



ACTION TOOLKIT

How to Build and Mobilise a Local Coalition

Insights from the National Business Compact on Coronavirus, Kenya

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by **Brands on a Mission**

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Foreword

Act locally. Join forces globally.



AS THE COVID-19 CRISIS HAS HIT COUNTRIES AROUND THE WORLD, NATIONAL BUSINESS-LED COLLABORATIVE PLATFORMS HAVE BEEN INSTRUMENTAL IN MOBILISING EMERGENCY ASSISTANCE, RELIABLE INFORMATION, RESOURCES, COORDINATION, AND PUBLIC ADVOCACY TO SUPPORT CITIZENS AND GOVERNMENTS IN THE FIGHT AGAINST THE PANDEMIC.

We are seeing three main types of national-level collaboration. First, **new coalitions are being created** that bring together government, companies, civil society, and international organisations. The National Business Compact on Coronavirus in Kenya, profiled in this toolkit, is one exciting example. There are similar coalitions dedicated to tackling Covid-19 underway in Zambia and Nigeria.

Second, **existing platforms focused on global development challenges** are prioritising action on COVID-19. Organisations such as the World Economic Forum, the World Business Council for Sustainable Development, the United States Council for International Business, and Business Call to Action, for example, have been able to mobilise their members to support national initiatives and create dedicated online platforms with specialist content on how to mitigate the health and economic impacts of COVID-19.

And third, **existing traditional business associations are creating COVID-19 Response hubs**, taking advantage of their widespread membership and local knowledge to collaborate with national responses. For example, Business Unity South Africa, a federation of business organisations, launched the Business for South Africa initiative amid the government's preparations against the pandemic.

All three types of national, business-led collaboration platform are playing an essential role in the fight against COVID-19. Collaborations between businesses, citizens, and governments have raised millions of dollars in financial and in-kind donations, helped to spread information on sanitary measures, built public health facilities, and called for action not only against the emergency but also in favour of a better future.

In this Action Toolkit, which is a part of [wider set of tools and resources](#) funded with UK aid from the UK government*, we deep-dive into the **National Business Compact on Coronavirus in Kenya** and some of its initial good practices and lessons learned. This new Kenyan platform has mobilised key hygiene brands and communications platforms to work with the Kenyan Ministry of Health, the UN, Amref and other partners to distribute hygiene products, build handwashing facilities, and spread reliable and accurate public health information. It is also raising funds from citizens and businesses to make essential products available to the most in need.

We hope that you will find this Action Toolkit useful, whether you are looking to support, engage in, or strengthen a collaborative national level platform.

Zahid Torres-Rahman, CEO, Business Fights Poverty

Jane Nelson, Director, Corporate Responsibility Initiative, Harvard Kennedy School



We believe brands and business can and should create societal value, addressing issues affecting people and the planet.



TOOLKIT GOAL

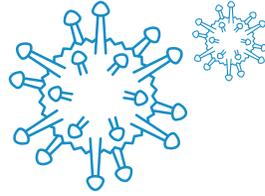
To support countries in catalysing local COVID-19 prevention response action by the private sector, UN Family and NGOs, under the leadership of the national government.

This toolkit forms part of a pan-African multi-stakeholder platform established to accelerate local action and share global best practice to counter the COVID-19 pandemic

The toolkit is informed by the experiences and learnings from the Kenya National Business Compact on Coronavirus (NBCC), which was officially launched in Nairobi on 16 March 2020. The toolkit provides “plug and play” solutions that make it easier to start on the journey of accelerating local action based on global best practice sharing.

Toolkit Structure

Act locally. Join our forces globally.



