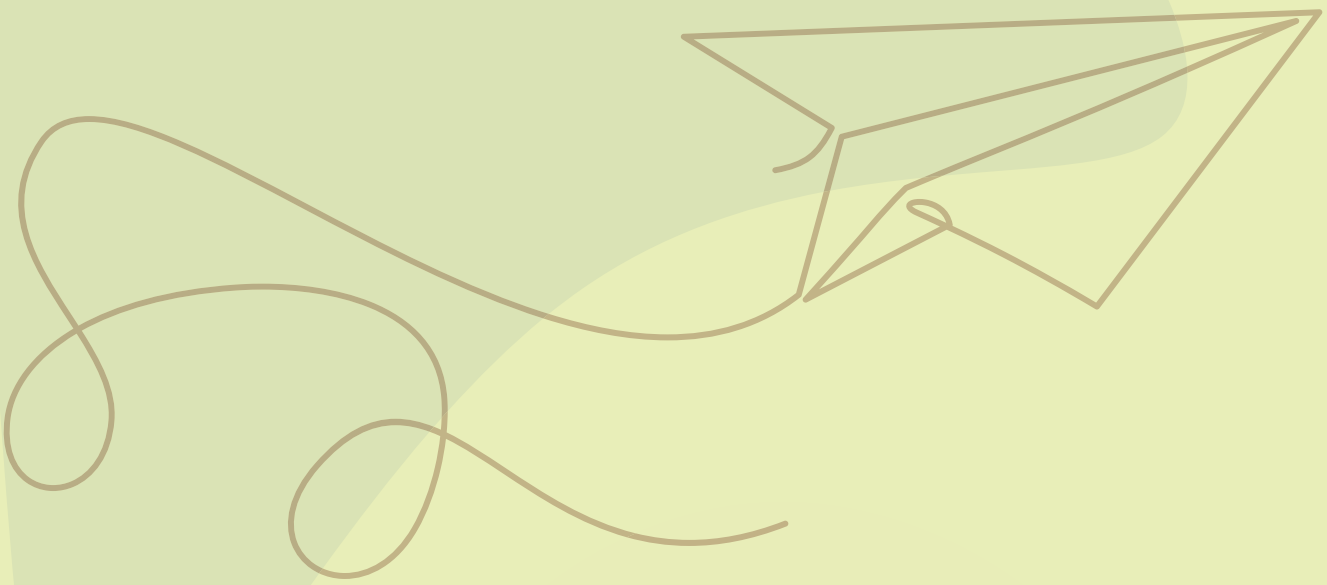
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# Annexes





## Annex 1. Posters

If you were in contact with someone who had **COVID-19** or tested positive, you have a lot to gain if you act fast.

If you're **positive** for COVID-19 or were around someone who got **sick**, **notify the people** you've been in contact with, and also **the health services**, in order to **monitor your symptoms** and get more information.



If you act fast:



You have the **satisfaction** of **helping to save lives**.  
You **get time** to take **care of yourself** and your **loved ones**.  
You **break the chain of infection**.

If we all collaborate, we can stop the spread of COVID-19.

You warn your contacts, and act in time to save lives.



At the bottom of the poster you can see contact information for each country's health services.

## Annex 1. Posters

### With contact tracing you have a lot to gain

Promptly informing the people you have been in contact with is the key to reducing infections and winning the race against COVID-19.



If you have symptoms or tested positive:

- 1 Make a list of the people you've had contact with.
- 2 Notify them of the situation.
- 3 Notify the health services and observe the isolation period.

If you receive a call, message, or visit from health services, give them the information that they request in order to stop the chain of COVID-19 infection.

4

At the bottom of the poster you can see contact information for each country's health services.



## Annex 2. Sample video script: “I communicate and I act”



**VOICEOVER:** If I detect a symptom or suspect infection, I stay at home and...



**TEXT GENERATOR:** cough, fever, headache, exhaustion, muscular pain



**Image of the person making a list and telephoning: VOICEOVER:** I inform health personnel and provide the list of people I have been in contact with, so they can follow up.



**VOICEOVER:** I act. I inform my contacts about the symptoms and proceed to isolate for 14 days with my family and people in my household.



**LOGO WITH VOICEOVER:** I inform, I act, and I proceed. Together we can stop the chain of transmission.

## Annex 3. Audio and video of “This is my story”

The script below can be used to make videos or audios for radio or television spots, or can be used for posts on messaging services such as WhatsApp.



Text:

**Voiceover of a young person:** Hi, I'm [name] and this is my story. When the symptoms started, I was afraid to say anything about it at home. The first thing was that I lost my sense of smell and taste, and food felt like cardboard to me. I was very afraid that I would be judged at home for having gotten together with my friends. So I didn't say anything. And even though I had a fever and felt bad, I hid it and waited for the days to pass.

