



Social and Behavior Change Communication Working Group

2019 Annual Meeting Report

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The SBCC WG Secretariat is hosted by the Breakthrough ACTION project, based at the Johns Hopkins Center for Communication Programs, and made possible by the generous support of the American people, funded by the U.S. Agency for International Development (USAID) and U.S. President's Malaria Initiative (PMI) under the terms of Cooperative Agreement No. AID-OAA-A-17-00017. The contents of this report are the responsibility of Breakthrough ACTION and do not necessarily reflect the views of the United States Government.

Background

The [Social and Behavior Change Communication Working Group](#) (SBCC WG), consistent with its Terms of Reference, aims to examine the current state of the science and art in social and behavior change communication. The SBCC WG provides a forum to exchange malaria SBCC best practices and experiences; advocate for political, social, and financial resources for SBCC as a core component of malaria control; and promote the development of theory-informed, evidence-based SBC programming at the country level.

The SBCC WG meets once a year to share experiences and best practices, take part in skills-building, and identify priority activities for the coming year. The 6th Annual Meeting of the SBCC WG was held in Maputo, Mozambique from September 10-12, 2019 and included plenary sessions, skills-building sessions, and oral and poster presentations. This face-to-face forum is an important opportunity for SBCC professionals to speak about emerging issues, share common challenges, and highlight successes among their peers.

Meeting Highlights

1. The objectives of the 2019 meeting were to:
 - Identify priority activities for the working group to address the needs of the malaria SBCC communities in 2020;
 - Share experiences, network with colleagues, and learn from one another; and
 - Build skills in SBCC.
2. Participants numbered more than 120, representing more than 28 countries.
3. More than 40 posters from National Malaria Control Programs (NMCPs) and implementing partners were presented on best practices and research findings related to malaria SBCC.
4. The working group decided on a new priority activity, and defined next steps for two continuing activities from 2019:
 - *New:* Guidance on social and behavior change (SBC) strategies across different malaria transmission settings.
 - *Continuing:* An optional module on malaria SBC for the Malaria Indicator Survey (MIS)/Demographic Health Survey (DHS).
 - *Continuing:* A package of training tools and resources to support the malaria SBCC aspects of community health worker (CHW) activities.



Member Engagement

There are three channels for SBCC WG members to connect with each other and stay abreast of updates:

- [Subscribe](#) to the SBCC WG email listserv
- Become a member of the working group's page on Springboard: <https://springboardforsbc.org/topics/7020/home>
- Visit the RBM SBCC WG website: <https://endmalaria.org/our-work/working-groups/social-and-behaviour-change-communication>

Day One: Setting the Stage and Identifying Priorities

September 10, 2019

Welcome Remarks

- United States Agency for International Development (USAID) Mozambique
- Mozambique National Malaria Control Program

The meeting opened with introductory remarks from guests of honor, Jennifer Adams, Mission Director for USAID Mozambique, and Baltazar Candrinho, Director of the Mozambique NMCP.



Dr. Adams welcomed participants to Maputo, sharing her excitement that Mozambique was hosting this year's SBCC WG meeting, as the country renews its commitment to eliminate malaria and leads the region as one of eleven countries mobilizing to transition from high malaria burden to high impact. Dr. Adams spoke about the importance of meetings such as this, where diverse malaria partners come together to share skills in design,

implementation, and evaluation, and emphasized the great need for elevating evidence for social and behavior change programs. She concluded by wishing the participants a productive and successful meeting.

"As you all know better than most, although malaria is both preventable and treatable, these interventions depend on scaling up human behavior."

- Dr. Jennifer Adams

Dr. Candrinho welcomed participants to Mozambique and expressed his excitement for the knowledge sharing that would take place amongst this group of SBCC experts in the coming days. He also stressed the need to advocate for SBCC to ensure that the malaria community maintains or increases investments in behavior change. Dr. Candrinho shared examples of how Mozambique has successfully mobilized volunteers and religious leaders in malaria behavior change efforts and concluded by emphasizing the important role that SBCC has and will continue to play in ensuring that gains in malaria control and elimination are sustained.



