



GLOBAL FUND MALARIA NEW FUNDING MODEL (NFM)

SOCIAL MOBILIZATION

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

GWER – EAST LGA

JUNE, 2016.

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

First Step has 10 IPC conductors on ground who are indigenes of Gwer-East where we are working. They are familiar with the terrain and people of the area. The IPC conductors who are well trained on malaria prevention and treatment strategies speak TIV and English language fluently.

ADVOCACY VISITS

1. Identification of Ward/Communities

In consultation with the malaria officers at comprehensive Health centre, Aliade/Mbalar ward was selected which record show that most malaria cases in the LGA comes from this ward. The ward also have the highest population density in the LGA.

2. Advocacy Visit at The Community Level

The IPC conductors paid advocacy visits to influential leaders of the selected communities of Tse-yuam, Jato-Udum, Tse-Achioko, Tse-Kyer and Mbabu such leaders include Tax collectors, vigilantes Head, religion leader, Head of women, group/association.

This was to influence their decision to buy into the activities and the need to engage community members and take up the issue of malaria prevention and treatment and become advocate themselves.

They pledge their support and promised to mobilize members for full participation. It was agreed during these visit that house to house IPC sessions will be carried out between 3.00pm to 8.00pm to enhance full participation of community members as most are in their farms during the other times of the day. As a result community member came out in mass during IPC sessions and participated fully.

SOCIAL MOBILIZATION ACTIVITIES

HOUSE TO HOUSE IPC

Sessions were conducted from one house to another by IPC conductors who were in 5 teams. 25 minutes on average were used to conduct a session per house. The sessions were on a general note interactive.

The purpose was to produce or trigger change in attitude or behaviour associated with malaria prevention and treatment per household members. The discussion was centered on the danger and effect of malaria on pregnant women and children that are five years below. They gain an increased knowledge and expressed willingness toward using LLINs and availing themselves at health centre for subsequent treatment on malaria. Most of the household members confirmed that convulsion is a common occurrence in their community and they used to treat it using local medicine eg Palm camel oil.

The total number of households reached in the month of June is 688 with 7809 persons (Male = 3265, Female = 4544)

GROUP IPC

Group IPC was conducted in other interact and increase audience members knowledge about malaria prevention strategies and treatment. The sessions were carried out with gari seller association, Arsenal fans association, St. Mathew ward, wrappers' sellers association etc

This was an interactive session using IPC flip chart to discuss issues of environmental sanitation, use of LLINs and use of ACTm. It was discovered during interaction that most of them use insecticide like novan to control mosquito which one Mrs. Azum confirmed that her two years old son mistakenly drank novan and died.

Wrapper seller association and Arsenal fans association agreed to insert a special agenda tagged 'Malaria' in all their meetings where issue related to malaria will be discussed. They also said that they will encourage all their pregnant members to access IPT. The total number of 30 groups were reached with 978 persons (female 558, m 423)

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.	GW ER EAST	10	688	0	30	0	3688	5102
	TOTAL	10	688	0	30	0	8790	

SUCCESSSES

1. The malaria desk officer CHC Alaide Mrs. Zoho confirmed that more community members now report to the facility for malaria test and treatment than before

CHALLENGES

1. Due to raining session our IPC session sometime disrupted by rain. This had caused us to reschedule most of the session after the rain and at time caused us to finish late at night.

RECOMMENDATIONS

1. No recommendations.

LESSONS LEARNT

1. Working with community agencies like association/group increased full of participation of members and faster dissemination of information.

BEST PRACTICES

1. Working with women groups makes information dissemination easier.
2. Advocacy paid to community leader enhanced community members participants in the IPC sessions.

APPENDIX: PICTURES





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