PART 1

PRINCIPLES

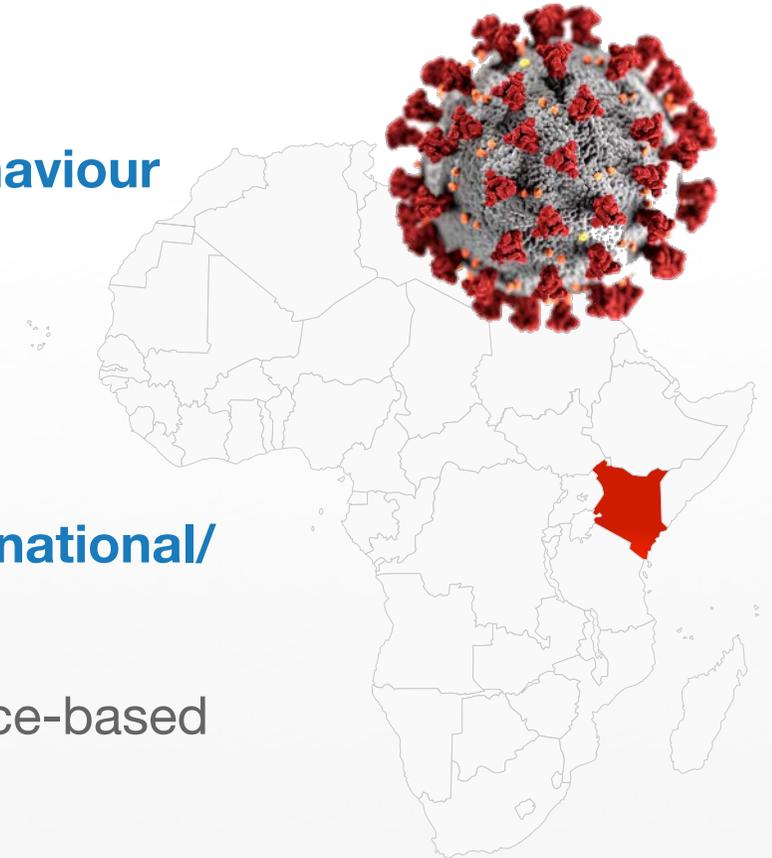




Main principles and values:

- Commitment to delivering **short term impact** and **long-term behaviour change** to prevent disease spread
- Focus on **specific goals** and targets
- Adherence to **sustainable market-based solutions**
- Alignment with **national priorities** and coordination with existing **national/local initiatives and resources**
- Transparency and contribution to the global effort through evidence-based **best practice sharing**
- **Collaborative and inclusive** approach

Stay at home



PART 2

**‘HOW TO’
Delivery Model**





1. COALITION

Form the coalition, with clear goals and priorities, allocation of roles and analysis of key stakeholders and the landscape that it is operating in



2. COMMUNICATION

Develop unified communication platform based on reliable data and evidence



3. ACCESS

Provide access to affordable hygiene products and reliable handwashing facilities (supply & distribution)



4. FINANCING

Raise funds and mobilise flexible resources, including both financial and in-kind donations



1. COALITION

A. Form the Coalition

A multi-sector coalition needs to be formed, that is small and agile, with champions from government, the private sector and civil society.



A successful coalition will include:

- **Government leadership** (with Ministry of Health and/or Presidential/Prime Ministerial support)
- **Key hygiene brands/companies**
- **Communication companies**
- **Distribution partners**
- **UN family agencies**
- **Non-governmental and community based organisations**



1. COALITION

A. Form the Coalition

| POTENTIAL KEY PARTNERS | CAPABILITIES | INCENTIVES |
|------------------------|---|--|
| SOAP MANUFACTURERS | Soap products and supply chain; knowledge of customer preferences, behaviours and barriers to product adoption/use | Increased sales, category growth; increased customer loyalty; deeper customer insights; image of a public health responsible brand |
| DISTRIBUTORS/RETAILERS | Access and knowledge of customers; distribution networks | Increased revenue/order size; more resilient operations; increased customer loyalty; image of a caring and responsible company |
| TELECOMS | Digital network to drive behaviour change; enables national business compact vouchers to get to population to ensure access to essential goods. | Increased revenue; image of caring and responsible company |
| COMMUNICATION AGENCIES | Identification of appropriate audiences and how to reach them with messaging; communications development; communication channel planning | Deeper consumer insights, image of a caring and responsible company |
| NGOs/PUBLIC SECTOR | Existing networks; programmes; reach | Public health objectives; improved community based delivery |



1. COALITION

NBCC Kenya Approach

Mission

Limit the spread of infections by improving hygiene practices and contribute to protecting lives and livelihoods across Kenya and Africa

Three focus areas

1. Communication



Driving public awareness and long-term behaviour change through a consistent communication approach across Kenya

