

**RBM SBCC WG MEETING**  
**DAR ES SALAAM, TANZANIA**  
**JULY 11-13, 2017**



SOCIAL AND BEHAVIOR CHANGE  
**COMMUNICATION**  
WORKING GROUP



# BACKGROUND

*On July 11, 2017, the fourth annual meeting of the Roll Back Malaria (RBM) Social and Behavior Change Communication Working Group (SBCC WG) convened in Dar es Salaam, Tanzania.*



The three-day meeting brought together 80 SBCC professionals from 21 countries and more than 33 organizations working in malaria prevention, control and elimination. The participants included international and Tanzanian malaria organizations, implementing partners, private sector organizations and national malaria control or elimination program representatives. The meeting was opened by the Acting Director of Preventive Services from the Tanzania Ministry of Health, Dr. Vida Mmbaga, the Director of the Zanzibar Elimination Program, Dr. Abdullah Ali and the President's Malaria Initiative (PMI) Resident Advisor, George Greer.

The purpose of RBM SBCC WG meetings, consistent with the group's Terms of Reference, is to grow and strengthen a network of malaria professionals who implement evidence-based SBCC at the country level. This face-to-face forum is a rare opportunity for SBCC professionals to speak about emerging issues, share common challenges and highlight successes among their peers.

In 2017, RBM SBCC WG members were invited to submit potential presentations in the following categories: vector control, monitoring and evaluation (M&E), case management, malaria in pregnancy (MiP), and cross-cutting SBCC. Presentations were scored

based on use of formative research, theory, standard indicators (outcome, impact) and process evaluation. The top three to four presentations in each category were selected for oral presentation. Remaining abstracts were invited to present in poster format.

## Annual meeting main objectives:

- Grow the RBM SBCC WG's network and expand the role of SBCC in increasing use and coverage of proven malaria interventions;
- Share SBCC promising practices through technical presentations and discussion;
- Identify and develop working group and task force priorities and activities;
- Advance implementation of the RBM Strategic Framework for Malaria Social and Behavior Change Communication and
- Discuss and approve revisions to the RBM SBCC WG Terms of Reference, the RBM Malaria SBCC Indicator Reference Guide and the RBM Strategic Framework for Malaria SBCC.

The first day of the meeting featured updates from the SBCC WG co-chair Anna McCartney-Melstad, followed by technical presentations on vector control and monitoring and evaluation. The first day also featured presentations on the updates to both the RBM Malaria SBCC Indicator Reference Guide and the RBM Strategic Framework for Malaria SBCC. The second day included technical presentations on vector control and cross-cutting interventions, as well as knowledge café sessions on malaria SBCC resources and tools. The third day consisted of sessions on SBCC for malaria case management and seasonal malaria chemoprevention. The SBCC WG task forces also met to set their agenda for the coming year. Posters were set up each day in common areas for presenters and participants to discuss during coffee and lunch breaks.

# MEETING HIGHLIGHTS AND OUTCOMES

Dr. Greer, PMI (Left); Dr. Mmbaga, MOH (Center); Dr. Ali, ZAMEP (Right)



## Meeting highlights included:

- Presentation and discussion on the updated RBM Strategic Framework for Malaria Social and Behavior Change Communication and the RBM Malaria Social and Behavior Change Communication Indicator Reference Guide
- Development of agendas for the vector control, monitoring and evaluation (M&E), case management, and malaria in pregnancy (MiP) task forces
- Technical presentations on malaria SBCC in sub-Saharan Africa
- Engagement from participants and the broader malaria community on Springboard and on Twitter using the hashtag #MalariaMeeting

## SBCC technical outcomes:

Technical presentations were given by implementing partners in the field and at the global level, as well as representatives from NMCPs, governments, donors and the private sector. Through these presentations, participants gained an understanding of SBCC best practices, lessons learned, challenges and

opportunities, including:

### Vector Control

- Seasonal patterns in insecticide-treated net (ITN) use among those with access
- The impact of SBCC on net use behaviors
- Effectiveness of interpersonal communication (IPC) in curbing resistance to indoor residual spraying (IRS) implementation

### Monitoring and Evaluation

- Harnessing latent demand to create 'viral' SBCC campaigns
- Introduction to and using the RBM SBCC Indicator Reference Guide

### Cross-Cutting

- SBCC strategy development
- Using mass media as a tool for malaria prevention and control

### Local Voices

- Infusing local voices in radio magazine programs to promote community buy-in
- Promoting healthy malaria behaviors through faith leaders

### Case Management

- The role of PPMVs in expanding mRDT use

# PRESENTATIONS

- Improving health worker performance through text messaging
- Determinants of timely treatment seeking for fever

## Seasonal Malaria Chemoprevention

- Exploring factors associated with seasonal acceptability of SMC in different contexts
- The role of SBCC in SMC

