



Making malaria unacceptable: Harmonizing national messages and partner efforts leads to bigger impact in Tanzania

Innovative Net Use Messaging: Case Study #1

Harmonizing partner efforts and national messaging around malaria behavior change communication (BCC) paid off in mainland Tanzania, where a national coordinated campaign provided context and linkages for all malaria BCC activities. The overarching slogan *Malaria Haikubaliki* (malaria is unacceptable) rallied donors and partners and catalyzed individual, community, and national action against the disease.

BACKGROUND

In 2007, Tanzania began a massive scale-up of malaria prevention and control interventions. The burden of malaria in Tanzania was high, with parasitemia rates over 40 percent in the northern Lake Zone and over 30 percent in the Southern Zone [1]. Net ownership and use were relatively low—39 percent of households owned at least one insecticide-treated net (ITN), 25 percent of individuals had access to a net within their household, and 20 percent of individuals slept under a net the previous night. Formative research indicated that malaria was seen primarily as an unfortunate aspect of everyday life, and that not much could be done about it. The scale-up efforts to improve treatment, prevent malaria in pregnant women, and increase net use aimed to provide the tools and drugs needed to fight malaria, but a comprehensive behavior change communication (BCC) strategy was also needed to ensure that people accessed and used them. Before 2007, BCC activities had been ongoing but were somewhat disjointed, with partners implementing activities on their own under different campaigns. There was a lack of overarching unity in Tanzania's BCC activities.

STRATEGY

The new strategy, catalyzed by the development of Tanzania's Five Year National Malaria Communication Strategy in 2009 was to establish an umbrella logo and

slogan to bring together all malaria BCC activities in Tanzania. This would ensure that every poster, radio spot and partner intervention would be branded with a common visual identity, thereby linking all of the country's malaria control efforts and making them mutually reinforcing.

Population Services International (PSI) was already using a widely recognized logo—a map of Tanzania under a net—and a slogan—*malaria haikubaliki*, which means “malaria is unacceptable.” The slogan fit well with the goals of the National Malaria Control Programme (NMCP) and its partners to catalyze individual, community and national action against the disease. Because the logo and slogan were widely known, the NMCP asked other partners to include them on their materials, and the *Malaria Haikubaliki* campaign was born.

When the umbrella campaign launched in January 2010, the major BCC partners in Tanzania met regularly under the auspices of the NMCP's BCC working group to plan how their individual activities and campaigns could work together to have a greater impact, rather than compete for target audiences' attention. They developed a calendar of activities to ensure the various campaigns flowed together sequentially and reinforced each other's messages.

The logo and slogan were soon ubiquitous. Every material produced after 2009, no matter which partner produced them, carried the slogan and logo—banners, posters, tire covers, training manuals, job aids, TV spots, radio spots and T-shirts. Between 2009 and 2011, two nationwide campaigns to deliver long-lasting insecticide-treated nets, first to every child under five [2], and then to meet universal coverage within all households [3], increased recognition of the logo significantly, along with the national radio activities.



The logo unified all BCC materials, from training manuals to spare tire covers.

The goal of the *Malaria Haikubaliki* campaign was to challenge the social norm that malaria is part of everyday life and that nothing can be done about it. This worked particularly well in the area of net use, where BCC partners aimed to establish regular net use (i.e., every night) as a new norm, and encouraged prompt treatment of fevers, and later, rapid testing of fevers. In 2009 partners filmed moving testimonials (“Two Minutes of Wisdom”) from highly influential national figures about how malaria affected their lives. A former president described the loss of his infant son to malaria and a well-known singer spoke about her friend who put off going to the hospital, until she developed cerebral malaria and died. Each spot, poster and activity ended with a call to action: Malaria is not acceptable and you can do something about it; use your net, go to the nearest health facility, and get treated. Along with these testimonials, numerous radio spots were produced and aired, a children’s radio show was developed, and the mass media was supported by a vast army of community change agents (CCAs) who led radio listening groups, spoke about malaria with women’s groups, community groups and at schools, and made house visits to speak with families one on one. “Mid-media” activities such as mobile video units, entertaining road shows, and screenings of a film about malaria in pregnancy in video “bandas” reinforced the community and national efforts. Advocacy efforts succeeded at engaging the president of Tanzania, who spoke regularly about the importance of fighting malaria and always used the malaria haikubaliki slogan. An evaluation of the CCA

activities in 2012 found that net access within the household and perceived social norms around net use were stronger in areas where there was higher exposure to CCAs, and that CCAs appreciated being part of team and being viewed in their community as malaria experts [4].

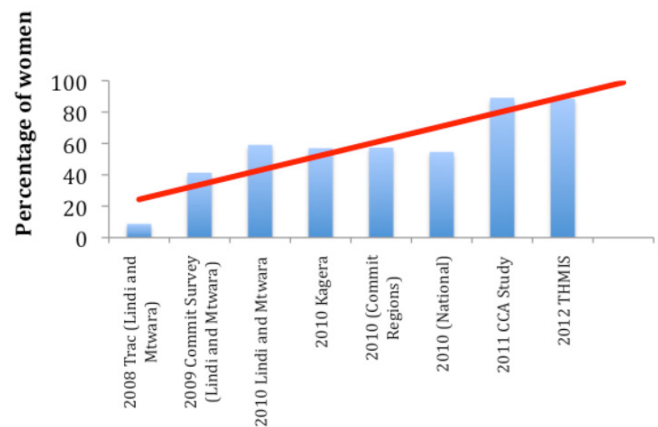
“I thought that malaria was just a simple thing like flu, fever, or a wound. But right now I know what malaria is and its effects. In the past we took malaria as a normal disease; we didn’t know that it was bad. But after the CCA taught us, we now know it’s a dangerous disease.”