The problem was when my grandmother, the person I loved most in the world, became infected. The virus took her, and I haven't stopped feeling guilty since. I would give anything to be able to change my story.



**Ending:** But you can change yours. Communicate and act. You can stop the chain of infection.

**Audio and video:** “This is my story”

**Text of an invitation to action by an influencer or person with recognition in the country:**



**Text:** If you had COVID-19, tell us how you notified your contacts. Your experience is important for everyone and can help others save lives. We invite you to tell us your story in a video or audio. There you can tell us your feelings and show how, working together, we can care for our health.

I report, I act, and I proceed. We can all stop the chain of COVID-19 infection.





**Ending:** You can tell a better story. Communicate and act. You can save a lot of lives and stop the chain of infection.



## Annex 4. Contact tracing: myths and realities

The purpose of this tool is to provide messages that counter misinformation. It can also be useful for producing social media content.s

<p style="text-align: center;"><b>Myth</b></p> 	<p style="text-align: center;"><b>Reality</b></p> 
<p>Isolation is the same as confinement and social punishment.</p>	<p>Isolation is an act of caring for the people around us.</p>
<p>Being isolated means not being able to do anything; it's like a punishment.</p>	<p>People can keep doing their normal activities, have contact with their family or loved ones via cell phone, and practice a hobby at home if symptoms permit.</p>
<p>Contact tracing creates a blacklist of people.</p>	<p>No. Contact tracing creates "circles of hope." In other words, it makes it possible to inform contacts in time about the possibility of infection, provide recommendations, and take the necessary health measures to halt the chain of COVID-19 infection.</p>
<p>The pandemic doesn't exist.</p>	<p>The pandemic does exist. COVID-19 is an infectious disease that can have deadly consequences for people with certain health conditions.</p>

## Annex 5. Script of the radio soap opera “Following the trail”

*Theme music: 30 seconds.*

*As the music becomes softer, the narrator’s voiceover begins.*

**NARRATOR:** Today we have one more episode of “Following the trail,” showing life situations during the pandemic where decisions save lives.

*Music up, with city sounds.*

**FIRST WOMAN’S VOICE:** Thanks for coming with me to buy the dress.

**SECOND WOMAN’S VOICE:** I’m so glad we can see each other again after such a long time.

**FIRST WOMAN’S VOICE:** Look! That’s our bus. Let’s take it.

**SECOND WOMAN’S VOICE:** It looks awfully crowded. Shouldn’t we wait for another?

**FIRST WOMAN’S VOICE:** No, let’s go. Or else we’ll have to wait a long time for the next one. That’s no good.

*Sound effects of the women getting on the bus make it clear that the bus is very crowded and getting through the standing passengers is difficult.*

**FIRST WOMAN’S VOICE:** Excuse me... excuse me...

**SECOND WOMAN’S VOICE:** It’s so uncomfortable! I didn’t think the bus would be so crowded.

**FIRST WOMAN’S VOICE:** You want potato chips? (Sound of wrapper and someone eating.)

**SECOND WOMAN’S VOICE:** No, I don’t like to eat that way. It’s not safe.

**FIRST WOMAN’S VOICE:** Nothing will happen. Besides, I didn’t have breakfast and I’m hungry!

*Music accompanies voiceover:*

**VOICEOVER:** Two weeks later.

*Telephone rings.*

**SECOND WOMAN’S VOICE:** Hi! How did you do with the dress? How was the wedding?



**FIRST WOMAN'S VOICE:** Well, I got infected and I'm at home. The wedding was divine! The problem is that several of us got infected.

**SECOND WOMAN'S VOICE:** Noooo! How so? And how are you?

**FIRST WOMAN'S VOICE:** Well, I only got a headache and cough, so I went on with my things and my usual work. As you know, I have to go to different places to sell my products. The problem is that my grandmother is very sick, and my son has also been hit hard.

**SECOND WOMAN'S VOICE:** But how did you find out you were infected? And when?

**FIRST WOMAN'S VOICE:** Well, the week after I saw you, I got a sore throat. Then Grandma got sick. So we got tested, and it came out positive for both of us. I didn't say anything, because I didn't feel that sick.

**SECOND WOMAN'S VOICE:** Oh, I had a sore throat too. I'd better stay alone in the house, so I don't infect anyone. And now that I know it might have started when we were together, I'm going to start calling the people I've had contact with, and take care of the people in my house. My husband has high blood pressure.

**FIRST WOMAN'S VOICE:** Really? What's the point? Does it really serve a purpose?

**SECOND WOMAN'S VOICE:** Well, of course! It's important to stop the chain of infection. I would rather take preventive steps to avoid infecting someone else.

