Community dialogues for the prevention and control of neglected tropical diseases

This project aims to improve knowledge of the most prevalent neglected tropical diseases and promote the uptake of effective prevention and control practices at the community level using a community dialogue approach.

Project outline

Neglected tropical diseases (NTDs) are diseases of poverty that disproportionately affect people in remote and rural areas of low-income and fragile countries. In Mozambique, the prevention and control of NTDs represents a major challenge, particularly in the northern provinces where vulnerable populations are among the most affected.

Effective NTD prevention and control relies on a combination of several public health approaches, including blanket mass drug administration (MDA) to populations in endemic areas, vector control, adoption of good hygiene and sanitation practices and case management. However, to ensure uptake of recommended prevention and control behaviours, NTD programmes also need to address knowledge gaps and misconceptions amongst affected communities.

Countries
Mozambique

Donors
Bill and Melinda Gates Foundation

Length of project
May 2017 – April 2019

Partners
Ministry of Health, Nampula District Health Directorate
Project objectives

This project aims to strengthen the prevention and control of three NTDs in four districts of Nampula province, Mozambique, by ensuring high levels of uptake of mass drug administration at community level.

Activities

The project aims to develop, implement and evaluate an effective, replicable and sustainable approach to participatory community mobilisation and engagement for the prevention and control of three target NTDs: schistosomiasis, lymphatic filariasis and soil transmitted helminths. It operates at community level in the four districts of Nampula province where the community dialogue (CD) approach for schistosomiasis had already been tested, Eráti, Mecubúri, Mogovolas and Murrupula. The intervention focuses on ensuring high uptake of MDA, but also promotes the adoption of recommended protective behaviours more generally, as well as the creation of robust linkages between communities and the formal health system.

The project comprises four stages:

1. Formative research: to strengthen our understanding of the population’s perception of the diseases, existing preventive and health seeking behaviours, and barriers to and enablers of behavioral change.

2. Adaptation of approach and development of tools: the CD approach for schistosomiasis is being adapted to cover three NTDs through an iterative process which involves engagement with national and provincial health authorities and pre-testing with users. An implementation protocol is being developed to describe the CD process and its key messages. The project materials comprise visual tools designed to stimulate discussion, as well as a facilitators’ manual summarising relevant information about NTD prevention and control and the CD process.

3. Implementation: the implementation process comprises the following: sensitisation of communities in the intervention districts and villages, community-led selection of suitable CD facilitators, training of CD facilitators on prevention and control of target NTDs and CD facilitation skills, organisation of routine dialogues by CD facilitators, liaison with facility-based health personnel, and monitoring, support and supervision provided to all CD facilitators.

4. Evaluation: the evaluation involves both qualitative and quantitative methods to assess the effect of CDs on population uptake of preventive measures, in particular MDA, and the dissemination of results to stakeholders.

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