



**malaria
consortium**
disease control, better health

Using SBCC to create a malaria control culture A Uganda Case Study

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Presentation outline

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Introduction

- Tororo district, Eastern Uganda
- High malaria burden: Malaria accounts for 40% of outpatient attendance
- Project designed to foster a 'malaria control culture', immediately following on the heels of a mass campaign LLIN distribution that achieved universal coverage for nets

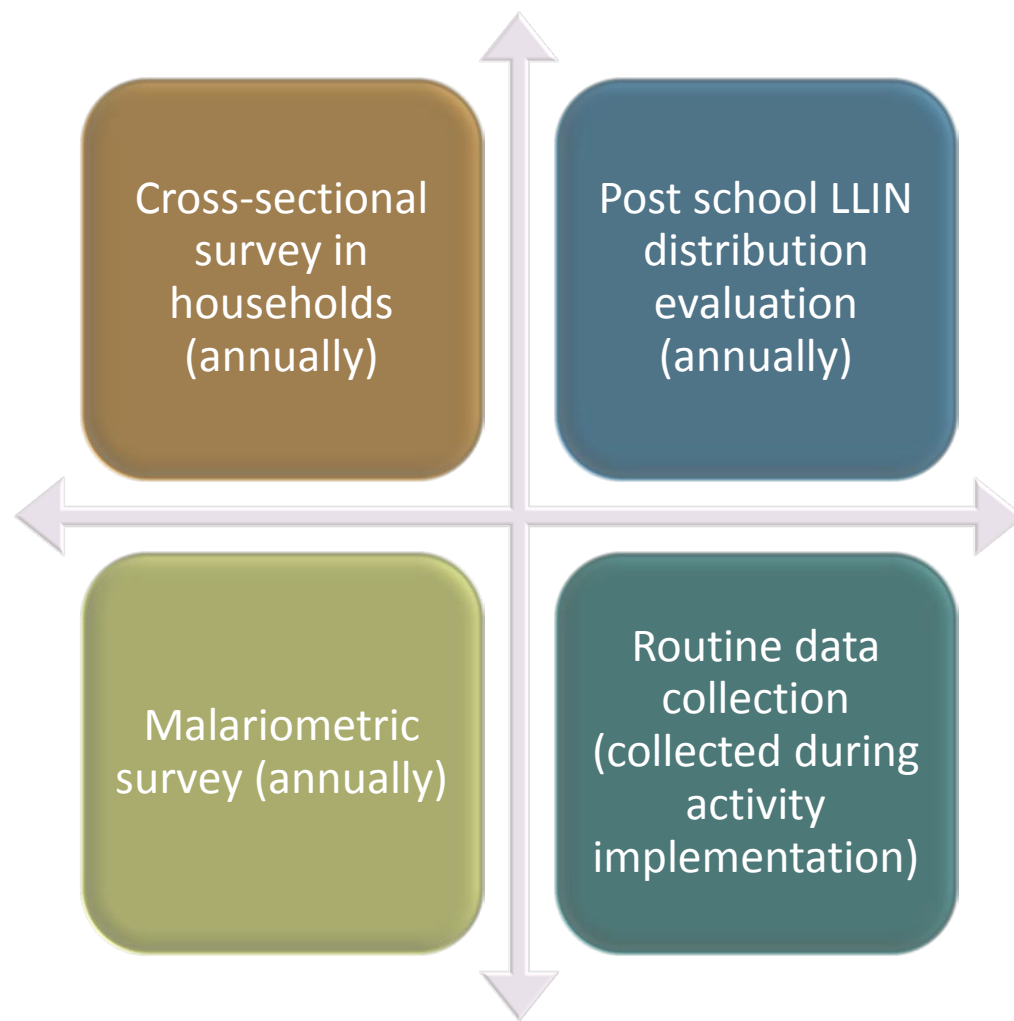
Introduction continued

1. increasing the value people place on nets through a combination of channels for continuous LLIN distribution, following on the heels of universal coverage LLIN campaign
2. strengthening management of differential diagnosis of malaria/alternative causes of fever at health facilities in order to reduce presumptive treatment
3. promoting malaria control behaviours through implementing a supportive and integrated community mobilisation and social behaviour change communication (SBCC) strategy
4. strengthening the capacity of the district health systems, especially data collection and use, and the quality of the support supervision