## Day One

- Dr. George Greer (PMI, Tanzania)
- Dr. Abdullah Ali (Zanzibar Malaria Elimination Program)
- Dr. Vida Mmbaga (Acting Director of Preventive Services from the Ministry of Health)



Download Day One Presentations

George Greer, PMI Resident Advisor for Tanzania, began the meeting by welcoming the SBCC WG to Tanzania. He shared that this was an opportune time for Tanzania to host the annual meeting, with SBCC continually taking on a more significant role in Tanzania's malaria control program and in Zanzibar's elimination program. Dr. Greer expressed his excitement at the prospect of three days of knowledge exchange amongst SBCC professionals, and then introduced Dr. Abdullah Ali from the Zanzibar Malaria Elimination Program (ZAMEP). Dr. Ali echoed Dr. Greer's comments, stating that SBCC plays a major role in malaria elimination efforts, and urging his colleagues in the room to "make sure that in our countries, SBCC is given its due attention." Dr. Greer then introduced Dr. Vida Mmbaga, Acting Director of Preventive Services at the Ministry of Health and Social Welfare. Dr. Mmbaga delivered prepared remarks before officially opening the meeting.

**SBCC Working Group Update — Facilitated by Anna McCartney-Melstad (Health Communication Capacity Collaborative [HC3]), Andrew Tompsett (PMI, USA)**

Anna McCartney-Melstad, co-chair of the SBCC WG,

Anna McCartney-Melstad, HC3 Nigeria



## Update on 2017 Activities

gave a brief overview of the working group's history and purpose. She noted that this annual meeting is a unique forum for SBCC professionals to meet face-to-face, to hear what other countries are doing, and learn from both their successes and failures. Ms. McCartney-Melstad then reviewed the accomplishments of the past year, including the finalization of the SBCC WG Terms of Reference, as well as revisions to the RBM Malaria Social Behavior Change Communication (SBCC) Indicator Reference Guide and the RBM Strategic Framework for Malaria Social and Behavior Change Communication. She also reviewed the structure of the working group, which includes the four task forces on vector control, monitoring and evaluation, case management, and malaria in pregnancy. Andrew Tompsett, PMI/USAID, then took the podium to announce that the RBM transition was complete, and introduced the new leadership and functioning of the partnership. Following this, Ms. McCartney-Melstad introduced the current leadership of the SBCC WG, and also announced that elections for co-chairs and several steering committee positions would take place in the month following the Annual Meeting.

Dennis Mwambi, PSI Kenya



## Vector Control SBCC

### Vector Control SBCC — Facilitated by RBM Vector Control WG member Hannah Koenker

- Hannah Koenker (VectorWorks, USA)
- Dennis Mwambi (PSI, Kenya)
- Ibrahima Sanoh (NMCP, Guinea)

The first Vector Control SBCC Session included presentations from Hannah Koenker on VectorWorks' research on seasonal trends for ITN use, Dennis Mwambi on PSI Kenya's campaign to increase consistent net use and Ibrahima Sanoh on the Guinean NMCP's campaign regarding transforming rectangular nets into conical. Presentations highlighted the role of net access and risk perception on seasonal net use patterns, and recommended that program managers tailor their strategies around their local data, as trends vary from country to country. Mr. Mwambi encouraged the group to evaluate net use in a way that goes beyond the binary measurement of use vs. nonuse. Ms. Koenker explained that program managers can calculate their national seasonal ITN use by analyzing at least three national survey datasets (e.g., MIS, DHS, MICS), extracting cluster-level use values, running a

regression to see which factors are associated with use: access ratios and identifying significant predictors. During the question and answer period, Ms. Koenker clarified that access to a net is still the most associated factor with use, as shape and color preferences do not significantly drive use.

### Task Force Meetings — Facilitated by RBM SBCC WG Task Force co-chairs:

- Sara Berthe (VectorWorks, USA)
- Ibrahima Sanoh (NMCP, Guinea)
- Jessica Butts (PMI/Centers for Disease Control and Prevention [CDC], USA)
- Angela Acosta (VectorWorks, USA)
- Kwame Gakpey (NMCP, Ghana)
- Wani Lahai (NMCP, Sierra Leone)

The participants then separated into different conference rooms for task force meetings to reflect on the previous year's accomplishments and challenges. At the end of Day One, task force co-chairs shared in plenary what had been discussed in their meetings. All task forces expressed that calls were useful and important to continue, but recognized that significant improvements were necessary. Task forces reported a desire to see more engagement on calls throughout the year, noted that call connectivity was often faulty and that coordination, including call purposes, agendas and interpretation needed to be improved. Looking forward, the Vector Control, Case Management, M&E and MiP Task Forces all shared a similar idea of choosing thematic topics for each call or setting an action plan for the year that would be developed further over the course of the meeting.