*Music accompanies voiceover:*

**VOICEOVER:** Two weeks later."

*Telephone rings. Sounds of people in the background.*

**FIRST WOMAN'S VOICE:** Hello. Thank you so much for the flowers!

**SECOND WOMAN'S VOICE:** My deepest condolences. I'm so sorry about your grandmother passing! How has your son been?

**FIRST WOMAN'S VOICE:** He's out of intensive care now, but it was a tremendous scare for all of us. And he missed a lot of classes. I think he's lost a semester in college.

**SECOND WOMAN'S VOICE:** Well, a person can recoup one semester. But not life. We have to take care of ourselves.

**FIRST WOMAN'S VOICE:** We do. You can't imagine how bad I feel about all of this. How I wish I could go back in time and do things differently... And you, how are all of you?



**SECOND WOMAN'S VOICE:** Well, my husband and I tested positive, but because we detected it in time and informed the health service, we isolated, started treatment right away, and followed the quarantine protocol, and now we're fine. We didn't have to go to the hospital, and we let our contacts know about the infection. Fortunately, no one else was infected. So we made it through.

**FIRST WOMAN'S VOICE:** I'm so glad! I should have listened to you. But there's not much to do about it now.

**SECOND WOMAN'S VOICE:** On the contrary, there is a lot to do. Tell others about your experience so they don't go through the same thing. You have to isolate and notify your contacts. Seriously, it saves lives.

*Music accompanies voice:*

**NARRATOR:** Following the trail can save the lives of your close contacts and others who may be at risk. In the pandemic, acting in time saves lives. Communicate and act. The lives of many people may be at risk, and you can stop the chain of infection. Watch for the next episode of "Following the trail, life-saving stories."

*Music.*

## Annex 6. How to use social media to make information more credible

Recommendation	Tips
<p>Create communication pieces adapted to the different platforms.</p>	<ul style="list-style-type: none"> <li>• On Facebook, images, infographics, surveys, stories, and videos work well.</li> <li>• On Instagram, images, testimonials, and short videos work.</li> <li>• On TikTok, the best options are videos and challenges.</li> <li>• For Twitter, the best thing is news items, opinions, analysis by opinion leaders, comments by citizens, and figures.</li> </ul>
<p>Use emotions that are relatable.</p>	<ul style="list-style-type: none"> <li>• Expressing emotion is typical on social media platforms. That is why people often use them to complain or denounce a situation.</li> <li>• Humor is one of the best types of positive language to use on social media.</li> <li>• Fear and indignation generate great mobilization, but they can be a double-edged sword, and great care must be taken when creating stories that evoke them.</li> </ul>
<p>Use relationship marketing.</p>	<ul style="list-style-type: none"> <li>• Include campaigns with influencers or people well known in a specific community.</li> <li>• Share content in carefully categorized groups.</li> <li>• Tag like-minded organizations and people.</li> <li>• Create a calendar of special dates on which you can generate posts and create affinity.</li> <li>• Participate in trending conversations.</li> <li>• Follow like-minded groups and people.</li> </ul>



Take advantage of the potential of hashtags (#).	<ul style="list-style-type: none"><li>• Always use hashtags.</li><li>• Always write them into the text (not the image) so that they can be identified. Do not use more than four hashtags per post, so as to avoid saturating the algorithm. (On Twitter, it is best to use only one: the main campaign hashtag).</li><li>• In hashtags, it is best to avoid special characters (such as "%", "&amp;" "\$" or "/").</li></ul>
Invite co-creation.	<ul style="list-style-type: none"><li>• Include a question at the end of the post.</li><li>• Invite the audience to share their opinions.</li><li>• Create contests or challenges.</li><li>• Ask for the audience's opinion in a social media survey.</li></ul>





# Annex 7. Sources of information

## General information

### **WHO Global Public Health Campaign #HealthyAtHome**

General recommendations on maintaining good health during the period of confinement.

[https://www.who.int/en/campaigns/connecting-the-world-to-combat-coronavirus/healthyathome?gclid=CjwKCAjwlrqHBhByEiwAnLmYUK4u4rjgshzu7jjWQIJmvX8FR-kG65o0HyRjeldq2zv\\_jETUC3xb2ZhoCuhkQAvD\\_BwE](https://www.who.int/en/campaigns/connecting-the-world-to-combat-coronavirus/healthyathome?gclid=CjwKCAjwlrqHBhByEiwAnLmYUK4u4rjgshzu7jjWQIJmvX8FR-kG65o0HyRjeldq2zv_jETUC3xb2ZhoCuhkQAvD_BwE).

### **Contact tracing knowledge hub**

Updated information for different audiences, with videos and other materials for social media and training use.

<https://www.paho.org/en/contact-tracing-knowledge-hub>.

### **Coronavirus disease (COVID-19)**

Collection of PAHO technical documents for reporting on COVID-19.