Approach

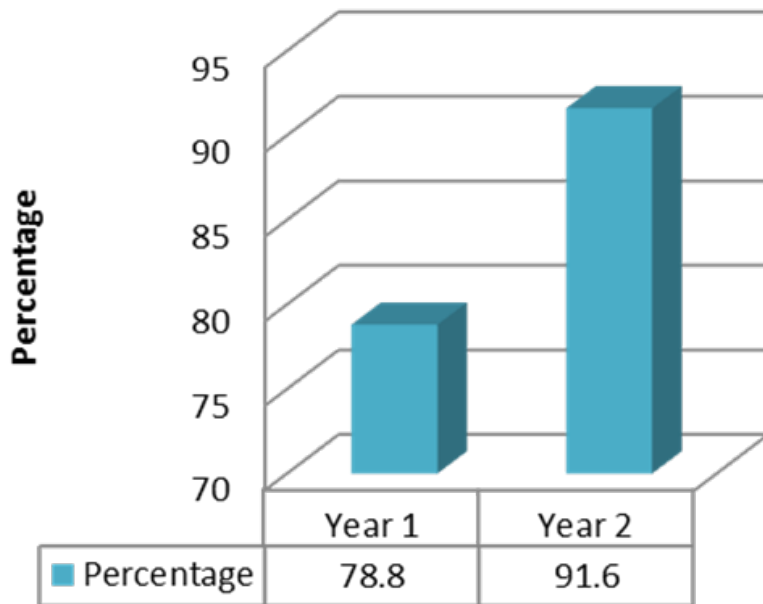
- Distributed mosquito nets through 178 government-aided primary schools, targeting primary one and primary four pupils
- Conducted a schools-based musical competition “*the malaria schools anthems challenge*” in which 21 schools competed in composing and presenting anti-malaria anthems.
- Supported by other project SBCC channelled through radio, community health workers, religious leaders and visual communication materials
- Project interventions were implemented through health facilities and private LLIN markets