## M&E for SBCC

### Monitoring and Evaluation — Facilitated by RBM SBCC WG Steering Committee Member, Jessica Butts (PMI/CDC, USA)

- Matthew Lavoie (Development Media International [DMI], UK)
- Angela Acosta (VectorWorks, USA)
- Jessica Butts (PMI/CDC, USA)

The session on monitoring and evaluation began with a presentation from Matthew Lavoie entitled, “Harnessing latent demand to create ‘viral’ SBCC campaigns, an example from Burkina Faso.” The intervention posed the question, “Are there cost-effective alternatives to mass-media (radio and/or television) SBCC campaigns in regions with low media penetration?” The evaluation of the intervention found that in experimental areas, exposure to short films on mobile devices did improve mother’s knowledge of giving oral rehydration salts to children experiencing diarrhea and treatment-seeking for fever. During the question and answer period at the end of the session, Mr. Lavoie clarified that what made the content “viral” and most appealing was the imagery and that the local language was used to connect with these very rural audiences that didn’t often see content in their own language or dialect. Following this presentation, Jessica Butts, PMI/CDC, and Angela Acosta, VectorWorks, presented the updated Malaria SBCC Indicator Reference Guide to the working group. The guide is a compendium of standardized and recommended indicators that can be used at all stages of a malaria SBCC intervention. This updated version is more user friendly, includes more emphasis on monitoring during implementation, adds health workers as a target audience, and includes indicators for health worker behaviors and guidance for health facility-based data sources.

### Introduction to the RBM Strategic Framework for Malaria SBCC 2017-2030 – Mike Toso (HC3, USA)

The final presentation on Day One was given by Mike Toso (HC3) on the newly updated Strategic Framework for Malaria Social and Behavior Change Communication 2017-2030. He explained that the framework is now a concise, approachable document, in line with global technical guidance. It is intended to be used by NMCP personnel and their implementing partners. Mr. Toso walked the group through the new format of the document, which outlines clear priorities for strengthening country capacity, honing program strategies and sharing best practices. The first section provides guidance on advocacy, describing the importance of ensuring evidence-based SBCC is prioritized by malaria policy makers and implementers. The latter section focuses on technical guidance, including characteristics of effective planning, strategy development and monitoring and evaluation, to ensure SBCC processes in the malaria context are clear.

## Day Two

### Vector Control SBCC — Facilitated by VC Task Force Co-Chairs, Sara Berthe (VectorWorks, USA) and Ibrahima Sanoh (NMCP, Guinea)

- Helen Amegbletor (Africa Indoor Residual Spraying Project [AIRS], Ghana)
- Ababayehu Yilma (CCP, Ethiopia)
- William Ogwal (Communication for Development Foundation Uganda [CDFU], Uganda)



#### Download Day Two Presentations

The second vector control SBCC session featured presentations from Helen Amegbletor on PMI AIRS sub-district level messaging to increase IRS acceptance in Ghana, Ababayehu Yilma on the Johns Hopkins Center for Communication Programs (CCP) Ethiopia’s gender inequality and targeted SBCC campaigns to increase women’s self-efficacy related to LLIN use and finally William Ogwal on the role of interpersonal communication in increasing acceptance of IRS in phase two of the Uganda IRS project. All three projects demonstrated the positive impact that targeted, sub-community level, mixed-media SBCC campaigns can have on vector control efforts. During the question and answer session, the presenters were asked if they had managed to break down community resistance to these vector control methods. Mr. Yilma responded that many of their tools were built to address this very problem and Mr. Ogwal added that working directly with key actors in the community also helped overcome the resistance barrier.

## Edward Adimazoya, FHI 360 Ghana



### Cross-Cutting SBCC

**Cross-Cutting SBCC — Facilitated by RBM SBCC WG M&E Task Force Co-Chair, Angela Acosta (VectorWorks, USA)**

- Fortunate Manjoro (NMCP, Zimbabwe)
- Edward Adimazoya (FHI360, Ghana)

The session on cross-cutting SBCC included a presentation by Fortunate Manjoro on the development process for Zimbabwe's malaria communication strategy. Ms. Manjoro emphasized the participatory nature of the development process and the important role this played in elevating all stakeholders' ownership of the strategy. Edward Adimazoya also presented on the FHI360 Communicate for Health (C4H) project and Ghana Health Service's mass media campaign for malaria prevention and control. The campaign, which utilized television, radio, print and social media, showed that exposure to mass media messaging does not always translate to use, and that mass media campaigns may be more effective if combined with interpersonal communication. When asked about addressing the barriers encountered during the campaign, Mr. Adimazoya said that in addition to IPC, community radio is a useful tool in addressing one of the larger barriers the project faced – misconceptions surrounding ITNs and IPTp.