2. Access



Provide the public (including hard-to-reach low income populations) with access to hygiene products and handwashing facilities through a platform of suppliers and retailers

3. Financing



Support government's rapid response measures through set up and management of a Flexi Fund



1. COALITION

C. Allocate clear roles and responsibilities

Roles within coalition must be clearly defined

DO:



Appoint an agile Central Secretariat for coalition

Provides overall coordination and progress monitoring



Lay out main roles

To include: fundraising, partner recruitment and coordination; designing and launching behaviour change campaigns; monitoring



Anchor partners that can catalyse, provide scale, speed and credibility

Quickly activating their local networks, scaling across countries. For example: global hygiene brands (such as Unilever, P&G, RB) and global networks of leaders (such as WEF Global Shapers Program and Harvard Kennedy School Fellows)

DON'T:



Leave out Ministry of Health

Essential to understand clear roles and who counterpart will be at the Ministry of Health



1. COALITION

C. Allocate clear roles and responsibilities

Team roles and Governance

Team

Expected role

Governance mechanism

Country Team

- Design and fully own all in-country interventions
- Set up and coordinate the country coalition
- Monitor progress and report to the Central Secretariat

Central Secretariat

- Provide overall guidance and support country teams through problem solving, sharing best practices, fundraising etc.
- Develop common and consistent communication messages and tools

- Regular check-ins and progress reviews (by workstream/vertical and cross-team)
- Country workstream heads reporting to the Central Secretariat
- Find a core organization that can receive the funds (i.e. Amref) with an oversight committee



1. COALITION

D. Understand key stakeholders and landscape

DO:



Map existing efforts and channels

For example, Global Handwashing Partnership, WASH and government programmes/ activities
Evaluate which could serve as key potential entry points and understand where gaps are.
Leverage existing tools, materials, data and lessons learned from previous efforts



Anchor partners that can catalyse, provide scale, speed and credibility

Any rules and restrictions, and to ensure alignment

DON'T:



Ignore lessons learned from previous public health campaigns

Groups such as the [Global Handwashing Partnership](#) share learnings from previous campaigns



Conflict with government messaging or policies

Always align with the clear regulations from the Government (eg the Ministry of Health in Kenya messages state 20 seconds of handwashing and keeping distance of 1.5 metres]



1. COALITION

NBCC Kenya Approach

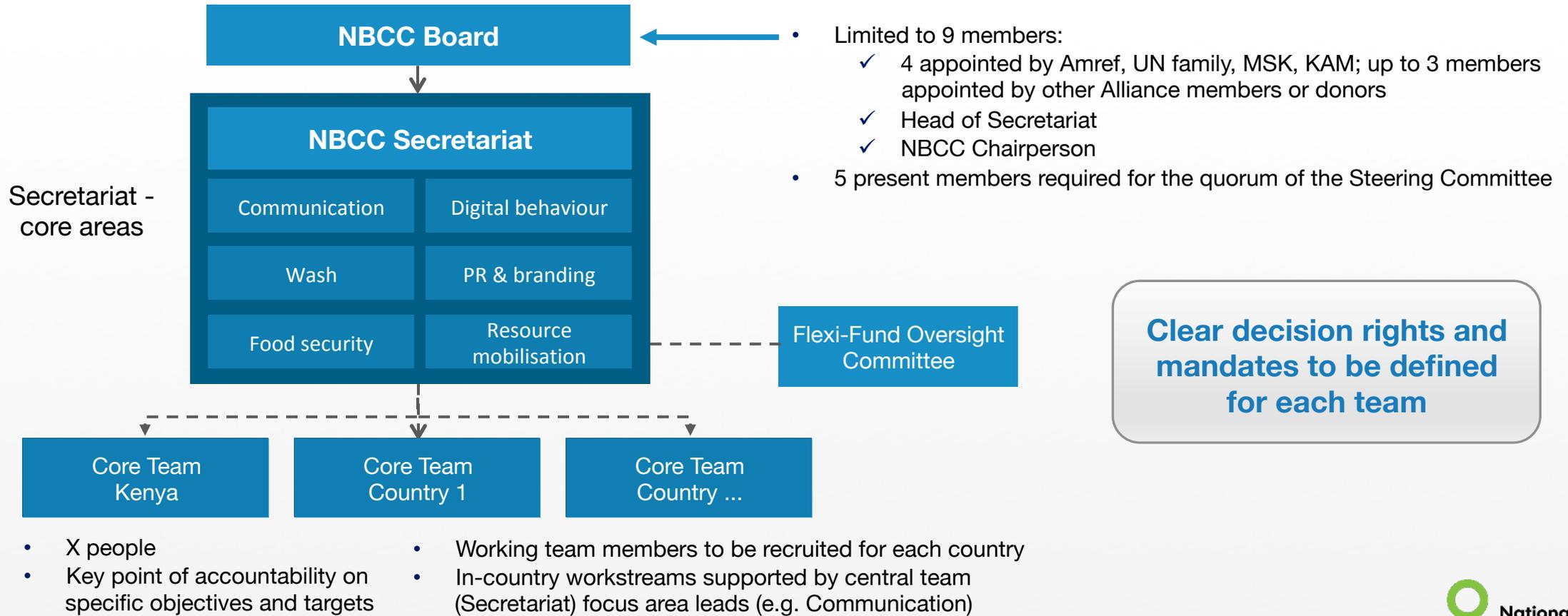
Kenya's National Business Compact on Coronavirus (NBCC) is a gathering of companies aimed at accelerating local action and supporting governmental efforts against the pandemic, with champions from both the private sector and civil society.