"We distribute [bed nets] and then within a year, the net is damaged. We need to protect our investments in SBCC... we know we cannot achieve our malaria goals without SBCC."

- Dr. Baltazar Candrinho

Morning Plenary

- Remarks from Co-Chairs
- Steering Committee Reflections
- Updates from RBM Partnership to End Malaria
- Malaria Matchbox Tool: An Equity Assessment Tool to Improve the Effectiveness of Malaria Programs (Global Fund & RBM Partnership to End Malaria)

[Download Day One Presentations](#)



SBCC WG Co-Chairs, Anna McCartney-Melstad and Guda Alemayehu, welcomed participants to this sixth annual meeting of the working group and led participants in a round of introductions by country. Following introductions, the Co-Chairs invited the Steering Committee to provide a summary of the SBCC WG's key achievements and their perspective on the road ahead for the SBCC WG.

The Steering Committee noted the SBCC WG's successes, including:

- New virtual platform for quarterly WG calls;
- Increased efforts to engage Francophone participants;
- Increased participation in quarterly calls and the annual meeting; and
- Progress on the working group's deliverables (the SBC module for MIS/DHS surveys and the CHW malaria SBCC package).



The Steering Committee noted that in the coming year, the development of the CHW guidance will continue to be a key deliverable for the group, and over the course of this meeting, members would be asked to identify additional activities to add to the SBCC WG work plan for the year.

Maria Schiavo, Strategic Communications Analyst at the RBM Partnership to End Malaria Secretariat, provided updates from the RBM Partnership to End Malaria, including a review of successful events celebrating the 20th anniversary of the Partnership and World Malaria Day, changes in RBM Partnership leadership, and the launch of the 2018 World Malaria Report. She also discussed the RBM Partnership's continuing work with Global Fund management, including efforts to launch the Zero Malaria Starts with Me Campaign in several countries over the next year, in addition to the nine countries that have already launched these campaigns.

Following the RBM Partnership updates, Denise Njama-Meya and Magda Lourdes Lopes Queta, consultants for the RBM Partnership to End Malaria, presented on the Malaria Matchbox Tool. The objective of the tool is to identify areas/populations with barriers to malaria and primary health care services through a qualitative analytical framework; assess equity through the prompt evaluation of programmatic approaches to service delivery to enhance inclusivity; and promote the provision of equitable, integrated and people-centered services. The presentation included an overview of the key audiences and principles of the toolkit, the implementation and methodology, and a case study on the implementation of the toolkit in Guinea Bissau and associated findings and recommendations.

Afternoon Plenary

- Country presentations

The afternoon plenary session began with country malaria programs presentations from Mozambique and Côte d'Ivoire.

- Sergio Tsabete, NMCP Mozambique, presented on the NMCP’s current malaria SBCC efforts, as outlined in the country’s Malaria Strategic Plan 2017-2022, and best practices learned from their advocacy and coordination efforts with partners across the country.
- Dr. M. Thérèse Bleu Bomin, NMCP Côte d’Ivoire, presented on the methodology and results of the recent Malaria Behavior Survey conducted by the NMCP and Breakthrough ACTION with support from USAID/PMI, which provided the NMCP with data on ideational drivers of behavior to inform their SBC programming.

Afternoon Breakout Sessions

- Setting Priorities for the SBCC WG in 2020

The remainder of day one was spent discussing priorities for the working group in the coming year in breakout sessions. As noted during the morning session, an SBC module for MIS/DHS surveys (activity adopted by the working group during the 2018 meeting), is nearly complete. As such, working group leadership was amenable to taking on one additional activity for the 2019-2020 work plan year, in addition to the continuing efforts on the CHW malaria SBCC package.

To ensure that a breadth of activity ideas were considered, the working group leadership facilitated four breakout sessions, each based on priority thematic areas that the membership had identified previously:

- SBC agenda for case management
- SBC agenda for malaria in pregnancy
- SBC strategies for varied malaria transmission settings
- Malaria SBCC package for CHWs

In the breakout sessions, participants were asked to share their current work and/or needs in this area and potential relevance to other countries or partners. Following this initial discussion, participants brainstormed potential activities for the working group 2019-2020 work plan, along with any relevant resources or partners that could contribute to the activity. The breakout group that met to discuss the malaria SBCC package for CHWs reviewed the progress made and defined next steps for the workstream. Following the breakout sessions, the Steering Committee reviewed the prioritized ideas for new activities from the membership and narrowed down the list to four potential activities.



