



Participants gather for a community dialogues session in Mozambique

PROJECT BRIEF

Community dialogues for prevention and control of neglected tropical diseases

The project aims to assess the effectiveness of the community dialogues approach in enhancing community participation and improving knowledge and practices for the prevention and control of neglected tropical diseases (NTDs) at the community level

Project outline

The 17 NTDs prioritised by the World Health Organization comprise diseases caused by a variety of parasitic pathogens, including lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminthiasis and trachoma. They have been grouped together as 'neglected diseases' as they have traditionally received less attention and funding than other diseases like malaria and HIV/AIDS, and because they disproportionately affect poor and marginalised people in remote areas of low-income and fragile countries.

Many NTDs can be prevented and controlled through preventive chemotherapy, which is commonly provided to target populations through integrated mass drug administration (MDA) – the administration of drugs to entire populations irrespective of disease status. To maximise populations' protection from NTDs, preventive chemotherapy needs to be complemented by effective case management, vector control and the adoption of basic sanitation and hygiene practices.

As MDA is typically administered to at-risk populations over a period of several years, community perceptions, experiences and understanding of both NTDs and MDA are likely to have a significant effect on coverage rates. Community perceptions will also influence how widely prevention mechanisms such as hand washing are adopted among populations living in endemic areas. In this context, studies suggest that NTD control programmes could be improved by paying closer attention to social mobilisation and community involvement.

Country

Mozambique

Donors

Bill & Melinda Gates Foundation

UK aid from the UK Government

Length of project

March 2014–March 2016

Partners

Nuffield Centre for International Health and Development, University of Leeds

Direcção Provincial de Saúde, Província de Nampula, República de Moçambique

This study will use the community dialogues approach, which has previously been used by Malaria Consortium in the context of integrated community case management, to improve communities' knowledge and practices with regard to NTDs. The project will focus on schistosomiasis, a parasitic infection that is acquired when people come into contact with freshwater infested with the larval forms of the parasite, which is highly endemic in Mozambique.

The community dialogues approach builds on existing community-based structures and aims to enable communities to make informed choices and to take individual and collective action through providing a simple and flexible model and easy-to-use tools. The process involves trained facilitators from within the community hosting regular community dialogues sessions to explore relevant health topics, identify issues and plan for specific actions.

Community dialogues will be implemented in all communities in four districts of Nampula province in northern Mozambique: Mecubúri, Eráti, Morrupula and Mogovolas. Prevalence rates of schistosomiasis in the province are estimated to be as high as 78 percent.

To allow for a comparison of the community dialogues approach in different country contexts, it is anticipated that Malaria Consortium will link with the Centre for Global Health Research in Kumasi, Ghana, a partner on the COMDIS-HSD Research Programme Consortium. The exact scope of the Ghana arm of the study is yet to be determined.

Project objectives

The main objectives of the study are to:

- » Develop, adapt and implement the community dialogues approach for use in an NTD context
- » Assess whether the community dialogues approach contributes towards enhancing communities' understanding and knowledge of prevention and control of NTDs, especially of MDA
- » Assess whether the community dialogues approach contributes towards increasing community participation in healthcare delivery related to NTD prevention and control
- » Engage with national and international stakeholders to develop services and interventions that will improve prevention and control of NTDs
- » Contribute to the literature on communities' perceptions of NTDs and MDA and the effectiveness of community participation approaches

For more information on the community dialogues approach:

Community dialogues for healthy children. Encouraging communities to talk. Malaria Consortium Learning Paper series. Available at: www.malariaconsortium.org/learningpapers

The study comprises the following elements:

1) Development of community dialogues toolkit

The study team will develop the community dialogues toolkit based on the results of a rapid assessment carried out to explore local knowledge and perceptions of schistosomiasis, which involved focus group discussions with members of local community health committees and members of the target communities.

2) Knowledge, attitudes and practice (KAP) survey at baseline and endline

The KAP survey will measure communities' knowledge, attitudes and practices with regard to schistosomiasis. The survey will be conducted prior to and following implementation of community dialogues to assess whether communities' knowledge and attitudes have improved.

3) Training of community dialogues facilitators

Suitable facilitators will be selected through existing community structures and they will be introduced to the community dialogues approach and toolkit, as well as participatory facilitation techniques in a one-week training course. Facilitators will also be equipped with basic knowledge of the causes, signs and prevention of schistosomiasis.

4) Implementation of community dialogues (phase 1)

Facilitators will be tasked with autonomously conducting community dialogues sessions in their communities for six months, using the toolkit provided and the skills gained during the induction training.

5) Mid-term review and revision of community dialogues toolkit

At the end of phase 1, the monitoring and feedback data collected will be reviewed to identify issues that require corrective action. In addition, a series of focus group discussions with community dialogues facilitators and participants will explore community perceptions of the approach. Based on the results, the study team will make adjustments to the toolkit.

6) Implementation of community dialogues (phase 2)

Using the revised toolkit, another six-month cycle of community dialogues will be implemented in all communities in the four implementation districts.

7) Final review

Feedback and monitoring data collected during phase 2 will be analysed with a focus on how community dialogues have improved community participation. Qualitative data from focus group discussions with community dialogues facilitators and participants, as well as in-depth interviews with district-level health officials will also be used to gain insights into the effectiveness of the community dialogues approach.

This project supports efforts to deliver:

- ✓ NTDs prevention and control
- ✓ Operational research
- ✓ Community participation
- ✓ Monitoring and evaluation

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This material has been funded by UK aid from the UK government. However, the views expressed do not necessarily reflect the UK government's official policies.

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