The NBCC got successfully off the ground with the help of the UN SDG Partnership Platform. This UN-built platform, developed under leadership of the Kenyan government, has brought together a variety of private and civil society players in previous initiatives to co-create and rapidly deploy with government large-scale, shared-value solutions to address the challenges that societies and planet are facing.



1. COALITION

NBCC Kenya Governance Structure





1. COALITION

NBCC Kenya Board

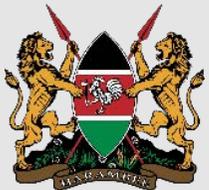
Board Membership:

| | | |
|--|---|---|
|  | Amref Health Africa | Implementation and leading the flexi-fund |
|  | Marketing Society of Kenya (MSK) | Leading communications across the region |
|  | UN Family | Represented by the UNSDG partnership platform |
|  | Kenya Association of Manufacturers | Soap manufacturers |
| | Head of Secretariat | Maggie Rarieya |
| | Chair of the Board | Myriam Sidibe |

PART 2 'HOW TO' DELIVERY MODEL

NBCC Kenya

Under the leadership of **Kenyan Government** and endorsed by the **UN family**



Soap Manufacturers & Hygiene Companies



Communication Organisations



Retail Companies & Community Organisations



Business Networks & NGOs



Digital Experts



Funders





2. COMMUNICATION

Focus: Apply evidence-based behavioural principles and reliable data to guide the development of communication strategies*



- 1. Do it for others** - hygiene protects others, nurture, affiliation, justice
- 2. Act together** - focus on how everyone is doing it (not on those who aren't complying)
- 3. Facilitate trust** - trust means transparency
- 4. Make it possible** - performance
- 5. Get attention** - surprise (through engaging, unusual and changing messages)
- 6. Emphasise reward** - a better future will result

*Source: Curtis, V (2020) - Strategic thinking in a pandemic:
A Blueprint for Government-led National Hygiene Communication Campaigns to combat COVID-19



2. COMMUNICATION

A. Develop unified communication platform

DO:



Identify the desired behaviours that the coalition aims to change

Carefully consider the local context and what is feasible



Develop key simple messages for behaviour change

Align with WHO/government messaging



Prioritise regions/channels for intervention

Based on maximum impact and ease of implementation.

Focus first on: media channels that reach large audiences, densely populated urban areas, schools



Develop full portfolio of interventions and prioritise them

Identify & launch quick wins first, exploring innovative digital channels & campaigns that have large impact

DON'T:



Segment audiences

Need to reach mass audience/total population



Have different messages in different channels

Important to have singular, simple messaging, otherwise loses impact and potentially confuses audiences



2. COMMUNICATION

B. Campaign elements

Consider the following elements for the campaign:

- **INFORMATION HELPLINE**

Create/promote a helpline for information about COVID-19

- **COMMUNITY-BASED INFLUENCERS and ORGANISATIONS**

Mobilise community leaders, religious/social organisations, associations, schools;
Provide tools/materials and empower them to act.