Day Two: Skills-building Sessions

September 11, 2019

Morning Plenary

- Debrief on Setting Priorities for the SBCC WG in 2020

[Download Day Two Presentations](#)



The SBCC WG annual meeting participants reconvened in plenary on day two to continue the discussion of priority activities for the working group. Facilitators from each breakout session held the day before shared brief summaries of the discussions and the top activity ideas their groups had identified for the working group to consider. Potential activities were narrowed down to the following:

- Work with the RBM Malaria in Pregnancy Working Group (MIP WG) to conduct a literature review on promising practices to increasing ANC visits towards the new WHO recommendation of eight contacts
- Develop a how-to guide for malaria SBC strategies in stratified settings (according to malaria transmission zones)
- Improve provider adherence to guidelines by identifying factors affecting their behavior
- Improve provider adherence to guidelines by identifying promising interventions (beyond training and job aids)

Later in the day, all meeting participants were given the opportunity to vote on one of these activities. Results of the poll were presented to the group on day three.

Skills-building Sessions

For the remainder of the second day of the meeting, participants were offered the opportunity to attend two of four skills-building sessions:



Developing Three-Year ITN SBCC Strategies:

During this session, participants used a “360° net life cycle approach” to explore the SBCC considerations that must be taken into account for the entire life cycle of a net, including ITN acquisition, care, access, and seasonality. This approach allows SBCC specialists and malaria program managers to create more impactful SBCC programs that promote net acquisition, use, and care practices that better align with the life cycle of

ITNs within households. Following an introduction to the approach and the SBC for ITNs Toolkit, small groups participated in a practical exercise based on scenarios inspired by real countries to prioritize key messages to inform a three-year ITN SBCC strategy.

Research Tools & Methods in Human-Centered Design (HCD): This session took an in-depth look at the first phase of the HCD process, focusing on how to conduct formative research in order to obtain useful and relevant insights for SBC program design. Participants were introduced to different methodologies that one can utilize in an HCD process, including card-sorting, key-informant interviews, shadowing, focus groups and debates, and contextual inquiry. Following the introduction, participants practiced conducting a qualitative interview for a sample research question with a partner using the card-sorting tool. Following this practice, participants were tasked with creating their own qualitative inquiry tool to better understand “the rumors, misconceptions, and myths regarding malaria in a rural community in northern Mozambique.”

Outcome Monitoring 101: In this session, participants learned about outcome monitoring activities for malaria SBCC programs. They gained familiarity with key outcome monitoring indicators and data sources and learned the difference between process monitoring, outcome monitoring, and program evaluation. Participants then broke into small groups to practice starting at the beginning to develop a logic framework for a malaria control program/project, and subsequently create performance indicator reference sheets (PIRS) to define at least one outcome indicator.



Costing of Malaria SBCC Interventions: During the session, participants learned about why high-quality costing is important to malaria SBCC implementers and funders; and how to use malaria SBCC costing data for budgeting and planning. The workshop introduced participants to existing resources and materials to help them in costing and budgeting, including the Breakthrough RESEARCH SBC Costing Guidelines. Following the introduction, participants had the opportunity to apply these guidelines in small groups by analyzing cost considerations for illustrative SBCC activities, including interpersonal communication, mass media, and provider training.