Methodology for collecting data

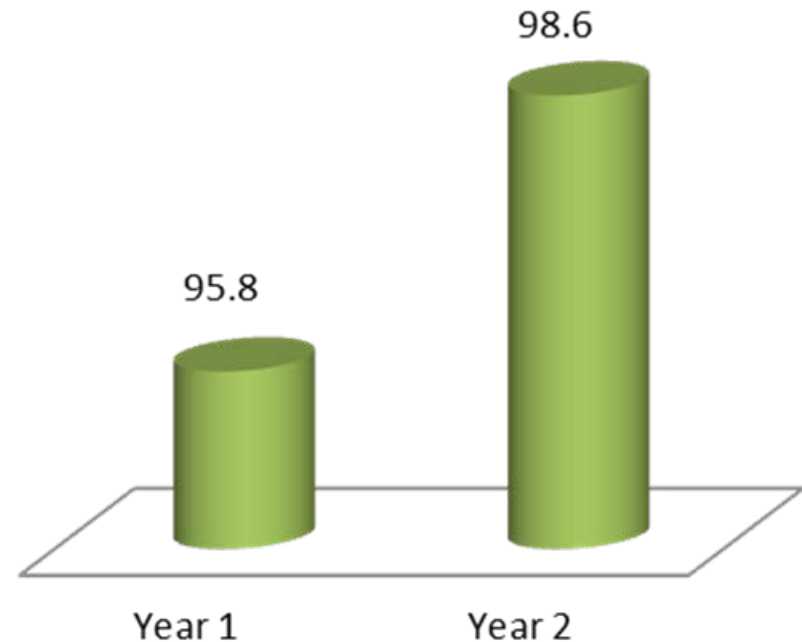


The results

Net was used last night

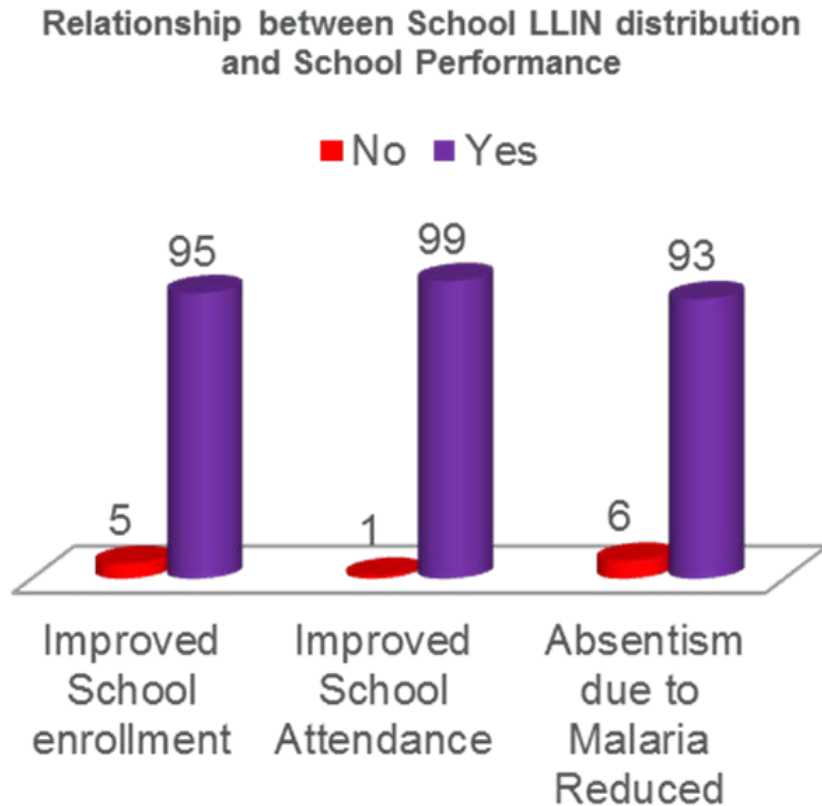


Percentage of Children Slept under the net themselves



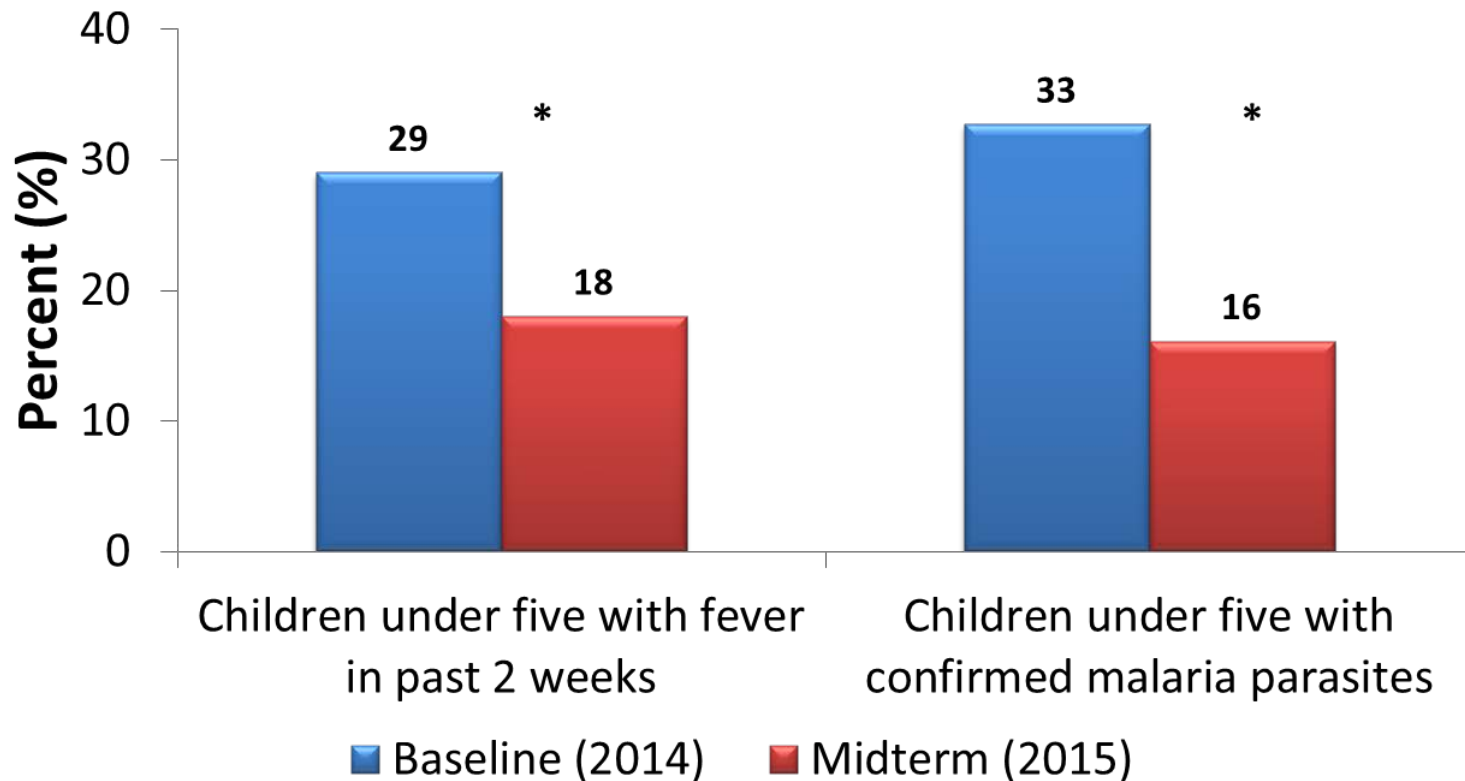
Household level survey, followed up net recipients to their homes. Year 1 (July 2014, n=189); year 2 (May 2015, n=380)