- **EXISTING NETWORKS**

Leverage using digital tools to reach influencers/ change agents
(e.g. LEAP in Kenya to reach health workers)

- **INCENTIVES**

Reward/motivate community influencers/ change agents with incentives such as t-shirts, badges, 'best promoter' awards, meeting celebrities etc.
Use digital vouchers to motivate discounted purchase of soap and other hygiene products.



2. COMMUNICATION

NBCC Kenya Approach

COVID-19 presents a major threat to the lives and health of people in Kenya, and to their livelihoods and the country's economy. While most developed countries have deployed social distancing and quarantine measures, these are challenges in a low-income context due to dense living conditions, the need to continue working, lack of social safety nets etc.

Good hand hygiene is an inexpensive way to limit the spread of COVID-19 as well as most other infections. However, approximately 38 million Kenyans¹ lack access to basic hand hygiene facilities at home, while 48% do not routinely wash their hands²

¹ WHO data, 2017

² University of Birmingham study, 2020



2. COMMUNICATION

NBCC Kenya Approach

Using a unified 360 communication approach:

- **Brief and assets developed** to drive awareness and education on COVID-19 to the public
- **TV, Radio, Billboards, Print & Posters** approved by MoH, MoICT & the National Emergency Response Committee
- First stage of communications to be aired was **public advertising campaign from trusted influencers.**



TV:
first phase reached
over 45% of all
Kenyan households



Puppetry

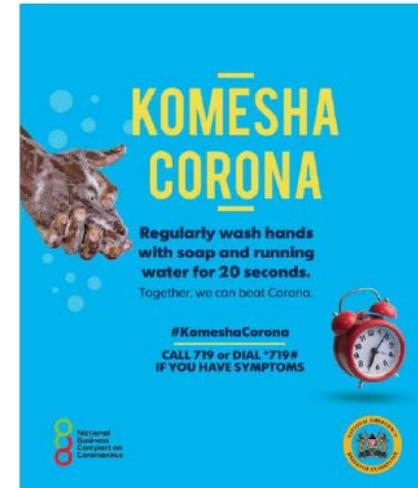
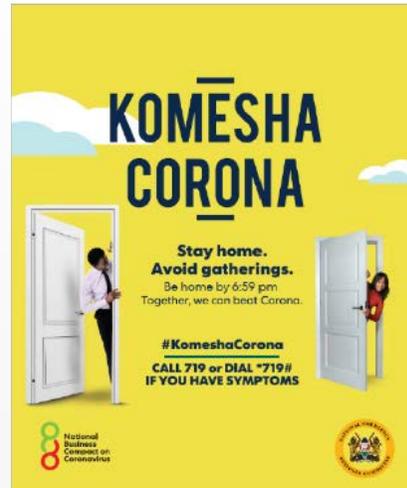


2. COMMUNICATION

NBCC Kenya Approach

Outdoor Communication

- First phase has reached **10 million people**, with **billboards across cities**





3. ACCESS

Facilities, supply and distribution

Focus: to provide the whole population with access to hygiene products and handwashing facilities through a platform of suppliers and retailers

DO:



Identify priority locations

For example, places where people gather, consume food, building entrances. Work with e-distribution companies and NGO partners to ensure that the 'last-mile user' is reached with soap, water and handwashing facilities in government designated hotspots around the country



Develop availability checklists in priority locations

Including: handwashing stations (with soap and water); handwashing/ COVID-19 prevention messaging via posters/other media; other preventative measures (eg capacity to social distance, and related messaging); maintenance (including replenishment of soap at handwashing station)



Look for opportunities to increase resilience of supply chain

For example, by localising procurement



3. ACCESS

Facilities, supply and distribution

Focus: to provide the whole population with access to hygiene products and handwashing facilities through a platform of suppliers and retailers

DO:



Identify existing production and supply chains of hygiene brands

PRODUCTS: soap, sanitisers, masks provided as essential products through manufacturers' and retailers' (bricks & mortar and e-commerce) distribution channels.
RETAIL/POINT OF SALE: programmes and materials provided (with incentives) to ensure campaign materials displayed and visible product placement.