Day Three: Defining Activities for 2019

September 12, 2019

Morning Plenary

[Download Day Three Presentations](#)



- Country Presentations

On the third day of the meeting, technical presentations from several countries gave participants the opportunity to learn from the experiences of colleagues in Guyana, Angola, Nigeria, Ethiopia, and Guinea:

- Dr. Helen Imhoff, Guyana, National Malaria Program – shared the methodology and results of a human-centered design approach to develop innovative SBCC interventions for malaria testing and treatment in mining camps in extremely remote areas of Guyana.
- João Lino Rafael, Angola, J.C. Flowers Foundation – presented on their SBCC and community engagement efforts to increase practice of preventative behaviors for malaria – including ITN use and prompt testing and treatment for malaria – in communities where cross-border malaria cases are an important problem.
- Adaolisa Ezechukwu, Nigeria, National Malaria Elimination Programme – shared the experience and lessons learned in creating an advocacy communication and social mobilization (ACSM) sub-committee within the malaria program and its importance for SBC coordination.
- Dr. Zewdie Birhanu, Ethiopia, Jimma Univeristy – presented the methodology and results of an SBCC intervention focusing on using school communities, both students and teachers, as agents of change for household malaria knowledge, attitudes and practices.
- Dr. Mariam Gobicko Diallo, Guinea StopPalu+/RTI – presented on the methodology and lessons learned from the project’s training of trainers initiative with imams, which enabled local religious leaders to provide information on malaria prevention and treatment to their communities in a manner that harmonized messages with radio and TV campaigns.



Afternoon Breakout Sessions

- Next Steps for SBCC WG Priorities in 2020

The final sessions of the annual meeting were focused on setting the SBCC WG’s agenda for the coming year. In plenary, SBCC WG leadership announced that the selected activity from the previous day’s voting was the “how-to guide for developing malaria SBC strategies in stratified settings (according to malaria transmission zones).” Following this announcement, the participants attended one of three breakout sessions, where they were responsible for defining next steps or otherwise providing feedback on a working group deliverable:

- Malaria SBCC package for CHWs
- Malaria SBC Module for MIS/DHS
- How-to guide for developing malaria SBC strategies in stratified settings (according to malaria transmission zones)

Afternoon Plenary

- Debrief on Next Steps for SBCC WG Priorities in 2020

Following breakout sessions, facilitators from each group presented in plenary on the discussions of the group and next steps.

Malaria SBCC package for CHWs



During the breakout session on day one of the meeting, this group reviewed and provided feedback on the high-level outline for this guidance document. On day three, participants split into four sub-groups that were each assigned a different section of the outline and asked to provide a detailed list of the content that should be included in that section. This information was collected by the facilitators, who will compile the information and then determine next steps for drafting the content of each

section. For more information, contact Debora Freitas-Lopez (dfreitas@urc-chs.com) or Shelby Cash (nfr9@cdc.gov).

Malaria SBC Module for MIS/DHS

As the SBC module has been conditionally approved by the MIS/DHS, this group dedicated the breakout session time to pre-testing the draft tables that would result from use of the SBC module. These draft tables were provided by the MIS/DHS program. In small groups, participants reviewed the tables and noted how the results shown would be useful to programs as well as features of the tables that were unclear, making suggestions for improvement. As a

next step, the facilitators will compile the feedback from the breakout session and share it with the appropriate staff at the MIS/DHS. For more information, contact Angela Acosta (aacosta4@jhu.edu).

[How-to Guide for Developing SBC Strategies in Stratified Settings](#)

In this breakout session, participants first defined what the activity needed to achieve. The group determined that this product could build on the SBCC strategy development template that is currently being finalized as an annex to the Strategic Framework for Malaria SBCC. In order to correctly adapt that template for stratified settings and provide the guidance needed for a how-to guide however, the group identified the need to collect experiences and best practices from various countries as the first step. The group agreed to begin by hosting calls or virtual meetings with representatives from countries with SBC strategies at various stages of malaria control and elimination. Following these background calls, the group would further define the content and structure of the guide, potentially using the country examples as case studies. For more information, contact Donald Dickerson (dodickerson@usaid.gov).

Closing Remarks

Prior to the close of the sixth annual meeting, the SBCC WG Secretariat shared information regarding the upcoming elections for both Co-Chair seats and several Steering Committee seats. Leadership elections will be held in the coming months. The Secretariat also mentioned that some changes to the Terms of Reference would be made and submitted to the Partnership for review. These changes include adding additional details about the election process, and changing the working group name to the RBM Social and Behavior Change Working Group – dropping the word “communication” to help clarify the working group’s mandate from that of other groups within the RBM Partnership. The Steering Committee members then thanked the out-going Co-Chairs, Guda Alemayehu and Anna McCartney-Melstad, for their four years of service and acknowledged the growth and many successes of the working group under their leadership. Finally, the Co-Chairs thanked all members for their participation and called the annual meeting to a close.