- Female, Lindi

MONITORING AND EVALUATION

Recognition of the malaria haikubaliki slogan was tracked over time through the use of omnibus surveys and also in large national and subnational household surveys.

Figure 1. Percentage of women who recalled hearing or seeing the phrase *malaria haikubaliki*, by year



The *malaria haikubaliki* slogan serves as a useful proxy measure for overall exposure to malaria-related messaging because it appears on all malaria-related communication materials, and individuals were expected to see and hear this phrase whenever they were exposed to these messages. As shown in Figure 1, fewer than 10 percent of women surveyed reported seeing or hearing the phrase in 2008, prior to the campaign scale-up. The percentage of women recalling this phrase increased to 40 percent in 2009 and 60

percent in 2010, after the *Malaria Haikubaliki* umbrella campaign was launched. In the recent 2011 subnational Behavior Change Impact Survey, and in the 2011-2012 Tanzania HIV and Malaria Indicator Survey, the percentage of women who had heard or seen *malaria haikubaliki* was nearly universal—nearly 90 percent of all women sampled reported seeing or hearing it. This is on par with recognition of Coca-Cola in Tanzania.

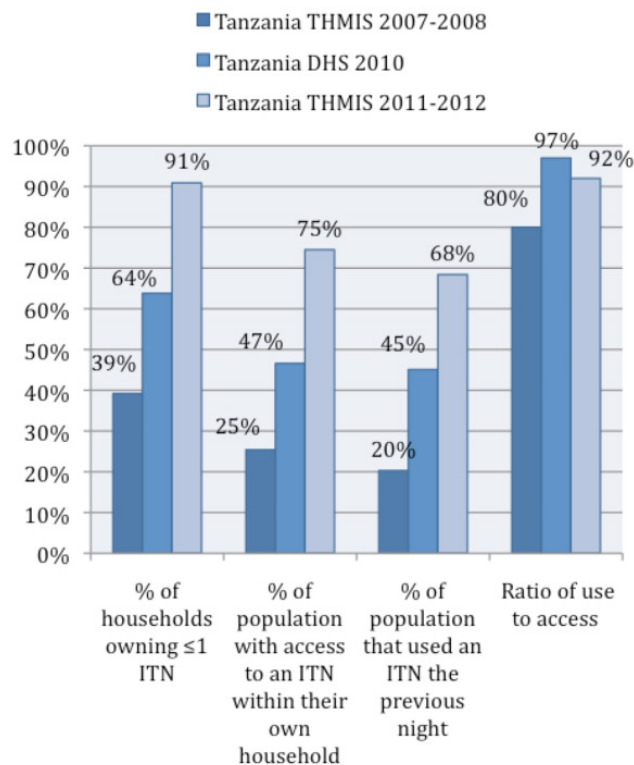
Figure 1 includes samples from varying geographic areas, which complicates the way that the trend is assessed. There were four samples in 2010 that measured exposure to *malaria haikubaliki* across different regions. The proportion of women recalling the phrase was nearly identical across these four samples, suggesting that exposure to the phrase was relatively constant across varying regions of Tanzania.

Reactions to the *Malaria Haikubaliki* activities:

“[My daughter] will convince [me] on mosquito net uses, she will remind me when I have forgotten to fix the net on my bed. She will always remind me on the uses of a net and that malaria is bad disease.”
Female, 40 years old, Mwanza, speaking about the Pata Pata children’s radio show.

Thanks to its massive malaria control efforts, Tanzania saw a dramatic reduction in parasitemia levels among children under age 5 between 2007 and 2012. In Kagera, the region with the highest burden, the percentage of children under age 5 with a positive test decreased from 41 percent to 8 percent [1;5]. In regions in the Southern Zone, parasitemia levels decreased from approximately 30% down to 15 and 20%, and other areas experienced similar declines. Net ownership increased to 64 percent in 2010 (midway through the under age 5 campaign) and 91 percent in 2012, following the universal coverage campaign. Population access to nets rose from 25 percent in 2007 to 47 percent in 2010 and 75 percent in 2012. Net use also increased, rising to 68 percent in 2012. Among the population that had access, net use rose from 80 percent in 2007 to 92 percent in 2012, indicating significant positive changes in the norm of net use during that time period.

Figure 2. Access to and use of insecticide-treated nets in Tanzania, 2007–2012.



Qualitative research in Kagera and Zanzibar—regions where the most significant changes in parasitemia were seen—revealed that while the majority of people continued to use their nets to prevent malaria, a significant portion of them also reported that getting a good night’s sleep was also a key motivator, and that the net protected them from both biting pests and the worries of getting malaria [6]. Many reported that they were now in the habit of using the net and didn’t feel comfortable sleeping without one. BCC messaging is now moving toward promoting use of nets for these non-malaria reasons, to further encourage net use even when the risk of malaria is perceived to be low.

Tanzania’s harmonized efforts, led and coordinated by the NMCP’s BCC working group and strong implementing partners, contributed to improved social norms and increases in net use. The multifaceted campaign allowed for all partners to be recognized for their activities, while maintaining a unified visual identity across all interventions.

LESSONS LEARNED

1. Using a national Malaria Communication Strategy harmonizes BCC partner efforts.
2. Using an umbrella logo and slogan brings focus on the actions and knowledge desired and reinforces messages.
3. Social norms are impacted when people encounter messages and activities at all levels including interpersonal communication, community activities, mass media, community media, and high level advocacy.
4. BCC must be accompanied by accessible malaria commodities and functioning services in order to be effective.
5. Specific messages need to change as the program and the malaria control situation evolve, to keep from becoming outdated and ignored and to respond to new policies, situations and changes in behaviors.

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