

1. Planning the Ground Level Intervention:

- a. Any ground level work with rural under-privileged communities has to be coordinated with ASHA workers. They are doing an incredible job in compiling data, reaching out house-to-house, etc. The first stop of any organization should be to coordinate with the respective ASHA representative of that panchayat/community. However, they are constrained by lack of collaterals - masks, sanitizers, education collaterals including pamphlets, videos, etc.
- b. Engage the PDO - the PDO has a list of panchayat members and the respective major functionary by village. Get that list, work with the Asha worker to get introduced to them. Without that introduction - it is very difficult to get them to engage. Talk to them about what we want to do. Get them to organise and mobilise people to attend sessions that are being planned. In our experience over the last 3 days - in the majority of the cases, the PDO and related functionaries have been very helpful and welcoming.
- c. Download videos and collaterals. Print out the pamphlets in A4 black & white; Be ready with giveaways - like surgical masks and pamphlets with critical information. Use the DIPR material - it is great. It is great to have a TV monitor along with you – and show the videos on them.

2. Engaging ASHA, Anganwadi and Panchayat TF members: Any initiative by a grassroots non-profit organization aimed at education/awareness and vaccination related information should first start with ASHA workers, Anganwadi teachers and the panchayat task force members. First session should be with Asha, anganwadi and panchayat staff. The primary aim of this session should be to get information from them, engage them in the discussion on how best to plan an activity on the ground, and to finally equip them with masks, sanitizers and education collaterals - to be used while doing their rounds.

3. Education & Awareness Sessions with Communities & Villages:

- a. This is highly, highly critical. The level of misinformation is incredible and scary. People are flat out refusing to come to get vaccinated - especially in the interior areas.
- b. The first priority is to engage them in a discussion on the virus and its impact. Show them the videos and explain the collaterals; the ability to read is minimal and so no point in distributing the pamphlets; good videos in kannada and hindi are really important;
- c. When asking them to come for the sessions - get the village representative or some influential member to get them to come for the session; avoid positioning this as an education and awareness which will be followed by vaccination. They may not come. Just tell them that you want to talk to them about the virus and its impact;
- d. When they come - talk to them, let them digest the info; gauge the mood and then decide whether you want to push for the conv on vaccination or not; else, you might end up alienating them. Misinformation has reached legendary proportions in some localities. Test the resistance. This is esp true for interior tribal areas who haven't taken any kind of vaccination in the past and are especially wary.
- e. As an aside: Asha workers are concerned because when people develop a fever, they knock on the doors of the Asha workers at night and blame them; So they are also very wary.
- f. Plan these session in the evenings after 5pm. Or before 7am.
- g. From a scale point of view: It is highly critical that there is a massive drive to positively encourage, nudge and reduce the level of misinformation. This can only be done by the State.

4. Other Concerns:

- a. People are concerned about getting proof of vaccination. Employers are asking for this. There is also fear of being questioned by police later on. They want the proof. How can we make it easy to get the proof. For these communities online may just not work; So anyone conducting the session has to be ready with a printer as well -- to log in, print the confirmation and hand it over.
- b. There are communities and people where there is no identity proof of any kind; in some cases they are cross border migrants; What happens in case of lack of proof of identity?