[Download 2019 Meeting Photos](#)



Next Steps

- Steering Committee members will reach out to individuals from their respective breakout sessions regarding next steps for the SBCC WG's 2020 activities:
 - Shelby Cash and Debora Frietas-Lopez for the malaria SBCC package for CHWs
 - Donald Dickerson for the how-to guide for SBC strategies in stratified settings
- The Secretariat will hold elections for two open Co-Chair positions and five open Steering Committee positions, pending approval of the working group's revised Terms of Reference by the RBM Secretariat
- The Steering Committee will continue to engage with RBM leadership, other working groups, and the partner committees for coordination and collaboration
- The Secretariat and Steering Committee will share information about the upcoming International SBCC Summit in Marrakesh (March 30-April 3, 2020), and will look into opportunities for the SBCC WG to host an auxiliary event.
- Quarterly general calls will continue to be planned by the Steering Committee with logistics support from the Secretariat
- All WG members are encouraged to join and post on [Springboard for SBC](#) as the primary engagement platform for members during the year
- The Secretariat will continue to build the WG's presence on [Springboard for SBC](#) and the [RBM Partnership website](#)
- The Secretariat will summarize evaluation feedback from the meeting participants and present it to the Steering Committee to inform planning for future meetings

Annex 1: 2019 Steering Committee

Co-Chairs

Anna McCartney-Melstad, Co-Chair	Johns Hopkins Center for Communication Programs, USA
Guda Alemayehu, Co-Chair	U.S. Agency for International Development, Ethiopia

Steering Committee Members

Amina Fakir-Knipiler	Independent Consultant, France
Andrew Tompsett	Population Services International, USA
Angela Acosta	Center for Communication Programs, USA
Debora Freitas Lopez	URC-CHS, USA
Donald Dickerson	U.S. President's Malaria Initiative, USAID, USA
Ernest Kakoma	Ministry of Health, Zambia
Mariam Nabukenya Wamala	Ministry of Health, Uganda
Shelby Cash	U.S. President's Malaria Initiative, CDC, USA

Annex 2: Participant List

	Name	Affiliation	Country
1	Abuchahama Saifodine	USAID/PMI	Mozambique
2	Adaolisa Ezechukwu	NMEP	Nigeria
3	Alcino Banha	Ministério da Saúde	Angola
4	Amu Mudenda	NMEC	Zambia
5	Andritiana Tsarafihavy	Management Sciences for Health/ ACCESS Health Program	Madagascar
6	Angela Acosta	Johns Hopkins Center for Communication Programs	USA
7	Angela Ng'etich	PS Kenya	Kenya
8	Anna McCartney-Melstad	Johns Hopkins Center for Communication Programs	Cote d'Ivoire
9	April Monroe	Johns Hopkins Center for Communication Programs	USA
10	Avery Avrakotos	USAID/PMI	USA
11	Baltazar Candrinho	Ministry of Health	Mozambique
12	Benjatiana Ruffin Andriamanga	PNLP	Madagascar
13	Bhaunis François Xavier Bogui	PNLP	Côte d'Ivoire
14	Bolanle Olapeju	Johns Hopkins Center for Communication Programs	USA
15	Bridget Higginbotham	USAID/PMI	USA
16	Carlos Miguel Vilanculos	Programa Inter-Religioso Contra a Malaria - PIRCOM	Mozambique
17	Carrie Ferguson	Lubombo Spatial Development Initiative 2 LSDI2	South Africa
18	Chilumba Sikombe	PATH	Zambia
19	Cori Fordham	Johns Hopkins Center for Communication Programs	USA
20	Daniel Somah	NMCP	Liberia

