

Teacher and her students committed to fighting malaria, Nampula Province

## Project overview

In focus: Malaria Prevention and Control

### Malaria Prevention and Control in Mozambique: scaling up for universal access with community involvement (2011-2017)

Mozambique is one of the countries most affected by malaria in Africa, where it is endemic throughout the country. Although there has been a decline in malaria in recent years, the disease is still responsible for about 42 percent of deaths in children under five years of age (MISAU, 2017). Malaria also undermines productivity and contributes to poverty.

#### Donor

Global Fund to Fight AIDS, Tuberculosis and Malaria

#### Partners

World Vision (principal recipient); Fundacao para o Desenvolvimento da Comunidade; International Relief and Development; Médicos do Mundo de Portugal, Food for the Hungry Associates.

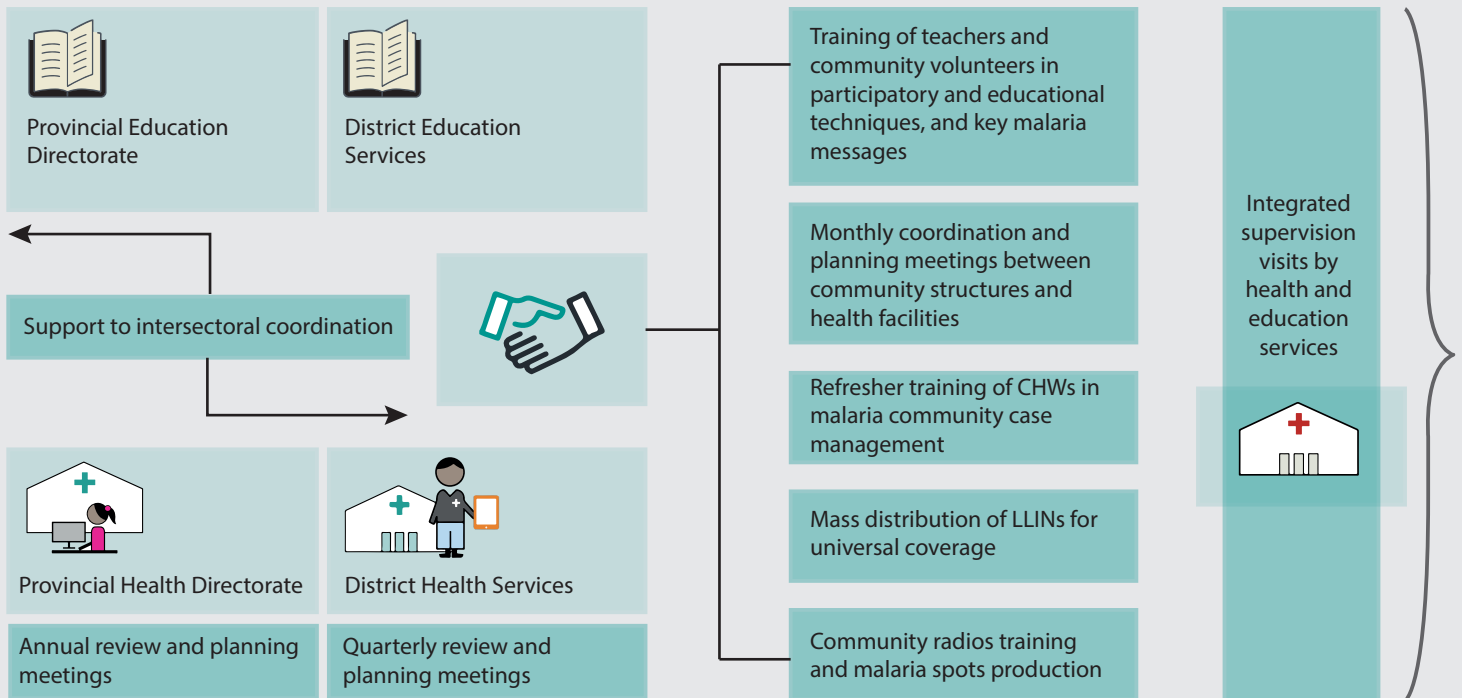
Ministry of Health; Provincial and District Health Directorates; Provincial and District Education Directorates; community radios; community structures.

#### Objectives

The main objective of the Malaria Prevention and Control Project in Mozambique was to contribute to a reduction in the number of malaria cases and, more specifically, to support the following goals of the National Malaria Control Programme 2012-2017:

- > for 100 percent of the population to have access to at least one malaria prevention method
- > for 100 percent of suspected malaria cases presented at health facilities and to community health workers to receive appropriate diagnosis and treatment
- > for 100 percent of the population to have access to information on malaria prevention and treatment.

