



GLOBAL FUND MALARIA NEW FUNDING MODEL (NFM)

SOCIAL MOBILIZATION

**SUMMARY PROGRAMMATIC REPORT OF SOCIAL MOBILIZATION FOR MALARIA
BENUE**

GWER – EAST LGA

DECEMBER, 2015.

SUBMITTED BY: FIRST STEP

TO
ACOMIN

INTRODUCTION

In order to ensure the effective prevention and treatment of malaria at household and community levels, First Step was engaged by ACOMIN to carry out malaria prevention activities working with IPC in Gwer East LGA. The area of focus is to conduct social mobilization and inter-personal communication methodology.

GOAL

- To reduce malaria burden to pre-elimination levels and bring malaria related mortality to zero

OBJECTIVES OF THE PROGRAM

- At least 80% of targeted populations utilize appropriate preventive measures by 2020.
- All persons with suspected malaria who seek care in PHCs are tested with ADT or microscopy by 2020.
- At least 80% of the population practices appropriate malaria prevention and management by 2020.

STATUS OF IPC CONDUCTORS

The IPC Conductors selected to work in Gwer East LGA are residing in the LGA, speak the local dialect fluently. Through training received, the IPC conductors are up to date on malaria prevention and treatment. They were also trained on the use of flip-chart to sensitize community members.

ADVOCACY VISITS

1. Advocacy Visit at the Community level

The IPC conductors continued to conduct advocacy in the remaining 6 communities of the ward. These visits were paid to task collectors and village heads. The purpose was to sensitize community leaders on the project and solicit their support for the success of intervention as it was discovered that working with the leaders enhanced the full participation of community members, also these leaders served as a link between the IPC conductors and their subjects. They made commitments to mobilize the community for the project and were able to also support by creating awareness at their group meetings in the community. A total of 13 (f4, m9) community leaders were reached.

2. Advocacy to Women/Religious Leaders

The IPC conductors visit to Mbabur Mothers Association and religious leaders in Churches. The aim of the visit was to sensitize these groups on this project since it was discovered that women/religious leaders are influential in their respective communities in terms of mobilization and effective dissemination of information and creation of proper awareness during their group meetings.

At the end of the visits, they pledged their support and commitment in mobilizing their members to participate in the intervention and this gave an increase in the number of community members that participated.

A total of 11 (8f, m3) leaders were reached during the visits.

3. Advocacy to Private Patent Medicine Vendors (PPMVs)

The IPC team also paid advocacy visit to PPMVs in the community, this was to inform them on the purpose of the project, to solicit their support for the success of this project by encouraging them to abide by the best practices and not dispensing ACTm at unaffordable prices and also to get a clear understanding of the sale and purchase of ACTm by community members.

They pledged to abide by the best practices in dispensing ACTm's and a follow-up on these PPMVs was made and it was discovered that they kept to their words.

A total number of PPMVs reached were 16 (2f, 14m).

SOCIAL MOBILIZATION ACTIVITIES

HOUSE TO HOUSE IPC

IPC conductors carried out social mobilization from one house to another in the 6 communities. The teams enlightened the household members on malaria prevention and treatment strategies.

During these sessions, IPCs interacted with them on preventive strategies like the use of LLINs and environmental sanitation, also emphasis was laid on pregnant women and children under 5years as they are the most vulnerable group.

Household members also shared their experiences on how they have been treating malaria locally using herbs like *dogon yaro* leaves which they normally boil and drink, they also said that this method was ineffective as they notice that malaria will always re-suffice after sometime.

In their response also, they narrated how they have been using palm-kernel oil (*akeshi*) to treat convulsion during seizures by putting it in victims mouth and rubbing it on his/her body. It was during one of such treatment that a household member Mr. Saulu Kyartar lost his 2year old son. Community member were excited with the enlightenment from IPC team, they well informed now and can access ACTm and mosquito nets unlike before.

A total of 299 HHs (reached a total number of 3651 persons (f1929, m1722)).

GROUP IPC

Group IPC was also conducted to 18 groups (10 associations) and reached a total of 413 (f196, m217).persons.

Participants in these sessions were school children, women groups, vigilante group, pregnant women, women of reproductive age and men. The content of discussion included; utilization of LLINs, the effect of malaria disease as it affects pregnant women, how to prevent malaria using environmental sanitation and the treatment of malaria with ACTm.

The session was interactive and participatory in nature as members demonstrated an increased knowledge of malaria symptoms, transmission and prevention which they explained how malaria affects children as they are always vomit the little they eat, their body is hot and they shiver from cold. They added that pregnant women become weak, suffer miscarriage and give birth to babies with light weight.

They unanimously agreed that with increased knowledge they will now begin accessing LLINs and ACTm as a form of treatment.

STATE SUMMARY								
S#	LGA	NUMBER OF IPC CONDUCTORS	NUMBER OF HOUSEHOLDS REACHED	NUMBER OF SCHOOLS REACHED	NUMBER OF GROUPS REACHED	NUMBER OF COMMUNITY DIALOGUE SESSIONS CONDUCTED	NUMBER OF PERSONS REACHED	
							Male	Female
1.	GWER EAST	4	299	0	18	0	2125	1939
	TOTAL	4	299	0	18	0	4064	

SUCSESSES

1. Mr. Saulu Kyarter a 40year old father 7 from Tyokighir Mbache, narrated how his 2 year old son died while treating convulsion with palm kernel oil during a seizure. In his response he shared and I quote “while I was rubbing *akeshi oil* on my son’s body and putting it in his mouth, he gave up the ghost”. He added that from what he has heard he is convinced that malaria is not associated with witchcraft therefore him and his entire household will begin to use mosquito nets. The IPC team upon follow up discovered that Mr. Saulu’s household members are using nets now and he stated that he purchased them at PHC Usar at the rate of N100.
2. Ahumbe Mercy a 35year old nursing mother who has never used mosquito net was discouraged by her family members with the belief that it’s meant for the dead. She stated that “this my 18month old daughter is always sick unknowing to me its malaria, the last time I treated *akombo udam* (a traditional treatment) but the illness continued”. She assured the Team she will go to PHC Usar and access ACTM and also obtain a mosquito net to prevent subsequent attack by malaria.

CHALLENGES

1. Due to harvesting season, IPC conductors are faced with the challenge of visiting household members in their farms which most times are distant from their houses in a bid to meet target.

RECOMMENDATIONS

1. No recommendations.

LESSONS LEARNT

1. Working with traditional rulers increased full participation of community members.
2. Women and Vigilante groups facilitated effective dissemination of information to community members in their group meetings.

BEST PRACTICES

1. Working with women and vigilante groups supported in disseminating information at the various group meeting.

APPENDIX

PICTURES



IPC Conductor facilitating a session with Vigilante Group



IPC Conductor conducting a session @ Tse Yaor



IPC Conductor conducting a session @ Tyokighir community



IPC Conductor facilitating a session in a farm in Azenda Jimin Mbabur community



IPC Conductor facilitating social mobilization with Mbabur Mothers Association in Abenga Community

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