**Leveraging Local Voices — Facilitated by RBM SBCC WG co-chair, Anna McCartney-Melstad (HC3, Nigeria)**

- Abolade Oladejo (HC3, Nigeria)
- Usman Usman (HC3, Nigeria)
- Anthony Edozieuno (Center for Communication Programs Nigeria [CCPN], Nigeria)

The leveraging local voices session featured presentations from Abolade Oladejo and Usman

Usman on HC3's radio magazine programs focusing on various thematic areas of malaria SBCC, Mr. Oladejo on promoting malaria preventive and care-seeking behaviors amongst faith leaders and Anthony Edozieuno on the role of community volunteers in improving malaria SBCC. Each presentation emphasized the role that different groups within the community can have in promoting malaria behaviors and the sustainable model this community level implementation promotes. The session concluded with a few questions regarding the implementation of the projects. Mr. Edozieuno elaborated on the role of the community volunteers and explained that no incentive was given to volunteers, only travel reimbursements.

**SBCC Knowledge Café – Facilitated by:**

- Nan Lewicky (HC3, USA)
- Mike Toso (HC3, USA)
- Cori Fordham (HC3, USA)
- Priya Parikh (HC3, USA)
- Fortunate Manjoro (NMCP, Zimbabwe)
- Debora Freitas Lopez (Chemonics, USA)
- Angela Acosta (VectorWorks, USA)
- Jessica Butts (PMI/CDC, USA)

The final session on Day Two was a Knowledge Café to highlight useful SBCC resources and tools, and build skills. Participants broke into four groups, divided by geographic region, to facilitate experience sharing amongst neighboring countries. The Knowledge Café was divided into four topic areas, and presenters for each topic rotated between the regional groups.

Mike Toso and Fortunate Manjoro presented on SBCC Strategic Planning. Ms. Manjoro walked through best practices for communication strategy development, using her own experience in Zimbabwe as an example, while Mr. Toso introduced several resources to facilitate strategy development. These resources include the RBM Strategic Framework for Malaria SBCC, HC3's repository of national communication strategies, the SBCC for Malaria in Pregnancy Strategy Development Guidance Implementation Kit, the Promoting Quality Malaria Medicines and Service Provider SBCC Implementation Kit, and HealthCOMPASS How-To Guides.

Jessica Butts and Angela Acosta led a session on SBCC tools for research, monitoring and evaluation, including the updated indicator reference guide, VectorWorks' monitoring and evaluation online training course, the Guide to Developing Monitoring and Evaluation Plans for Malaria SBCC, and the Reporting Guide for Malaria Communication Evaluations.

Debora Freitas Lopez and Cori Fordham presented on tools for expanding the SBCC evidence base. Ms. Freitas Lopez facilitated a session on writing successful abstracts that contribute to the current malaria SBCC evidence. Ms. Fordham then introduced HC3's new Malaria SBCC Evidence Package, an advocacy tool that highlights best practices in malaria SBCC through a comprehensive database, fact sheets, and infographics.

The final topic was led by Nan Lewicky and Priya Parikh, and focused on platforms that SBCC professionals can utilize for knowledge exchange and to find SBCC resources and tools. These platforms included the HC3 project website, which houses the Strategy Design and other topical malaria SBCC I-Kits; the HealthCOMpass, which includes 25 How-To guides for SBCC; the SBCC WG section of the Roll Back Malaria Partnership website, which houses the working group's Terms of Reference, meeting reports and guidance documents; and finally, Springboard, a networking website for SBCC professionals.

## Day Three

**Case Management SBCC — Facilitated by RBM SBCC WG Steering Committee member, Amina Fakir-Knipiler (Sanofi, France)**

- Victor Enangama (HC3, Nigeria)
- Christian Rassi (Malaria Consortium, UK)
- Abdoulaye Diop (Speak Up Africa, Senegal)



[Download Day Three Presentations](#)

The first case management session featured presentations from Victor Enangama on HC3's work expanding mRDT access and use through patent and proprietary medicine vendors (PPMVs) in Nigeria, Christian Rassi on using short message service (SMS) messages to reinforce health worker trainings, and Abdoulaye Diop on the results of Speak Up Africa's Football Combatting Malaria campaign. The presentations highlighted the role of technology to build staff capacity and track program data, as well as the importance of strengthening the skills of those who interact with key populations. During the question and answer period, participants talked about the resources and time required to use SMS reminders, which Mr. Rassi said were minimal (i.e., a dongle and mobile phone access). The group also discussed the need to collect referral data so that programs can properly assess and report their impact.