## Key interventions

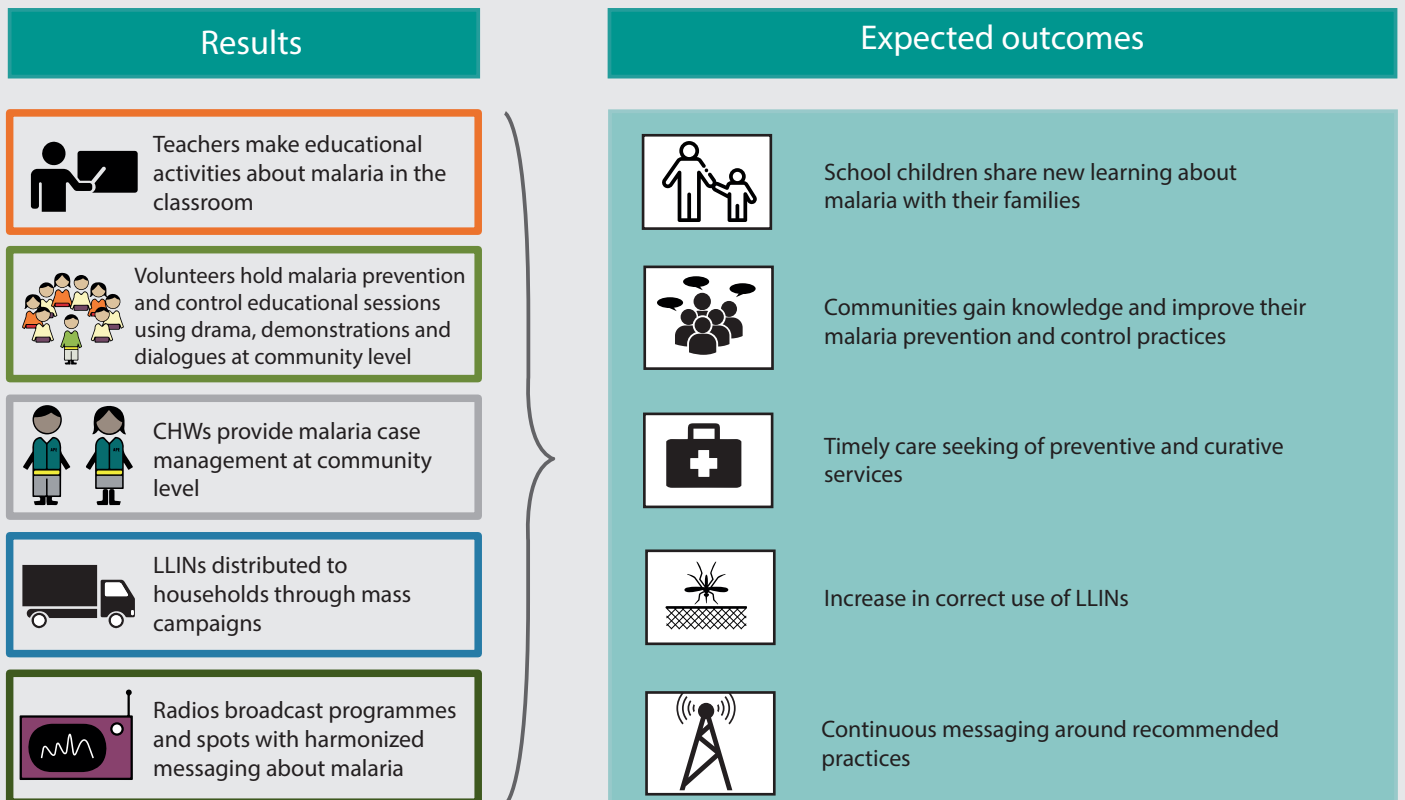


## Strategies

The project focused on building local capacity to deliver a combination of interventions for malaria prevention and control in nine of the country's 11 provinces, including:

- > Distribution of long-lasting insecticidal nets (LLINs) to reach universal coverage in the country
- > Refresher training for community health workers on appropriate management of malaria cases at community level

- > Training of community structures (such as health committees, local groupings, and leadership structures) as well as teachers, in participatory tools, educational techniques and key messages for malaria prevention and control
- > Partnerships with community radio stations for the continuous dissemination of harmonised messages promoting good prevention and treatment practices
- > Strengthening the management of the malaria control programme at the provincial and district levels through supportive supervision visits and regular review, coordination and planning meetings.



