



# Community Change Agents: “Doctors” of Malaria Information

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President's Malaria Initiative



# COMMIT Project

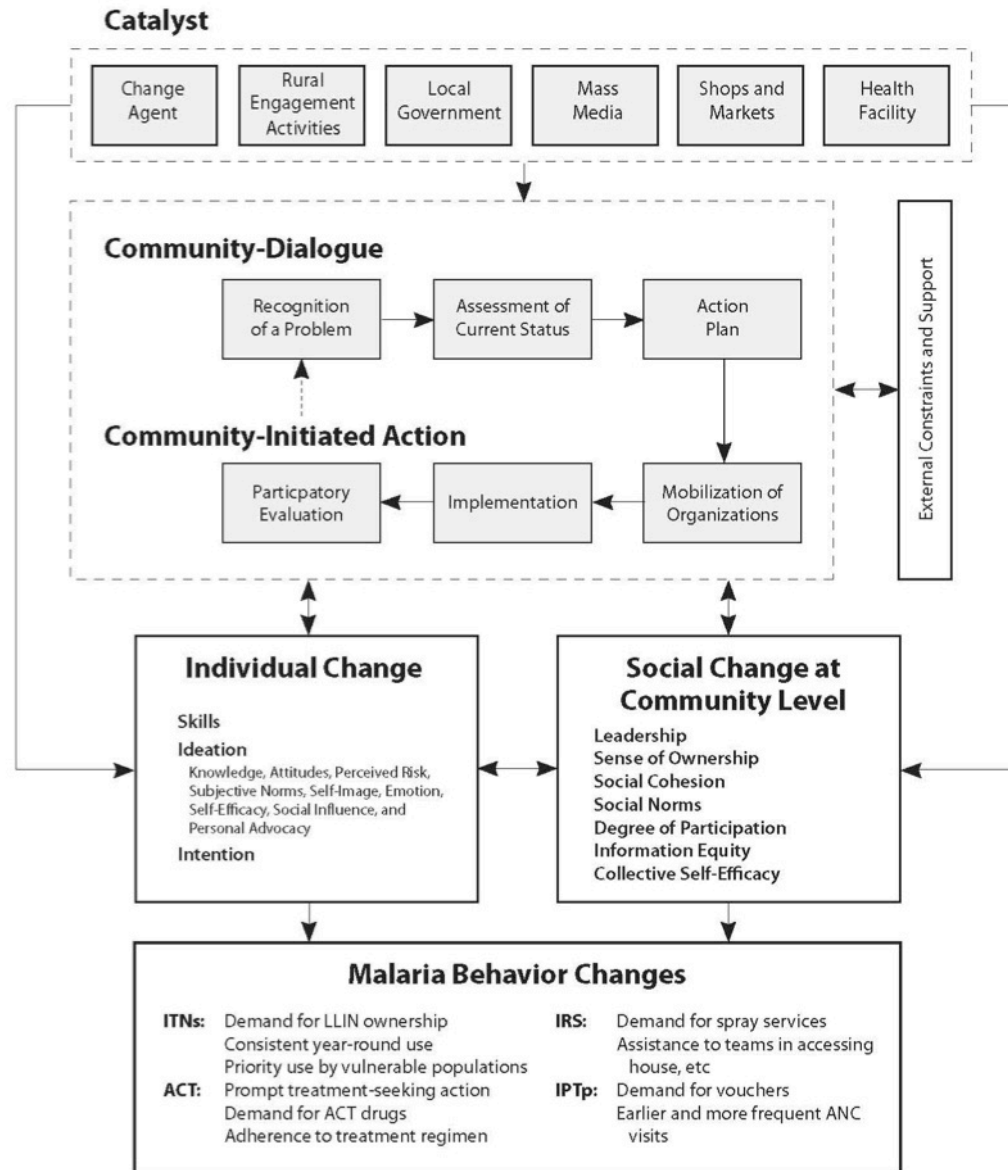
- Behavior Change Communication project for Malaria Prevention, treatment and control in Tanzania
- Funded by US President's Malaria Initiative through United States Agency for International Development
- Focus:
  - Consistent use of bednets - Long Lasting Insecticidal Treated Nets (LLINs)
  - Malaria in Pregnancy
  - Under 5 Case Management
  - Indoor Residual Spraying