## Victor Enangama, HC3 Nigeria



## Case Management SBCC

**Case Management SBCC — Facilitated by RBM SBCC WG Steering Committee member, Andrew Tompsett (PMI/USAID, USA)**

- Ababayehu Nigussie (CCP, Ethiopia)
- Victor Enangama (HC3, Nigeria)

The second case management SBCC session featured presentations from Ababayehu Nigussie on the CCP Communication for Health project's baseline research into the determinants of timely treatment seeking for fever for children under five and from Victor Enangama on HC3's trainings with proprietary patent medicine vendors (PPMVs) to combat poor quality malaria medicines on the market in Nigeria. Key determinants to be addressed in SBCC targeting women caregivers include gender empowerment and self-efficacy. Mr. Nigussie explained that these were then addressed in the program implementation stage using radio dramas and social mobilization groups. Mr. Enangama shared preliminary results of the PPMV trainings, which included 69% of PPMVs mentioning at least one method of identifying authentic ACTs.

**Task Force Presentations — Facilitated by RBM SBCC WG Steering Committee member, Andrew Tompsett (PMI/USAID, USA)**

In plenary, representatives for each task force briefly presented the outcomes of their meetings during the previous two days, and outlined their priorities for the upcoming year. Several task forces created an outline for thematic topics for calls over the next several months and discussed what kinds of presentations they would like to see within each topic. At the conclusion of

the session, Andrew Tompsett, encouraged everyone to participate in task force calls and contribute their own work as presentations or topics for discussion during these virtual meetings. He also reminded the working group members that in addition to convening regular meetings, the SBCC WG task forces are open to requests to review programmatic documents or provide other technical expertise.

#### Seasonal Malaria Chemoprevention SBCC — Facilitated by Mike Toso (HC3, USA)

- Harriet Kivumbi (Malaria Consortium, Uganda)
- Tiana Ramanatiaray (NMCP, Madagascar)
- Diego Moroso (Malaria Consortium, Uganda)

The session on seasonal malaria chemoprevention (SMC) included presentations from Harriet Kivumbi on Malaria Consortium’s work exploring the different factors associated with social acceptability of SMC in various countries, Tiana Ramanatiaray on an SBCC SMC campaign that was conducted in Madagascar, and Diego Moroso on ACCESS-SMC’s work in Nigeria. Presentations shared some of the key factors that must be addressed to improve SMC acceptance, such as cultural and religious norms around men (from outside of a family or household) entering households, lack of health knowledge or understanding of malaria burden, and rumors about side effects. Ms. Kivumbi encouraged program managers to integrate the social acceptability conceptual framework in their programs. During the question and answer period, the group discussed the value of interpersonal communication via religious leaders and community members in overcoming cultural barriers and social norms. They also encouraged program managers to incorporate additional malaria prevention and control messaging to sustain and enhance SMC effects.

#### Closing Remarks

The Director of the Tanzanian NMCP, Dr. Ally Mohamed, gave closing remarks. Anna McCartney-Melstad took the podium to thank the many members of the SBCC WG who made the annual meeting possible, celebrated the successes of the meeting, and then brought the fourth annual meeting of the Roll Back Malaria Social and Behavior Change Communication Working Group to a close.

