Using SBCC to create demand for mosquito nets in the private sector
The Case of the Malaria Control Culture Project in Uganda

Presenter Name: Daudi Ochieng

SBCC Summit / 8-10 February 2016
Background

Malaria Consortium Uganda set out to create a ‘malaria control culture’ in Eastern Uganda, Tororo District, through a 3-year project.

Malaria Consortium used mosquito net use as an entry point to creating a culture of malaria control by:

• developing routine LLIN distribution channels through antenatal care services and schools, to ensure the continuous flow of nets into communities, following a universal coverage campaign

• enhancing community value of, and demand for, LLINs through both public and private sectors
Communication intervention objectives

To create a culture of sleeping under an LLIN every night:
• To enhance value attached to mosquito nets
• To create sustainable demand for nets in the private sector, beyond the free distributions

To promote the other malaria control key behaviours:
• Seeking treatment within 24 hours of fever onset
• Testing before treatment
• Adhering to the test results
• Adhering to the prescribed treatment
Multi-channel intervention targeting the eco-system of behaviours

- Mass media (radio)
- Social Mobilisation through schools
- Interpersonal Communication community dialogues
- District Leadership (creating and enabling environment)
- Point of Sale Materials (drug shops)
- ANC Mobilisation and IEC Materials at health facilities
Key elements of the intervention

PUSH
The SBCC campaign addressed key motivators
1. Have a good night’s sleep
2. You will wake up energised
3. You will be more productive
4. It is a way of life

PULL
Support provided to private sector development
1. Trained and mentored the drug shop owners on how to leverage on the SBCC campaign
2. Promote the participating private outlets as your source of quality mosquito nets
Monitoring and evaluation framework

If we want to create a Malaria control culture, what are the hot buttons we need to push?

Where are we starting from?

Is our strategy working? Is it making a difference? Are we on track to meeting our goals and objectives?

Did we achieve our communication objectives?

Year 1: Focus Group Discussions

Year 1: Household Survey Feb 2014

Year 2: Household Survey Feb 2015

Year 2: Private Sector LLIN Survey May 2015

Year 2: Private Sector LLIN Survey May 2015

Year 3: Household Survey Feb 2016

Year 3: Private sector LLIN survey May 2016
More people were attesting to always sleeping under a mosquito net in year two than they were in year one.
In year two, willingness to buy a net by the local people increased by 5% from 74% to 79%, which may indicate an increase in the value people attach to nets.
The graph above shows the reported actions taken after being exposed to campaign messages.

- Are encouraging all his friends/family to sleep under a net: 58%
- Are thinking about buying a net: 62%
- Went and bought a net: 42%
- Started sleeping under a net: 80%
- Talked to someone about sleeping under a net: 68%
Results

There has been an increase in the nets sold by the private sector over the two years of project implementation, as indicated in the graph above.
Elements of sustainability

- The drug shop owners are looking for ways to pay for the SBCC campaign.
- The private sector is looking into producing and distributing ‘imaged nets’.
- Malaria Consortium is training and mentoring the private sector on marketing, sales and distribution.
- Tororo District Health Team continues to support the private sector in the distribution of nets through its networks.
Lessons learnt

• Constant reminders and incentives are needed to create sustainable demand

• An SBCC campaign designed with private sector involvement and promotion support elements helps attract the interest of the private sector

• Anchoring the products and behaviour(s) being promoted in the local values and beyond health gains helps communication efforts reach the target audience

• A campaign designed to target the eco-system of the audience and involving all stakeholders gets more traction

• Changing behaviours requires addressing both push and pull factors in an integrated manner
Acknowledgements

• Comic Relief
• Tororo District Health Team and local government
• Uganda Ministry of Health, Ministry of Education and sports, and partner government institutions
• Communities of Tororo district and their leaders
• Malaria Consortium Uganda and global staff
Thank you

www.malariaconsortium.org