

# Polio SBC strategies for security compromised areas in Zamfara, Nigeria

Summary of the brainstorming session with LGAs and Clusters facilitators

## 1. Community engagement through trusted Influencers

**Objective:** Build trust and credibility in health messaging by leveraging respected and familiar figures within the community.

**Key Interventions:**

- **Trusted Health Workers:** Utilize local health personnel who are already known and respected to deliver polio messages and vaccines, increasing acceptance.
- **Fulani leaders under Traditional Council:** Engage nomadic community leaders to reach mobile populations and reduce resistance.
- **Local barbers:** Barbers often serve as informal community hubs; their involvement helps spread messages organically.
- **Traditional Birth Attendants (TBAs):** TBAs are influential among women and families during childbirth, making them ideal for promoting maternal and child health interventions, including polio vaccination.

**Impact:** Enhances message credibility and trust, reduces misinformation, and increases vaccine uptake and confidence through familiar and respected voices.

## 2. Grassroots mobilization and Peer advocacy

**Objective:** Leverage peer networks and community-based structures to amplify awareness and drive behavior change.

**Key Interventions:**

- **Mechanics, Motorcycle Riders, and Traders:** These groups interact with large segments of the population daily (living in security compromised areas) and can serve as informal advocates for vaccination. *(Strategy to be explored further and assessed to support meaningful promotion of vaccine uptake)*

- **Ward Development Committees (WDCs):** Reactivating these local governance structures helps coordinate mobilization efforts and resolve non-compliance through community dialogue, engaging gatekeepers. *(Community platform to be explored further, leverage and scaled up in security compromised areas)*
- **Volunteer Community Mobilizers (VCMs):** Recruiting more females (and males) VCMs to ensure gender-sensitive outreach and maintain access in insecure areas. *(Strategy to be assessed, contextualized, and scaled up by increasing the number of VCMs.)*

**Impact:** Expands reach, improves access, fosters peer-to-peer influence, and strengthens community ownership of health initiatives.

### 3. Risk assessment and Security-sensitive Planning

**Objective:** Ensure the safety and continuity of SBC interventions in conflict-affected areas.

**Key Interventions:**

- **Security Risk Assessment:** Regularly assess the security situation to determine where and how SBC activities can be carried out safely without undermining the credibility and perception of the polio program by communities. *(To be prioritized and localized)*
- **Mitigation measures:** Develop contingency plans, such as using local actors, gatekeepers instead of external staff, adjusting timing of activities, etc.

**Impact:** Protects frontline workers and builds resilience into program planning.

### 4. Inclusive and culturally sensitive outreach

**Objective:** Design and implement SBC strategies that reflect the cultural, gender, and social dynamics of the community.

**Key Interventions:**

- **Culturally relevant messaging:** Tailor messages to local languages, customs, and beliefs to enhance resonance and reduce resistance.
- **Gender-Sensitive Recruitment:** Involving both male and female mobilizers to ensure that all community members are reached effectively, especially in gender-segregated settings.
- **Engagement of diverse community actors:** Including TBAs, barbers, and Fulani leaders to ensure that outreach is inclusive and contextually appropriate.

**Impact:** Increases message acceptance, reduces cultural barriers, and promotes equitable access to health services.