#### Dr. Ally Mohamed, NMCP Tanzania



#### Closing Remarks

# Participant List

Name	Organization	Country
1. Abdoulaye Diop	Speak Up Africa	République du Sénégal
2. Abdullah Ali	Ntnl. Malaria Elimination Prog. of Zanzibar	United Republic of Tanzania
3. Abeabyehu Yima	Center for Comm. Programs Ethiopia	Federal Democratic Republic of Ethiopia
4. Abere Mihretie Yetemegn	Health, Dev. & Anti-Malaria Association	Federal Democratic Republic of Ethiopia
5. Abolade Oladejo	HC3 Nigeria	Federal Republic of Nigeria
6. Aklilu Getinet Desta	Health, Dev. & Anti-Malaria Association	Federal Democratic Republic of Ethiopia
7. Ally Mohamed	National Malaria Control Program	United Republic of Tanzania
8. Amidjee Roumona Raharinoro	Population Services Int. Madagascar	Rép. Démocratique de Madagascar
9. Amina Fakir-Knipiler	Sanofi	France
10. Andrew Tompsett	United States President's Malaria Initiative	United States of America
11. Angela Acosta	VectorWorks	United States of America
12. Anna McCartney-Melstad	HC3 Nigeria	Federal Republic of Nigeria
13. Anthony Edozieuno	Center for Comm. Programs Nigeria	Federal Republic of Nigeria
14. Basil Tushabe	Comm. for Dev. Foundation Uganda	Republic of Uganda
15. Bayissa Urgesa	Center for Comm. Programs Ethiopia	Federal Democratic Republic of Ethiopia
16. Cecilia Fernandes	Unitel	Republica de Angola
17. Cecilia Mhiti	Zimbabwe Assistance Program in Malaria	Republic of Zimbabwe
18. Chilumba Sikombe	MACEPA-PATH	Republic of Zambia
19. Christian Rassi	Malaria Consortium	United Kingdom
20. Clemence Dusingize	National Malaria Control Program	République du Rwanda
21. Corinne Fordham	Health Comm. Capacity Collaborative	United States of America
22. Debora Freitas Lopez	Chemomics International	United States of America
23. Denizia Pinto	Population Services International Angola	Republica de Angola
24. Dennis Mwambi	Population Services International Kenya	Republic of Kenya
25. Deo Ng'wanawsabi	Tanzania Communication and Dev. Center	United Republic of Tanzania
26. Donald Dickerson	United States President's Malaria Initiative	United States of America
27. Edith Nantongo	FHI 360 Uganda	Republic of Uganda
28. Edward Adimazoya	FHI 360 Ghana	Republic of Ghana
29. Elizabeth Chiyende	MACEPA-PATH	Republic of Zambia
30. Ernest Kakoma	National Malaria Elimination Centre	Republic of Zambia
31. Fátima Henriques	National Malaria Control Program	Republica de Angola
32. Fatou Mwaluke	Population Services International Angola	Republica de Angola
33. Ferdinand Ntoya	United States President's Malaria Initiative	République Démocratique du Congo
34. Fortunate Manjoro	National Malaria Control Program	Republic of Zimbabwe
35. Foyeke Oyedokun-Adebago	United States President's Malaria Initiative	United States of America
36. George Greer	United States President's Malaria Initiative	United Republic of Tanzania
37. Gubayneh Telake Ambaw	Health, Dev. & Anti-Malaria Association	Federal Democratic Republic of Ethiopia
38. Hannah Koenker	VectorWorks	United States of America
39. Harriet Kivumbi	Malaria Consortium	Republic of Uganda
40. Helen Amegbletor	Africa Indoor Residual Spraying Project	Republic of Ghana
41. Ibrahima Sanoh	National Malaria Control Program	République de Guinée
42. Itohowo Aquaowo Uko	National Malaria Elimination Programme	Federal Republic of Nigeria
43. Jacqueline Kisia	National Malaria Control Programme	Republic of Kenya
44. Jessica Butts	U.S. President's Malaria Initiative/CDC	United States of America
45. Joe Mugasa	FHI 360 Tanzania	United Republic of Tanzania
46. Justine Samantha Bateta	National Malaria Control Programme	Republic of Uganda
47. Kaendi Munguti	United States President's Malaria Initiative	Republic of Kenya
48. Kassi Manasse N'Guessan	Save the Children Côte d'Ivoire	République du Côte d'Ivoire
49. Keila Novoa	Chemomics International	United States of America
50. Kwame Gakpey	National Malaria Control Programme	Republic of Ghana
51. Lamine Bangoura	United States President's Malaria Initiative	République de Guinée
52. Leah Ndekuka	United States President's Malaria Initiative	République de Burundi
53. Lievin Nsabiyumva	National Malaria Control Program	United Republic of Tanzania

Name	Organization	Country
54. Mabel Naibere	FHI 360 Uganda	Republic of Uganda
55. Mamadou Sitan Keita	Research Triangle International Guinée	République de Guinée
56. Mamadouba Sanoussi Camara	Research Triangle International Guinée	République de Guinée
57. Marie Monique Vololoarinosinjatovo	National Malaria Control Programme	Rép. Démocratique de Madagascar
58. Mariam Nabukenya Wamala	National Malaria Control Programme	Republic of Uganda
59. Mary Hadley	United States President's Malaria Initiative	République de Burundi
60. Mathias Pollock	Population Services International	United States of America
61. Matthew Lavoie	Development Media International	United Kingdom
62. Michael Toso	Health Comm. Capacity Collaborative	United States of America
63. Monné Thérèse Bleu Bomin	National Malaria Control Program	République du Côte d'Ivoire
64. Moumine Medié Armelle	Save the Children Côte d'Ivoire	République du Côte d'Ivoire
65. Mpundu Mwanza	Center for Comm. Programs Zambia	Republic of Zambia
66. Mwinyi Khamis	Zanzibar Malaria Elimination Program	United Republic of Tanzania
67. Nan Lewicky	Health Comm. Capacity Collaborative	United States of America
68. Oulèye Tall Dieng	National Malaria Control Program	République du Sénégal
69. Oluyemi Abodunrin	Center for Comm. Programs Nigeria	Federal Republic of Nigeria
70. Pauline Wamulume	Southern Africa Malaria Elimination Init.	Republic of Zambia
71. Prisca Rwezahura	FHI 360 Tanzania	United Republic of Tanzania
72. Priya Parikh	Health Comm. Capacity Collaborative	United States of America
73. Richard Chola	National Malaria Control Programme	Republic of Malawi
74. Sara Berthe	VectorWorks	United States of America
75. Shelby Cash	U.S. President's Malaria Initiative/CDC	United States of America
76. Taonga Mafuleka	National Malaria Control Programme	Republic of Malawi
77. Tiana Ramanatiaray	National Malaria Control Program	Rép. Démocratique de Madagascar
78. Usman Sabo Usman	HC3 Nigeria	Federal Republic of Nigeria
79. Victor Enangama	HC3 Nigeria	Federal Republic of Nigeria
80. Vida Mmbaga	National Ministry of Health	United Republic of Tanzania
81. Wani Lahai	National Malaria Control Program	Republic of Sierra Leone
82. William Ogwal	Comm. for Dev. Foundation Uganda	Republic of Uganda
83. Zacharie Fotso Fokam	Save the Children Côte d'Ivoire	République du Côte d'Ivoire