Results: secondary benefits of the intervention



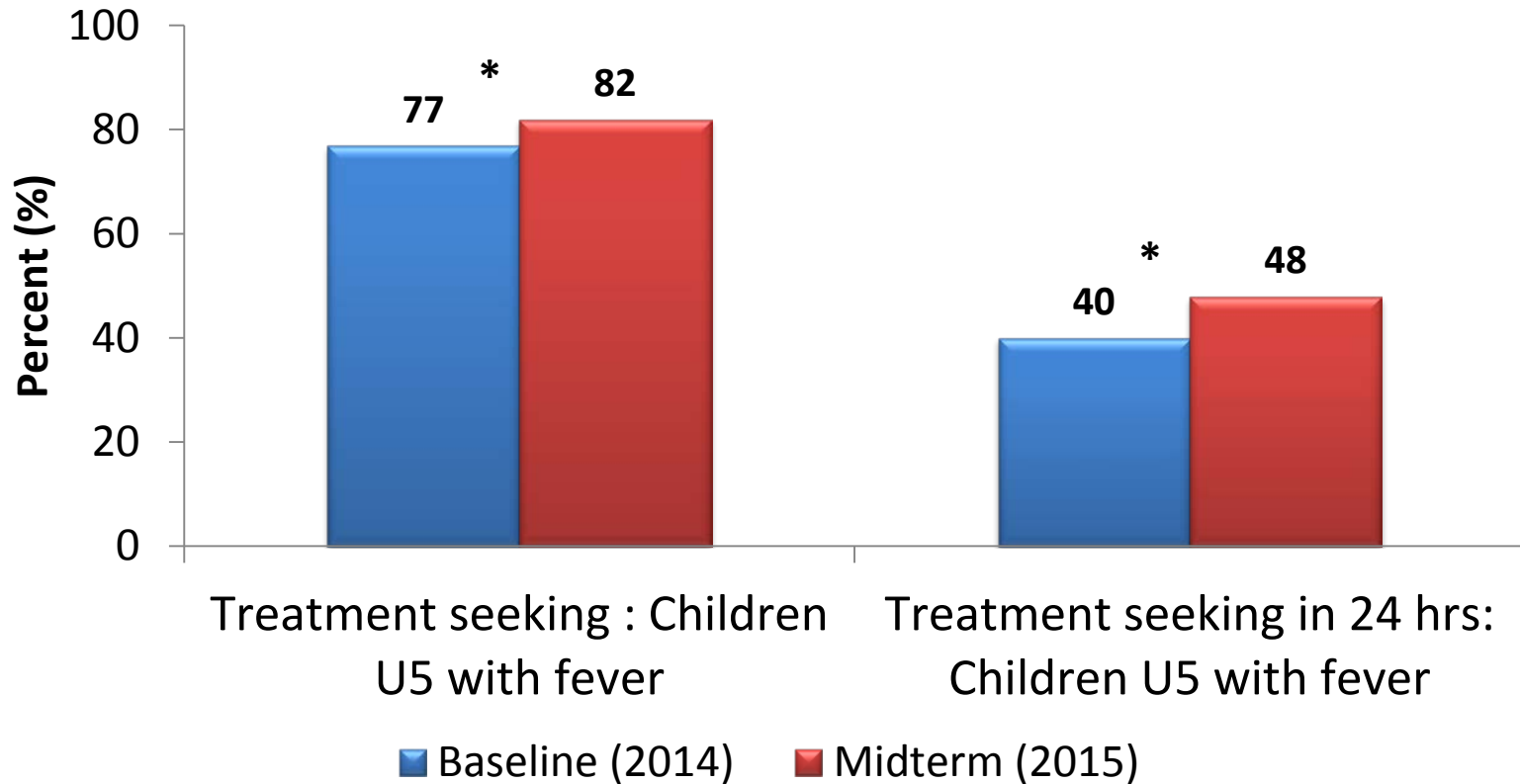
N=from 91 primary school teachers, school LLIN evaluation, May 2015

Results: prevalence of fever and malaria parasites



** Statistically significant (p-value < 0.005). Household level malariometric survey n= 219 children under five years from 800 households*

Results: treatment seeking for children under 5



* Statistically significant (p -value <0.005), household level cross-sectional survey data collected annually Feb 2014, Feb 2015; $n= 754$ children from 800 households

Lessons learnt

- Involving children in malaria prevention and advocacy is critical for maximising gains in malaria control
- School attendance and performance are improved due the fewer malaria incidences, much to the delight of the parents
- Treatment seeking in 24 hours and testing before treating improved, possibly due to the improved knowledge levels of the children through the malaria schools challenge
- The malaria control culture campaign improved performance and attendance in primary schools in Tororo

Acknowledgements

- Comic Relief
- Tororo District Health Team and Local Government
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Thank you

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