

Edutainment as a vehicle for malaria-related behavior change

Lessons learnt from Uganda

Key learning

- When designing malaria-related social behavior change (SBC) interventions, applying strategies that focus on gender norms and perceptions has a positive impact on the health outcomes of men, women and the youth in the short and long run.
- Combining edutainment with SBC interventions is a successful way to engage men in key public health issues to encourage health-seeking behaviors within households and communities.
- The more popular the form of entertainment used for education, the greater its potential to raise awareness, impart knowledge, stimulate debate, influence attitudes and social norms, and bring about positive behavior change.

Background

While significant progress has been made globally in tackling malaria, the disease remains a challenge in most areas of Uganda, which still has one of the highest malaria burdens in Africa.^[1] The USAID Malaria Action Program for Districts (MAPD) sought to reduce malaria-related mortality and morbidity in the country, in support of the national malaria control strategy. To facilitate the program's aims, Malaria Consortium provided technical direction and oversight, programmatic and representation leadership, and collaborated closely with partners, including Uganda's National Malaria Control Programme (NMCP) and district health teams.

MAPD placed a special emphasis on innovative SBC communication approaches to reach targeted communities with efficient and effective messaging. Findings of an earlier MAPD gender analysis^[2] showed that many malaria awareness interventions are designed to target women and children under five, often overlooking men and male youth. Successfully reaching and engaging men with health campaigns is extremely important, but difficult.

In many parts of Uganda, men typically control their household's financial resources and are the primary decision makers when it comes to resource allocation and prioritization of expenditures, including on health. Yet, they rarely attend facilities where health education is delivered, and they often do not prioritize community sensitization as they tend to think that health issues — including malaria — are women's concerns.

MAPD identified large-scale football events to engage men aged 15–35 to improve their knowledge of malaria prevention and treatment and encourage behavior change within households. Edutainment activities helped to reinforce malaria messaging among men, alongside the ongoing provision of malaria services. The 2018 FIFA World Cup provided an ideal opportunity to reach this demographic via the program's Giving Malaria the Boot! campaign — a component of Uganda's national Chase Malaria campaign, which seeks to build a culture of malaria prevention and control among Ugandans.

Project activities

The 2018 FIFA World Cup took place in Moscow, Russia, 14 June – 15 July. In Uganda, the final match was aired on TV screens at video halls and trading centers (entry fees applied), health facilities (free of charge) and private homes (subject to availability). We set up public viewings in the main urban centers of the participating districts and used radio commentary with malaria messaging to reach audiences at home. The potential target audience for the Giving Malaria the Boot! campaign was around six million. During the World Cup, MAPD implemented the following SBC messages and interventions:

- Use of radio station announcements to promote viewing of World Cup matches at selected trading centers and experiential venues — spaces where fans could watch football matches — which

included activities, such as quizzes, on malaria prevention

- Broadcasting of key malaria messages on screens before the start of matches to engage the audience in a dialogue around malaria prevention, testing and treatment
- Conducting community dialogues initiated by village health teams and health assistants to generate malaria action plans
- Development and implementation of community action plans under the supervision of health assistants.

Results

USAID MAPD carried out interventions in 25 districts alongside 22 control districts. The program employed a mixed-methods approach to assess the campaign's impact and used statistical analysis to compare intervention and control data. Data were acquired from Uganda's district health information system and health management information system, activity reports, village activity registers and exit interview reports.

- Over seven million people (54 percent of the target population) were reached via radio messages, and almost two million through interpersonal and experiential activations during World Cup matches.
- More than 530 people responded to exit interviews during the activations, 81 percent of whom were men.
- Of those who attended football matches, 54 percent pledged to ensure that they and their households would use long lasting insecticidal nets consistently and correctly; nine percent pledged to remove mosquito breeding places; 38 percent indicated that they would seek treatment within 24 hours of onset of a fever; and 31 percent promised to adhere to test results.
- Between May and July 2018, the third dose uptake of intermittent preventive treatment in pregnancy (IPTp) in the intervention districts increased by 12 percent, reducing by one percent in the control arm.
- Malaria in pregnancy cases dropped by three percent in the intervention arm, compared to a one percent increase in control districts.



PROTECT UGANDA'S NEXT CRANES CAPTAIN



KEEP YOUR CHILD'S DREAM ALIVE BY ENSURING YOUR CHILD SLEEPS UNDER A MOSQUITO NET EVERY NIGHT.

Giving Malaria the Boot! campaign promotional poster

Lessons learnt

- Edutainment is an effective means of engaging communities in positive healthcare behaviors, as individuals are more likely to accept messaging that aligns with their interests. By creating a connection with a receptive male audience using one of their hobbies, football, as a vehicle, we promoted the importance of malaria prevention and treatment in the household.
- It proved challenging to keep men focused on malaria messaging over the course of an exciting football event. To address this, we set up malaria dialogues before matches and at halftime — away from screens — as a prerequisite for watching the matches. We also invited famous radio personalities to host quizzes at halftime as an incentive to win prizes, which further encouraged attendees to engage with the dialogues.
- We found that men, who are usually the key health decision-makers, contributed to an increased uptake of malaria prevention actions at the household and community level. After activations connected to football events, men complied with their pledge to ensure that women adhered to IPTp and attended antenatal appointments, resulting in reduced malaria in pregnancy cases.
- Community-based initiatives are effective when it comes to mobilizing communities, educating men and promoting community dialogue to effect changes in malaria prevention and control. We successfully used village health clubs as a vehicle for community dialogues and to mobilize men to attend the football matches.
- For sustainable behavior change to be achieved, men need to be engaged consistently, in the right context and over an extended period of time. While we saw an improvement in women's health during the intervention, its limited scope and timeframe curtailed follow-up activities that might inform questions around sustainability. Working with a limited campaign budget also meant we could not reach as many people as we would have needed to achieve sustainable behavior change.
- While the initial results have been positive, there were limitations to the qualitative data. The intervention was restricted to 52 MAPD-supported districts (25 implementation and 22 control districts) out of more than 120 districts, nationally.

Recommendations

Based on the outcomes of the Giving Malaria the Boot! campaign, we recommend the following actions for future successful campaigns with a gender focus on men:

Malaria stakeholders should:

- design malaria programs that **target young men's perceptions** before gender norms are set
- **engage men through their hobbies**, such as music, art and sports, to ensure sustainable uptake of malaria prevention and treatment
- work with Ministries of Health and districts to **develop mechanisms to track the impact of gender-focused campaigns** in the short, medium and long term through village health teams, village health clubs and other stakeholders in the communities sensitized
- **allocate sufficient budget and time** when planning SBC interventions to improve their sustainability. Interventions are more likely to be successful in the long term if they are adapted to the local context and have adequate time to become embedded within communities.

Ministries of Health, districts and implementing partners should:

- **integrate components that specifically engage men** in malaria SBC programs to effectively engage communities on awareness and uptake of malaria interventions
- provide **adequate support** to malaria stakeholders by creating an enabling environment
- establish **sustained government health education programs**, both in the community and at health facilities, that target men as key household decision-makers to encourage people to seek timely treatment to avoid aggravation of fever and malaria.



Public viewing during the 2018 FIFA World Cup where key malaria messages were broadcast as part of the football events, Uganda

References

1. World Health Organization. World malaria report. Geneva: World Health Organization 2020. Available from: <https://www.who.int/publications/i/item/9789240015791>.
2. World Health Organization. World malaria report. Geneva: World Health Organization 2019. Available from: <https://www.who.int/publications/i/item/9789241565721>.

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Cover image: Community dialogue in Bukinda village, Uganda

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