21	Daniel Eninu	PMI Vectorlink Project	Uganda
22	David Ana Constancia	Fundação Wiwanana	Mozambique
23	David Dadi	Center for Communication Programs	Tanzania
24	David Ochieng	Malaria Consortium	Uganda
25	Debora Freitas Lopez	URC-CHS	USA
26	Denise Njama Meya	RBM Partnership to End Malaria Consultant	Uganda
27	Donald Dickerson	USAID/PMI	USA
28	Elizabeth Chiyende	PMI/PAMO- PATH	Zambia
29	Emma Pomfret	Malaria No More UK	United Kingdom
30	Esther Tallah	MC-CCAM	Cameroon
31	Felisberto Massingue	Johns Hopkins Center for Communication Programs	Mozambique
32	Ferdinand Ntoya	USAID-PMI	Congo, Dem. Rep.
33	Fernando Bambo	World Vision Mozambique	Mozambique
34	Gabisile Nhlengethwa	National Malaria Programme	Swaziland
35	Gabrielle Hunter	Johns Hopkins Center for Communication Programs	USA
36	Gabrielle Razafitahiana	Direction de la Promotion de la Santé	Madagascar
37	Guda Alemayehu Gebru	USAID	Ethiopia
38	Helen Imhoff	Ministry of Public Health	Guyana
39	Hunter Harig	Johns Hopkins Center for Communication Programs	USA
40	Hunter Lengel Isgrig	PATH	USA
41	Ibrahima Sanoh	PNLP	Guinea
42	Jacqueline Kisia	MoH-DMCP	Kenya

43	James Mwangi	PS Kenya	Kenya
44	Jemima Andriamihamina	USAID	Madagascar
45	Jennifer Adams	USAID	Mozambique
46	Jeremiah Ongwara	MoH/ Kisumu County Govt.	Kenya
47	João Lino Rafael	Isdell:Flowers Cross Border Malaria Initiative	Angola
48	João Baptista Nelo	Isdell:Flowers Cross Border Malaria Initiative	Angola
49	Joann Simpson	Breakthrough ACTION Guyana	Guyana
50	Joel Kisubi	USAID-PMI	Uganda
51	Joseth Rita Fernandes Sousa	Ministério da Saúde	Angola
52	John Hafu Sande	NMCP	Malawi
53	Judith Hedje	CDC/PMI	Cameroon
54	Keila Novoa	Chemonics International Inc.	USA
55	Konan Fulgence Kouadio	ASAPSU/Save the Children International	Côte d'Ivoire
56	Kouassi Clement Joel Koffi	Save the Children	Côte d'Ivoire
57	Leah Moriarty	CDC/PMI	USA
58	Leonora Rafael	Ministry of Health	Mozambique
59	Lori Bollinger	Avenir Health	USA
60	Lyndsey Mitchum	Johns Hopkins Center for Communication Programs	USA
61	Magda Lurdes Lopes Queta	Independent Consultant - HR	Guinea-Bissau
62	Mamadouba Sanoussi Camara	Stop Palu+	Guinea-Bissau
63	Maria Cidia Monteiro	Programa Inter-Religioso Contra a Malaria - PIRCOM	Mozambique
64	Maria Isabel Sandoval Ayala	ThinkPlace	USA

65	Maria Schiavo	RBM Partnership to End Malaria	Switzerland
66	Mariam Nabukenya	Ministry of Health	Uganda
67	Mariama Gobicko Diallo	RTI/Stop Palu+	Guinea
68	Mariama Mamadou	National Malaria Program	Niger
69	Mario Mame	FHI 360	Malawi
70	Mary Warsh	PMI Impact Malaria/PSI	USA
71	Maryvonne A. Agbettah	USAID/PMI	Ghana
72	Mathew Okoh	Breakthrough ACTION Nigeria	Nigeria
73	Mavuto Thomas	Ministry of Health and Population	Malawi
74	Mialy Noroarisanjy	PMI Vectorlink Project/Abt associates	Madagascar
75	Michael Toso	Johns Hopkins Center for Communication Programs	USA
76	Monne Bomin Therese Bleu	PNLP	Côte d'Ivoire
77	Mory Camara	PNLP	Mali
78	Mpundu Mwanza	Breakthrough ACTION Zambia	Zambia
79	Musa Kimbowa	FHI 360	Uganda
80	Mwinyi Khamis	Zanzibar Malaria Elimination Program	Tanzania
81	Naomi Serbantez	USAID	Tanzania
82	Nathalie Faranirina Randriamanga	PSI	Madagascar
83	Ouleye Tall Dieng	NMCP	Senegal
84	Oumarou Ngambe	PNLP	Cameroon
85	Patrick Devos	Johns Hopkins Center for Communication Programs	Mozambique
86	Paul C. Hewett	Population Council - Breakthrough RESEARCH	USA