# Agenda

Day 1: Tuesday, 11 July 2017		Facilitators/Presenters
8:00-8:30	Registration and Coffee and Tea	
8:30-10:00	Welcome, opening remarks	<p>Presenters:</p> <ul style="list-style-type: none"> <li>RBM SBCC WG Co-Chair, Anna McCartney-Melstad</li> <li>Tanzania MoH Director of Preventive Services, Dr. Mmbaga</li> <li>Zanzibar ZAMEP Program Manager, Dr. Ali</li> <li>PMI/Tanzania Resident Advisor, Dr. Greer</li> </ul> <p>Country Introduction: Nan Lewicky, Mike Toso, RBM SBCC Working Group Secretariat</p>
10:00-10:30	Coffee and Tea (Poster Sessions)	
10:30-11:00	RBM SBCC Working Group update General activities Terms of reference Elections: Steering Committee and Co-Chairs Task Forces Relationship with other RBM working groups	Presenters: Anna McCartney Melstand, RBM SBCC Working Group Co-Chair, Nan Lewicky, RBM SBCC Working Group Secretariat
11:00-12:30	Technical presentations: Vector Control SBCC  Quantifying seasonal patterns of ITN use across climatic zones in Sub-Saharan Africa Impact of SBCC in net use behaviors	Facilitators: Hannah Koenker, RBM Vector Control Working Group (Vector Works)  Presenters: Hannah Koenker (VectorWorks, USA) Dennis Mwambi (PSI, Kenya)
12:30-1:30	Lunch (Poster Sessions)	
1:30-2:15	Task Force meetings: Reflections and accomplishments	Facilitators: RBM SBCC WG Task Force Co-Chairs
2:15-3:30	Technical presentations: Vector Control  Community engagement and SBCC to enhance malaria control Role of gender inequality and self-efficacy in LLIN use among women Effect of IPC on curbing resistance to IRS implementation	Facilitators: Sara Berthe, RBM SBCC WG Vector Control Task Force Co-Chair  Presenters: Helen Amegbletor (Africairs, Ghana) Habtamu Tamene (Johns Hopkins CCP, Ethiopia) Ogwal William (CDFU, Uganda)
3:30-4:15	Coffee and Tea (Poster Sessions)	
4:15-4:30	Introduction and overview of revised <i>RBM Strategic Framework for Malaria SBCC 2017-2025</i>	Presenters: Mike Toso, RBM SBCC Working Group Secretariat (HC3)

4:30-5:00	Wrap-up day 1 and look ahead to day 2 Day 1 summary Day 1 evaluation Day 2 overview Logistics Sign-up for skills building	Facilitator: Kwame Gakpey (Ghana NMCP)
5:00-5:30	Break to Prepare for Opening Reception and Group Photo	
5:00-5:30	<i>Steering Committee Debrief (Steering Committee only)</i>	
5:30-6:30	Opening Reception and Group Photo	