### Expected impact

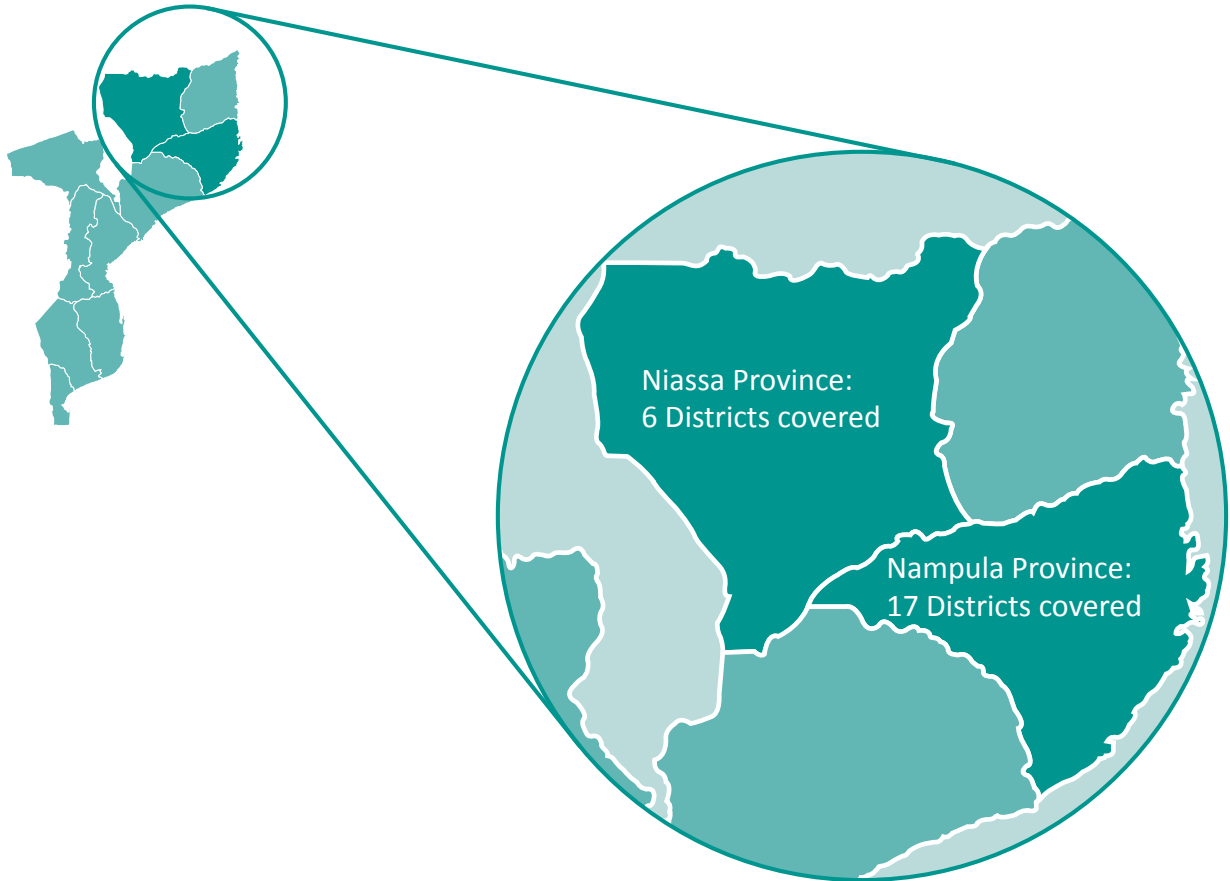
This approach was designed to improve the population's knowledge of malaria and to promote the uptake of effective malaria prevention and treatment practices at community level.