# COMMIT Project

- Promotes malaria prevention behaviors through
  - Community Mobilization
  - Mass Media, movies, radio, and print
  - Health provider skills strengthening
  - Advocacy



# Communication for Social Change Strategic Framework



# Background

- Approximately 1,200 Community Change Agents run through a network of 65 CBOs
- Covered 11 out of 21 regions in Tanzania
- Powerful community based BCC interventions with Interpersonal Communication
- CCAs covered:
  - Fostering correct use of ITNs and associated behaviours
  - Encouraging correct treatment seeking and case management behaviours
  - Emphasizing the importance of IPTp for all pregnant women
  - Supporting acceptance of IRS in target areas

# Structure





# How they worked



Community led activities



Group talks



Programs for children



One on one discussions

# Evaluation:

## Qualitative Post-Hoc Evaluation and BCC Impact Evaluation

Qualitative: Conducted in 3 regions in low- and high-performing CCA wards

- 10 IDIs per region (n=30)
- 2 FGDs per region 6 FGDs with CCAs
  - total n=52 (36 males, 16 females)

Quantitative: 3 regions, 400 HH per region split between high and low performing CCA wards a n=1,200

IDIs had to have completed a HH survey



# Specifics of CCA exposure

	Lindi	Rukwa	Mwanza	Total
Percent aware of CCAs	32.4	21.0	52.3	35.2
Percent who attended events with a CCA in the last year	18.5	12.5	36.3	22.4
Percent who received a home visit from CCA	13.0	11.0	32.3	18.8
n=	400	400	400	1200

# Role of CCAs

People understood what the role of the CCA was – to provide information and motivate communities and individuals to action:

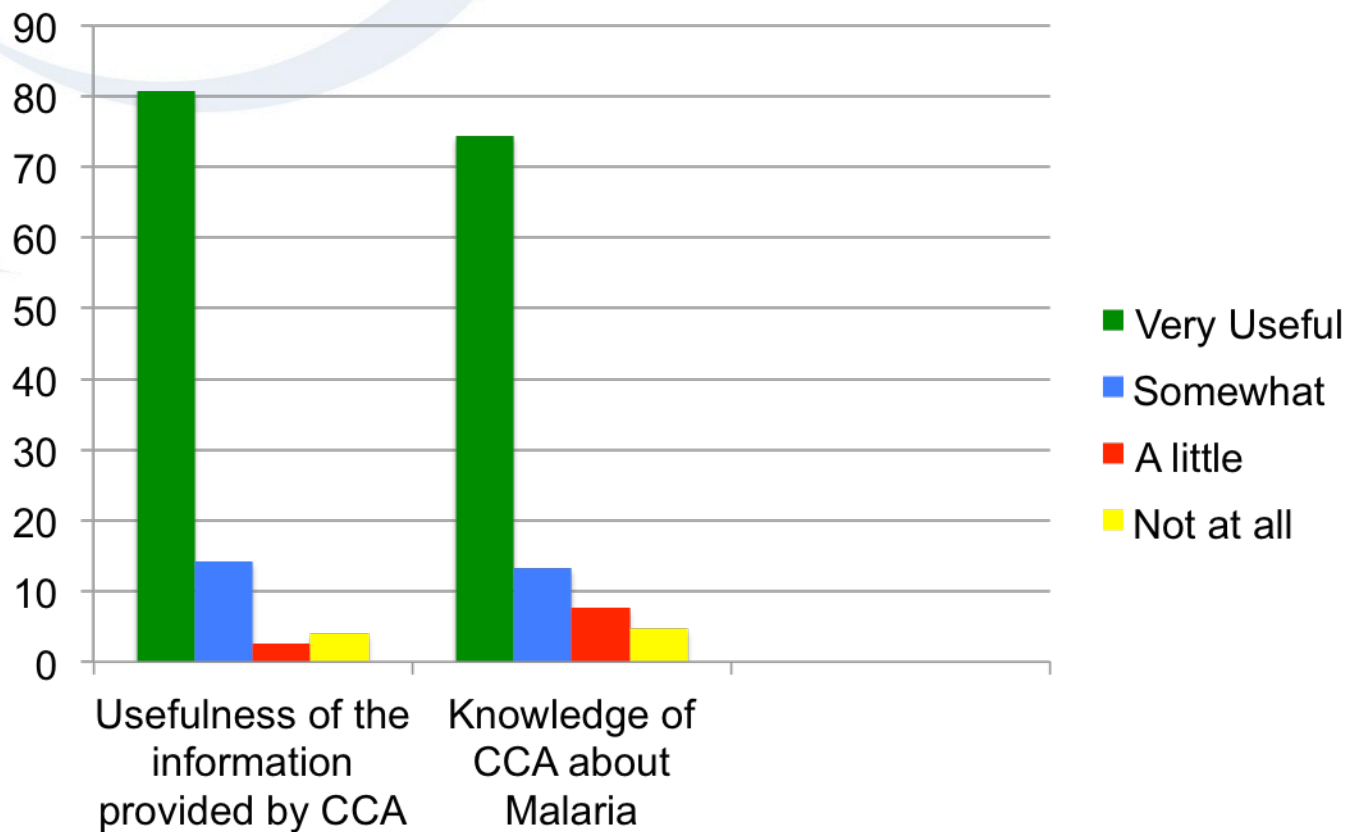
- *We recognize a Community Change Agent as a Doctor who teaches us about malaria, to protect oneself and how to prevent malaria when it's about to get to you (Female, Mwanza, low activity).*
- *They [CCAs] encourage us that when you have fever then you should rush to a health center to get treatment (Female, Lindi, high activity).*
- *He/she has a role of explaining how to use bed net, or how pregnant women and children can be protected against malaria by using our bednet (Female, Mwanza, low activity)*