DON'T:



Exclude hard-to-reach, low income populations

Ensure companies that supply products that are affordable and accessible to low-income communities are part of coalition, and use to drive behaviour change communication to this audience.



3. ACCESS

Facilities, supply and distribution

Delivery model needs to be customised to local context in each country

Example country context

- Low mobile penetration and digital adoption
- State of the soap industry (e.g. most soap imported)
- Poor hygiene facility infrastructure and limited access to water
- Low income level making hygiene products unaffordable
- Degree of lockdown policies in place (e.g. full shutdown including retail, inter- and intra-regional travel restrictions, school closures)

Potential changes to the approach

- Optimize the channel mix – e.g. focus on TV/radio
- Focus on local community leaders/organisations
- Assess opportunities for local production and branding through the coalition
- Prioritise sanitiser as the main hygiene product
- Explore partnerships with existing water and sanitation efforts
- Introduce/promote smaller package sizes
- Launch basic products made of more affordable raw materials
- Innovate around distribution channels (e.g. pharmacies, essential service providers as points of sale)

All interventions should reflect core NBCC principles and values



3. ACCESS

NBCC Kenya Approach

Leveraging existing supply chain in Kenya

Providing the public (including high to reach low income populations) with access to hygiene products and handwashing facilities through a platform of suppliers and retailers





4. FINANCING

Fundraising and resource mobilisation

DO:



Drive both central/national and local fundraising efforts

Examples include:

[COVID-19 Solidarity Response Fund \(WHO – Global\)](#)

[COVID19 Business Response Kenya](#)

[South Africa Solidarity Fund](#)



Set smart targets

We set targets on handwashing hotspots needed and communication for 3 months (rolling needs)



Focus on key donor categories

Soap manufacturers

Retail companies

International donors

High net worth individuals in country/region

DON'T:



Conflict with national fundraising campaigns

Focus on specific donors (not public), with clearly stated purpose for funds (going beyond national campaign)



4. FINANCING

NBCC Kenya Approach

Established Flexi Fund for Rapid Response

To provide means of:

- **funding Ministry of Health emergency requests** for hygiene essentials in vulnerable communities
- **equipping the government** quarantine facilities
- **supporting doctors** by providing hotline services.

Support to date has included provision of buckets, bedsheets and blankets, aiding the proper disposal of medical waste and providing food and transportation for medical frontline workers



Nationwide appeal and global crowdfunding





PART 3

**MEASURING
IMPACT**





DO:

**Identify main output indicators (short term)**

Use existing sources and proxies. Could include:

- number of advertisements and views
- number of retail points/population reached
- number organisations active in coalition

**Identify main impact indicators (longer term)**

For example: disease prevalence

**Create channels for feedback**

From people/organisations and implementation partners

**Continuously review metrics**

Based on their effectiveness, and adjust both activities and metrics as needed

DON'T:

**Create new data/data collection and monitoring**

Existing sources of data should be utilised, for ease, speed and to minimise cost of collection/collation