<https://www.paho.org/en/technical-documents-coronavirus-disease-covid-19>.

### **Introduction to COVID-19: methods for detection, prevention, response, and control**

General introductory course on COVID-19 and emerging respiratory viruses.

<https://openwho.org/courses/introduction-to-ncov>.

### **Questions and answers on coronavirus disease (COVID-19)**

Compendium of questions and answers with basic information about COVID-19.

[https://www.who.int/es/emergencies/diseases/novel-coronavirus-2019/advice-for-public/q-a-coronaviruses?gclid=CjwKCAjw3MSHBhB3EiwAxcaEu-1ErIXCKbep4wh8ma-FyZ7Ldfp2Xsfn6lTxr0pbdFkCfc1WRmRtyQBoCiuAQAvD\\_BwE](https://www.who.int/es/emergencies/diseases/novel-coronavirus-2019/advice-for-public/q-a-coronaviruses?gclid=CjwKCAjw3MSHBhB3EiwAxcaEu-1ErIXCKbep4wh8ma-FyZ7Ldfp2Xsfn6lTxr0pbdFkCfc1WRmRtyQBoCiuAQAvD_BwE).

## Communication guides and orientation for contact tracing

### **Communicating risk in public health emergencies: A WHO guideline for emergency risk communication (ERC) policy and practice**

Evidence-based guidelines for implementing risk communication in emergency situations.

<https://www.who.int/publications/i/item/9789241550208>.

### **Community-targeted messaging for COVID-19 contact tracing: a manual**

Guide to creating a communication campaign that engages refugee and immigrant communities in COVID-19 contact tracing. [TN: I can't find either the manual itself or the actual English title. The link below is the original link to the Spanish version.]

<https://docs.google.com/presentation/d/1hoWjihd9ddHXJM6rbDOtflXekvjdCQ0B-8MXoj-mdn4M/edit#slide=id.p9>.

**Risk communication and community engagement (RCCE)**

Support for developing or updating risk communication and community participation plans.

<https://www.paho.org/en/documents/covid-19-risk-communication-and-community-engagement-rcce>.

**COVID-19: An Informative Guide. Advice for Journalists**

Tools for journalists to do responsible reporting on the pandemic and provide evidence-based information.

<https://iris.paho.org/handle/10665.2/52392>

**COVID-19: Guidelines for communicating about coronavirus disease 2019 – A guide for leaders**

Basics of reporting more clearly, directly, and transparently on the 2019 coronavirus disease (COVID-19).

<https://www.paho.org/en/documents/covid-19-guidelines-communicating-about-coronavirus-disease-2019-guide-leaders>.

**Guide for the preparation of a risk communication strategy for COVID-19 vaccines: A resource for the countries of the Americas**

A guide for developing a strategy that adequately provides the population with thorough information about the immunization process.

<https://www.paho.org/en/documents/guide-preparation-risk-communication-strategy-covid-19-vaccines-resource-countries>.

**COVID-19 Contact Tracing Communication Toolkit for Health Departments**

A communication toolkit focused on contact tracing.

<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing-comms.html>.

## Materials for disseminating information on contact tracing

**Animations for social media: Contact tracing.**

Animation series with key messages about contact tracing. [TN: I can't find an English version of this]

<https://who.canto.global/s/SBO24?viewIndex=0&from=curatedView&display=curatedView&from=fitView&display=curatedView>

**COVID-19: Communication Materials.**

Materials for informing the population about the risks, and about the measures they need to adopt in connection with COVID-19.

<https://www.paho.org/en/covid-19-communication-materials>.

**Physical distancing is not social isolation.**

A video that invites viewers to keep in touch with friends and loved ones through virtual media

[https://www.youtube.com/watch?v=OrwJerly\\_4Q](https://www.youtube.com/watch?v=OrwJerly_4Q).

**Myths and realities concerning COVID-19**

Animations and postcards for social media

<https://who.canto.global/s/P169Q?viewIndex=0&from=fitView&display=curatedView>.

**Postcards for social media: addressing social stigma**

Postcard series with key messages on how to respond to and prevent social stigma  
<https://www.paho.org/es/postales-para-redes-sociales-abordar-estigma-social>.

**Postcards for social networks: Quarantine**

Quarantine-related series of social media postcards aimed at people who have been exposed to COVID-19 [in Spanish].

<https://who.canto.global/s/INSLI?viewIndex=0&from=curatedView&display=curatedView>.

**Social media postcards: Be ready to fight COVID-19.**

Postcards with messages about five key steps for combating the coronavirus.

<https://www.paho.org/en/topics/coronavirus-infections/coronavirus-disease-covid-19/social-media-postcards-be-ready-fight>.



**Risk Communication**  
and Community Engagement for  
**Contact Tracing** in the Context of  
**COVID-19** in the **Region of the Americas**