Day 2: Wednesday, 12 July 2017		Facilitators/Presenters
8:00-8:15	Arrival of Participants and Coffee and Tea	
8:15-8:30	Recap Day 1	Facilitator: Donald Dickerson (PMI, USA)
8:30-9:30	Technical Presentations: SBCC Monitoring and Evaluation  Harnessing latent demand to create 'viral' SBCC campaigns Introduction and overview of revised <i>RBM SBCC Indicator Reference Guide</i>	Facilitator: Jessica Butts, RBM SBCC Working Group Steering Committee (PMI/CDC, USA)  Presenters: Matthew Lavoie (DMI, UK) Angela Acosta, RBM SBCC WG Monitoring and Evaluation Task Force Co-Chair (VectorWorks)
9:30-10:15	Coffee and Tea (Poster Sessions)	
10:15-11:30	Technical Presentations: Cross-cutting SBCC  Malaria communication strategy development Using mass media as a tool for malaria prevention and control in Ghana Football combating malaria	Facilitator: Angela Acosta, RBM SBCC WG Monitoring and Evaluation Task Force Co-Chair (VectorWorks)  Presenters: Fortunate Manjoro (NMCP Zimbabwe) Edward Adimazoya (FHI360, Ghana) Abdoulaye Diop (Speak Up Africa, Senegal)
11:30-12:15	Task Force Meetings Priorities and potential activities the next year Potential task force and general call topics	Facilitators: Task Force Co-Chairs
12:15-1:15	Lunch (Poster Sessions)	
1:15-2:45	Technical Presentations: Leveraging Local Voices  Infusing local voices in radio magazine programs to promote community buy-in Using community volunteers to improve SBCC Promoting healthy malaria behaviors through faith leaders	Facilitator: Anna McCartney Melstad, RBM SBCC Working Group Co-Chair (HC3)  Presenters: Bolade Oladejo (HC3, Nigeria) Anthony Edozieuno (CCPN, Nigeria) Abolade Oladejo (HC3, Nigeria)
2:45-3:15	SBCC Knowledge café introduction	Nan Lewicky (HC3, USA)
3:15-3:45	Working Tea – Skills building	
3:45-5:00	Knowledge café: Skills building, SBCC tools and resources	Facilitators: Nan Lewicky, Mike Toso, Cori Fordham, RBM SBCC Working Group Secretariat (HC3) Fortunate Manjoro (NMCP Zimbabwe) Debora Freitas (Chemonics, USA)

5:00-5:15	Wrap-up Day 2 and Look Ahead to Day 3 Day 2 Summary Day 2 Evaluation Day 3 Overview Logistics	Facilitator: Wani Lahai, (NMCP, Sierra Leone)
5:15-5:30	<i>Steering Committee Debrief (Steering Committee only)</i>	

Day 3: Wednesday, 12 July 2017		Facilitators/Presenters
8:00-8:15	Arrival of Participants and Coffee and Tea	
8:15-8:30	Recap Day 2	Facilitator: Ouleye Beye, RBM SBCC Working Group Steering Committee Member (Senegal NMCP)
8:30-10:00	Technical Presentations: Case Management SBCC, part 1  The role of PPMVs in expanding mRDT use Improving health worker performance with SMS IPTp campaign in pregnant women	Facilitator: Amina Fakir-Knipiler, RBM SBCC Steering Committee (Sanofi)  Presenters: Victor Enangama (HC3, Nigeria) Christian Rassi (Malaria Consortium, UK) Boubacar Bocoum (KJK, Mali)
10:00-10:30	Coffee and Tea (Poster Sessions)	
10:30-11:30	Technical Presentations: Case Management SBCC, part 2  Determinants for timely treatment seeking The role of PPMVs in the campaign against poor quality malaria medicine	Facilitator: Andrew Tompsett, RBM SBCC Working Group Steering Committee Members (PMI-USAID)  Presenters: Ababayehu Nigussie Yilma (Johns Hopkins CCP, Ethiopia) Victor Enangama (HC3, Nigeria)
11:30-12:30	Task Force Presentations	Facilitator: Andrew Tompsett, RBM SBCC Working Group Steering Committee Members (PMI-USAID)  Presenters: Task Force Co-Chairs
12:30-1:00	RBM SBCC Working Group Election Logistics Co-Chairs Steering Committee Members Task Force Co-Chairs	Facilitators: Nan Lewicky and Mike Toso, RBM SBCC Working Group Secretariat (HC3)
1:00-2:00	Lunch (Poster Sessions)	
2:00-3:45	Technical Presentations: Seasonal Malaria Chemoprevention  Community perspectives and drivers of SMC acceptance Exploring community response to SMC: factors associated with social acceptability in different contexts Seasonal malaria chemoprevention in children under 15 years Mitigating gender and cultural barriers for a successful SMC campaign	Facilitator: Mike Toso (HC3, USA)  Presenters: Abdoulaye Diop (Speak Up Africa, Senegal) Harriet Kivumbi (Malaria Consortium, Uganda) Tiana Ramanatiaray (NMCP, Madagascar) Diego Moroso (Malaria Consortium, Uganda)
3:45-4:15	Coffee and Tea (Poster Sessions)	

4:15-4:30	RBM SBCC Working Group Going Forward Leadership Goals Next Meeting General Calls Meeting Evaluation	Facilitator: Anna McCartney Melstad, RBM SBCC Working Group Co-Chair (HC3) and Members of the RBM SBCC Working Group Steering Committee
4:30-5:00	Closing	Facilitator: Anna McCartney Melstad, RBM SBCC Working Group Co-Chair (HC3) Dr. Ally, Tanzania NMCP Program Manager  Presenter: TBD, RBM SBCC Working Group Member
5:00-5:30	<i>Debrief (Steering Committee only)</i>	

ROLL BACK MALARIA SOCIAL AND  
BEHAVIOR CHANGE COMMUNICATION  
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