Output and Impact Indicators

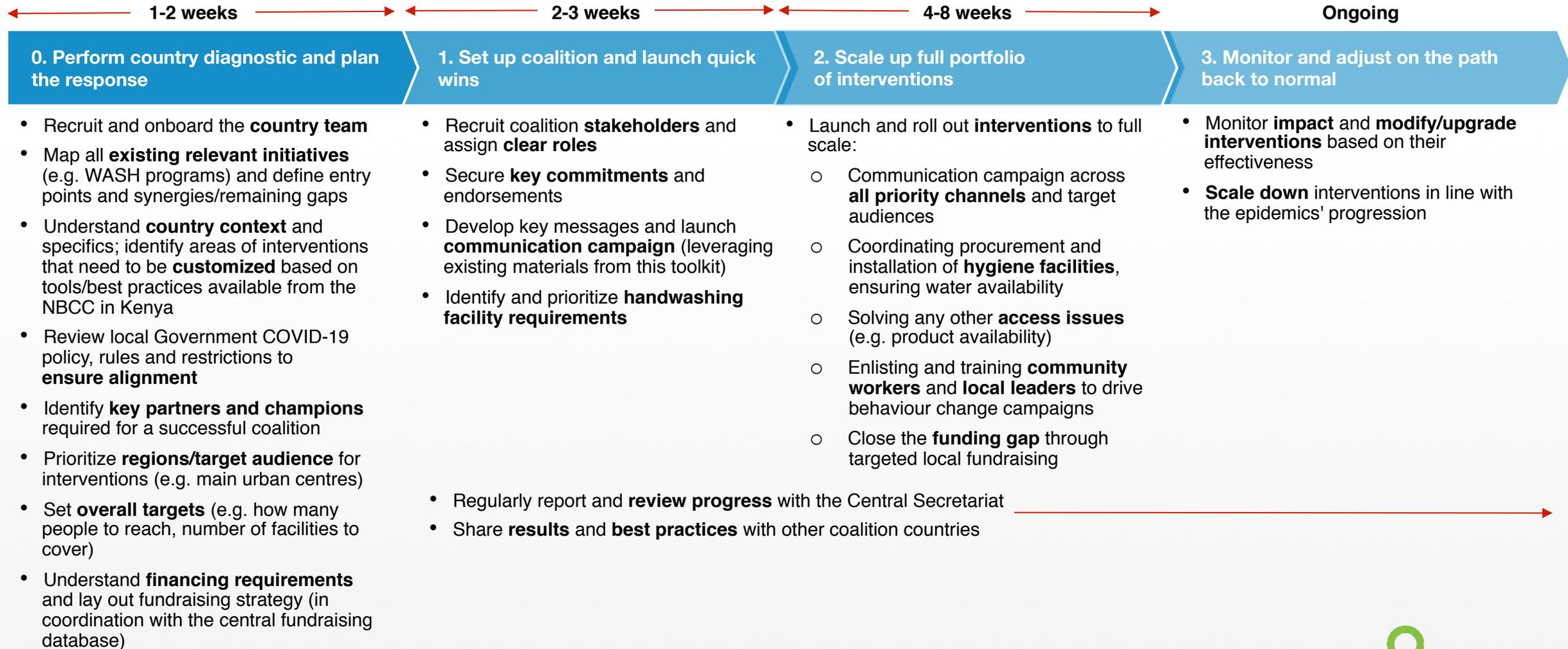
| | CAPABILITIES | TARGET | MEASUREMENT |
|--|---|---|--|
| COALITION  | Number of partners | | # partners |
| | Active contribution (in cash/kind) to programme's mandate | 100% members contributing (min 50% members) | # partners signed MoU |
| COMMUNICATION  | Reach of messaging | | # views by channel # clicks by channel # retail points # population reached |
| ACCESS  | Handwashing availability | | # handwashing stations with soap/water |
| | Access to sanitisers and other preventative measures | | Liters of sanitizers distributed, masks distributed/understanding of physical distancing |
| FINANCING  | Amount of fundraising income received | | \$ amount raised |
| | Amount of in-kind support received | | # products \$ value of products |

PART 4

COUNTRY ROADMAP



PART 4 COUNTRY ROADMAP





Africa Rollout

April 2020

May-July 2020

August-December 2020

Post COVID-19



Wave 1

Wave 2

Wave 3

- Tanzania
- Ethiopia
- Uganda
- Rwanda
- Ghana

- Country activities will be driven by local implementation teams supported by the Central Secretariat
- Approach and interventions will be tailored to specific country context

RESOURCES



RESOURCES

Business Fights Poverty resources

- [Business & COVID-19 Response Centre](#)
- [Action Toolkit for Handwashing & Other Measures](#)
- Action Toolkit for Rapid Innovation through Partnerships

COVID-19 Hygiene Hub

from the London School of Hygiene & Tropical Medicine

<https://hygienehub.info/covid-19>

National Business Compact on Coronavirus Kenya

<https://www.covid19businessresponse.ke>

Global Handwashing Partnership

<https://globalhandwashing.org>

Safe hands Kenya (a great delivery mechanism)

<https://www.safehandskenya.com>



THANK YOU

For joining the effort
on the global Coronavirus pandemic



National
Business
Compact on
Coronavirus



Concept & Realisation
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