To view and download learning briefs and toolkits produced by this project, go to:  
<http://www.malariaconsortium.org/projects/malaria-prevention-and-control-project>

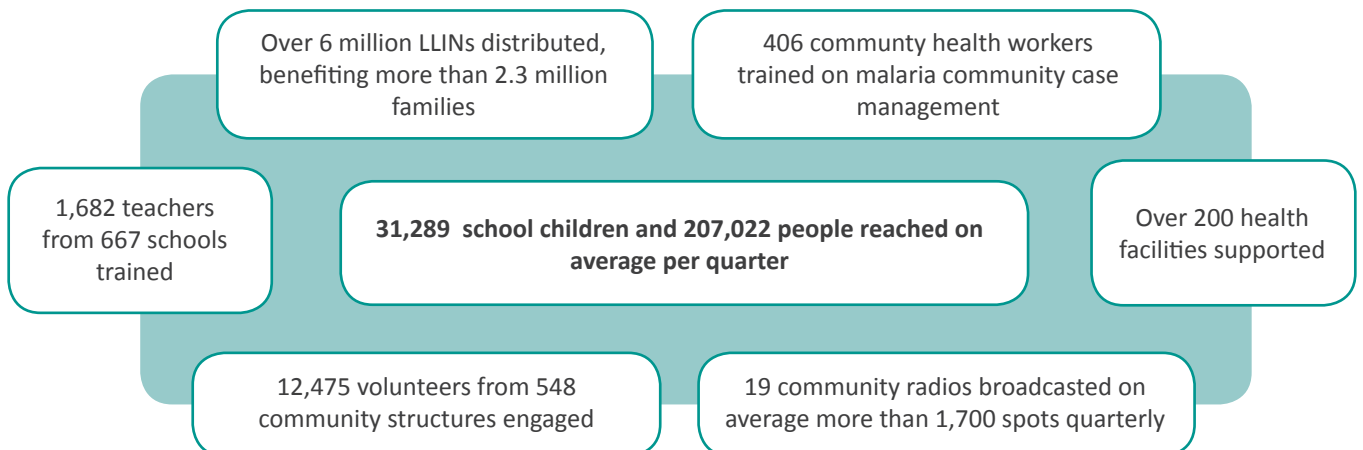
## Malaria Consortium's role

Malaria Consortium's role in the civil society partnership implementing this project was twofold:

- > Technical leadership in community engagement and behaviour and social change programming
- > Implementation in two of the provinces most affected by malaria, Nampula and Niassa.



## Main activities implemented in Nampula and Niassa Provinces



## Results

The results of the Malaria Prevention and Control project indicate that the significant expansion of intensive awareness, education and mobilisation activities, combined with the mass distribution of LLINs, has contributed to positive outcomes. Monitoring data and testimonials indicate an increase in knowledge about malaria and some behavioral changes in the project areas. The use of a mix of locally trusted sources of information – community groups, schools and radios – to disseminate harmonised messages at community level was found to be key.

### Increase in knowledge

In the Provinces of Nampula and Niassa, the project contributed to increasing teachers' and students' knowledge of malaria and malaria prevention methods. From a sample of schools covered by the project (620 students from 40 schools) in 2016, monitoring data indicated more than 85 percent of the students were aware of the cause, signs and symptoms of the disease, and knew how malaria can be prevented. Eighty percent of the students interviewed reported having slept under a mosquito net the previous night (Malaria Consortium, 2016). School teachers also reported having seen a reduction in student absenteeism, implying that there are fewer malaria cases in the community in general.

**“Participating in this project makes me feel good, I say this because I helped my students to improve their wellbeing, before a lot of them missed class and I lost many students due to health issues; after I learned (about malaria) and transferred this to the pupils in the lessons, they are doing better, and the rate of absences and drop-out has decreased.”**

*(Professor, Mecanhelas District, Niassa Province)*

### Perception of noticeable change

In a qualitative and participatory assessment conducted at the end of 2017 in 12 communities in six districts (four in the province of Nampula and two in the province of Niassa), respondents expressed a strong general feeling that there is noticeable change in the communities. Health workers, school teachers and community groups reported changes mainly in terms of a reduction in malaria cases, increased dissemination of information and understanding on malaria, its transmission, prevention and treatment, and adoption of the recommended practices, especially a shift in care-seeking from traditional practitioners to health facilities (Malaria Consortium, 2017).

**“Before, the community did not use the health facility – they depended on the traditional healer and the flow of the sick in the community was greater. But after the malaria project, with the help of the activists, leaders, sensitisations and bed net distributions, malaria has greatly reduced because people now run to the health facility for any type of consultation, which they did not do before the project.”**

*(Health staff, Mecanhelas District, Niassa)*

### Expanded outreach of messages at community level

In general, what the participants praised most about the project is their improved access to reliable information on malaria in remote communities where people could previously only access such information through health facilities.