# What was learned from the CCAs

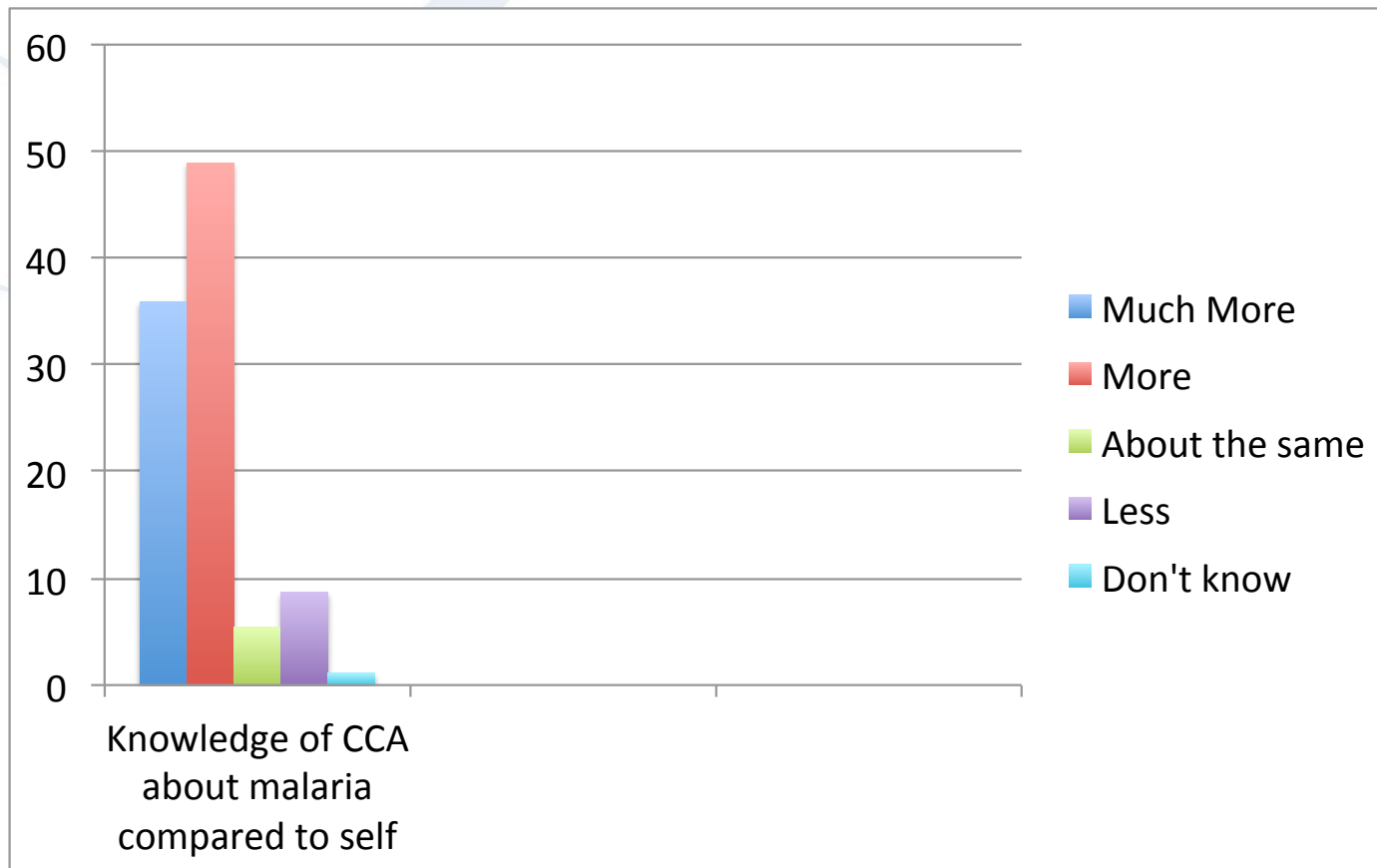
People felt that the CCAs were able to teach them new things, and did it a manner appropriate for them:

- *[The CCA] told me that mosquitoes are there during dry season, and mosquitoes that transmit malaria normally bite during late night around two in the morning... That is the knowledge he gave me (Male, Rukwa, high activity).*
- *There were drawings about uses of nets, how to use and wash, yes! All about it...pictures of pregnant women were drawn so if you do not know how to read you look at the pictures, and for those who can read they do both look and read (Male, Mwanza, low activity).*

# Perceptions of the CCAs



# Perceptions of the CCAs





# Changing Attitudes

Attitudes on malaria were changed – going from a fact of life to something that was serious but that could be easily prevented and treated:

*I thought that malaria was just a simple thing like flu, fever, or a wound. But right now I know what malaria is and its effects. In the past we took malaria as a normal disease; we didn't know that it was bad. But after the CCA taught us, we now know it's a dangerous disease (Female, Lindi, low activity).*

# Changing individual behavior

Individual behaviors changed, and when individuals change they advocate to others.

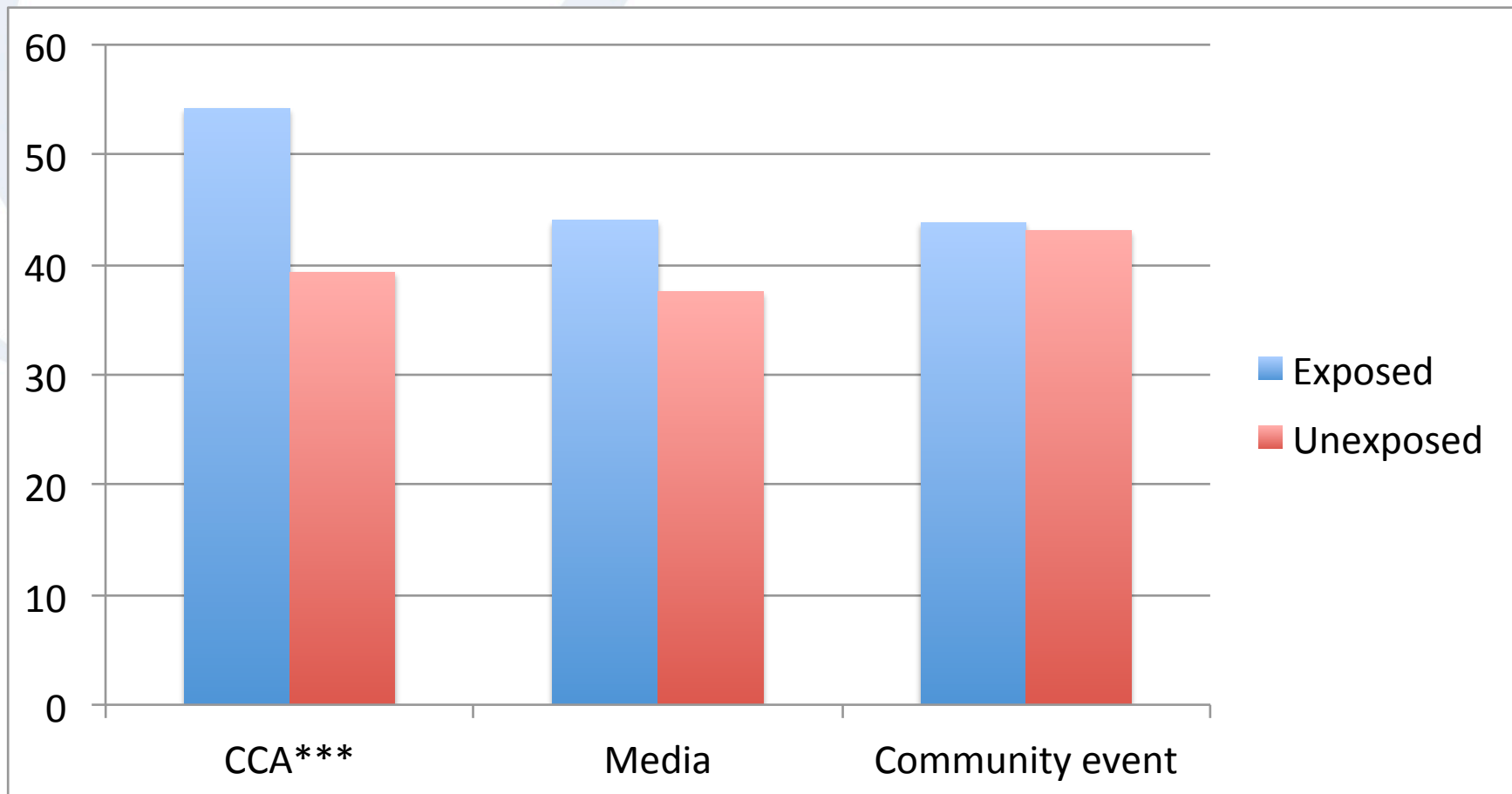
*I have changed because if you compare the past... I know how to fix it [nets] when torn and how to keep it safe (Female, Lindi, low activity).*

*I have changed because now I know the importance of malaria, what to do when my child has malaria symptoms, and the importance of rushing him/her to a dispensary so that he/she can get treatment (Female, Lindi, low activity).*

# Diffusion of program messages – personal advocacy

<b>Actions following an interaction with a CCA</b>	<b>Lindi</b>	<b>Rukwa</b>	<b>Mwanza</b>	<b>Total</b>
Percent that told information to a friend or family member	47.8	61.9	57.1	55.4
Percent that encouraged a friend or family member to listen to the CCA	45.7	66.7	40.4	64.6

# Percent of respondents with a strong belief in the effectiveness of bed nets



# Changing Community Behavior

CCAs were also crucial in getting people to go to clinics early when they see signs/symptoms of malaria. They started to understand that it was a serious disease and can be treated

*In the past the community was using traditional medicines for prevention and treatment against malaria, but right now we have learnt that it's better to see the experts because they know how to treat it. We have changed because we rush to a hospital when we hear someone is sick (Male, Lindi, low activity).*



# Conclusions

- The CCA platform was successful in engaging communities in malaria prevention and treatment
- Community members respected the CCAs and credited them with providing a deeper understanding of malaria
- They were seen as an important person in their community and a link to the national malaria program of the MoH
- They were trusted members of the community
- It is a replicable model that can be adapted to other areas



# Asanteni Sana Thank You