

Accelerating the Reduction of Malaria Morbidity and Mortality (ARM3) | BENIN

Behavior Change Communication (BCC)



ARM3 AT A GLANCE

DONOR: USAID/PMI

PERIOD: 2011–2018

PRIMARY OBJECTIVE: To assist the Government of Benin (GOB) to rapidly and significantly reduce both the number of malaria cases and malaria-related mortality, as part of its efforts to bring malaria deaths to zero and eliminate malaria as a public health threat by 2030.

MAIN APPROACH: ARM3 technical experts worked closely with Benin's National Malaria Control Program (NMCP) to intensify malaria interventions and surveillance at all levels, with continuous capacity building including training, coaching and mentoring of NMCP and health-facility staff.

SUSTAINABILITY: The ARM3 methodology was designed for sustainability. In 2014, ARM3 transitioned from an implementing to an advisory role. The NMCP is now fully in charge of malaria interventions.

NATIONAL IMPLEMENTERS: National Malaria Control Program (NMCP) of Benin with technical assistance from Medical Care Development International and other partners.

POPULATION REACHED: Over 11 million—the entire population of Benin—in all 34 health zones.



CHALLENGE

The Government of Benin's malaria strategy sets ambitious targets for the reduction of malaria as a public health threat. These include objectives for community, household, and individual malaria-prevention efforts such as universal use of appropriate bed nets and intermittent preventive treatment (IPTp2) for pregnant women.

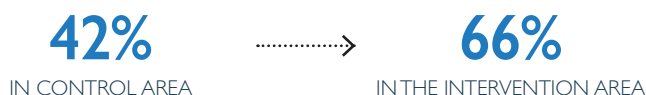
RESPONSE

The project developed intensive health education and social mobilization efforts to encourage citizens to practice malaria prevention and seek early testing and treatment in the case of malaria symptoms.

RESULTS

BCC efforts were evaluated by comparing an area (Ouémé Plateau) that received BCC, with a control area without BCC (Mono Couffo). The results below are based on survey responses of women at health facilities in both areas.

Proportion of pregnant women taking at least two doses of IPTp:



Proportion of women with a child under 5 who reported sleeping under a net the night before:



OVERALL PROJECT RESULTS

The community-based case management system contributed significantly to overall results of ARM3:



ARM3: Behavior Change Communication



CONTEXT

Malaria is endemic throughout Benin.

Among pregnant women and children under five, it is the leading cause of illness and death.

The disease also stunts the economy. The World Bank estimates that Beninese households spend 25 percent of their income on preventing and treating malaria.

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STRATEGY AND METHODS

ARM3 supported ambitious NMCP behavior-change campaigns for malaria prevention and timely treatment.

- **BCC support for national bed net distribution campaigns** in 2014 and 2017. The latter campaign distributed 6.6 million long-lasting insecticidal nets.
- **Message development:** ARM3 assisted the NMCP to revise and validate messages stressing prevention, including using the bed nets, particularly for pregnant women and families with children under five.
- **Mass media:** Radio broadcasts with BCC programming reached close to half the population—approximately 4.5 million. ARM3 supported the NMCP to develop contracts with 15 radio stations for this purpose.
- **Training** of health workers in malaria education:
 - 2,384** doctors, nurses and other staff at health facilities
 - 1,214** community health workers
- **Social mobilization**, including health-education festivals, infotainment, theater performances, public discussions
- **The National Integrated Communication Plan, 2017–2021:** The project helped develop the new plan, which includes calls for participatory planning and messaging, and a national baseline survey of knowledge, attitudes, and practices on malaria.

BCC MESSAGING WITH BED NETS FILLS THE VOID OF INDOOR RESIDUAL SPRAYING

In the northwest Department of Ataora, years of residential spraying ended suddenly in 2017. Predictably, local malaria cases began to rise. The NMCP with ARM3 prepared not only a bed-net distribution campaign, but also an emergency program of BCC — using radio, town criers, theater and other community engagement, as well trainings for health workers, government, community, and religious leaders in malaria education.

Within weeks, case numbers had dropped to levels seen in previous years when spraying was practiced.