**“It changed a lot with involvement of the community, if we were only educating at health facilities level, I believe that no one could take up that information back home.”**

*(Health staff, Ribaué District, Nampula Province)*

All respondents referred to community volunteers as the principal agents of change. The teachers interviewed considered teachers and volunteers to have contributed jointly to the reported changes together with a number of other factors, including the collaborative attitude of the population. Some health workers mentioned the role of health staff and LLIN distributions as factors that have also contributed to these changes.

Respondent accounts show that community structures have become the primary and preferred source of information for community members on malaria prevention and care.

### Increased access and use of LLINs

For the first time the LLIN mass distribution campaigns in 2016/2017 covered all districts of both provinces simultaneously, reaching 96 percent and 93 percent of registered households in the Niassa and Nampula provinces, respectively. A rapid post-campaign monitoring assessment, conducted in June 2017 in six districts of the Niassa Province, confirmed that the proportion of households reaching universal coverage (one mosquito net for every two people) was above 100 percent in all districts. Similarly the proportion of household members sleeping under an LLIN the night before ranged from 84 percent to 98 percent, in line with expectations immediately post-campaign.



Distribution of long lasting insecticidal nets, Niassa Province

**“What I think went well with this project is the simple reason we took people out of the dark and enlightened them, because people did not know how to protect themselves from malaria. But with this project, people are already clear about what to do to tackle this malaria problem.”**

*(Member of community group, Angoche District, Nampula Province)*

While the reported changes in knowledge, attitudes and practices need to be further verified, the project has brought a different and positive dynamic to how communities perceive and deal with malaria preventive and curative practices. It has created an enabling environment for improved outreach and use of effective malaria prevention and control interventions.

#### **Strengthened capacities of local actors**

This has been achieved without creating parallel structures or entities, but always through existing actors, making them responsible for delivering and managing the activities. From a sustainability perspective, the project has strengthened existing community groups, radios and schools with a gradual but consistent approach.

Although the project successfully strengthened the link between health facilities and communities through monthly review meetings, there is still a need to strengthen coordination between the education and health sectors at the local level and with community radio stations. This can be achieved by creating opportunities for regular cross-sectoral review meetings.

The close collaboration between the Ministry of Health and NGO consortium partners has resulted in the successful development and use of all tools and materials nationwide, covering about 1,767 communities, 2,502 schools, and a vast network of community radios, with harmonised and quality messaging across the country.

#### **The need for local progress monitoring**

This successful initiative has provided a stepping stone towards more meaningful engagement of communities in malaria control and prevention that could be further enhanced by the use of an intersectoral quality improvement cycle.

The project monitoring system focused on process indicators for accountability purposes. However, the development of community-level indicators by the National Malaria Control Programme (NMCP) would allow progress to be monitored and encourage local-level discussion on progress to identify locally relevant actions. Furthermore, intra and inter district and provincial exchange should be considered to support the sharing of experiences and lessons learnt, as well as to facilitate and support programme improvement and maximise results.

## Next steps

The burden of malaria is exacerbated by insufficient access to, and inadequate use of, effective interventions. The Malaria Prevention and Control project, the first of its kind implemented at national scale in Mozambique, responded to Roll Back Malaria's call (RBM, 2012) and was designed to complement investment in strengthened services by creating demand, promoting community ownership and encouraging participation in the use of effective methods for malaria prevention and control.

The Provinces of Nampula and Niassa are following the national trend of decreasing numbers of malaria cases and deaths (PNCM, 2017). Although the results have not yet reached desirable levels, there are signs that investments are yielding positive returns. Progress may be slow, but for Mozambique to achieve its goals of controlling and reducing the burden of malaria, these gains must be maintained and consolidated through continued strategic investment in

strengthening services. It is also necessary to ensure that evidence-based communication remains a central component of the national malaria control policy and that adequate resources are allocated so that it can contribute to improved health outcomes.

Innovative strategies for social and behavioural change should be developed through an in-depth analysis of the determinants of uptake of recommended malaria prevention and treatment practices, such as the use of LLINs, to address perception barriers.

The multisectoral partnerships that have been forged through this project between government, civil society partners, radios and communities, and between the health and education sectors in particular, have been instrumental in achieving the project objectives. This cooperation should be strengthened by sharing knowledge and analysing the lessons learnt to address outstanding issues for optimal coordination and synergies.



Community talk given by a volunteer, Nampula Province

## Authors

Sandrine Martin, Fernando Bambo, Elizabeth Streat (Malaria Consortium). We thank Narciso Miguel Vilanculos and Arantxa Roca-Feltrer for their valuable inputs.

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Roll Back Malaria: The Strategic Framework for Malaria Communication at the Country Level 2012–2017

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