87	Piera Fogliati	Doctors with Africa CUAMM	Mozambique
88	Pierre Balamou	USAID	Guinea
89	Priya Parikh	Johns Hopkins Center for Communication Programs	USA
90	Randimbiarison Andrianambinintsoa	ASOS/ACCESS Health Program	Madagascar
91	Rebecca Babirye	Program for Accessible Health Communication and Education Affiliated to	Uganda
92	Richard Kpabitey	Center for Communication Programs	Ghana
93	Rohan Doherty	ThinkPlace	USA
94	Rose Zulliger	USAID/PMI	Mozambique
95	Roshantha Dhanai	Lubombo Spatial Development Initiative 2 LSDI2	South Africa
96	Rukia Nakamatte	Ministry of Health	Uganda
97	Sani Mareye	Save the Children	Niger
98	Sara Berthe	Johns Hopkins Center for Communication Programs	DRC
99	Sean Blaufuss	Johns Hopkins Center for Communication Programs	USA
100	Sergio Mahumane	Programa Inter-Religioso Contra a Malaria - PIRCOM	Mozambique
101	Sergio Tsabete	Ministry of Health	Mozambique
102	Shelby Cash	Centers from Disease Control and Prevention - PMI Team	USA
103	Sozinho Guerra	Johns Hopkins Center for Communication Programs	Mozambique
104	Tamara Boschung	MMV	Switzerland
105	Tanoh Antoine Kouame	Breakthrough ACTION	Côte d'Ivoire
106	Taonga Mafuleka	NMCP	Malawi
107	Temitope Ogunbi	Breakthrough ACTION Nigeria	Nigeria

108	Tiana Ramanatiaray	PNLP	Madagascar
109	Tolbert Chipire	Lubombo Spatial Development Initiative 2 LSDI2	Mozambique
110	TrishAnn Davis	Johns Hopkins Center for Communication Programs	USA
111	Uliane Appolinario	The Global Fund to Fight AIDS, Tuberculosis and Malaria	Switzerland
112	Umu Hawa Jalloh	Johns Hopkins Center for Communication Programs	Sierra Leone
113	Victor Muchanga	Programa Inter-Religioso Contra a Malaria - PIRCOM	Mozambique
114	Victor Mushi	FHI 360	Tanzania
115	Wani Lahai	NMCP	Sierra Leone
116	William Ogwal	PMI Vectorlink Project	Uganda
117	Wilfred Mbacham	The Malaria Consortium-Cameroon Coalition Against Malaria	Cameroon
118	Yannick Nkoumou	BSPH	Cameroon
119	Yapo Jacob Agnima	Save the Children	Côte d'Ivoire
120	Zewdie Birhanu Koricha	Jimma University	Ethiopia
121	Ana Constança David	Medicos com Africa	Mozambique
122	João Mota	DMI	Mozambique
123	Flávio Wate	USAID	Mozambique
124	Honório Samucene	FHI 360	Mozambique
125	Manuel Ngovene	USAID	Mozambique

Annex 3: Agenda

RBM SBCC WG 6th Annual Meeting | September 10-12, 2019

Radisson Blu Hotel | 141 Av. Marginal | Maputo, Mozambique

Day One		
Tuesday, Sept 10th from 7:45am - 7:30pm		
Time	Sessions	Location
7:45	Registration opens	Pre-function area
Morning sessions 8:30 - 12:00	<ul style="list-style-type: none"> Welcome remarks SBCC WG Steering Committee Reflections RBM Partnership Updates Introduction to the Malaria Matchbox 	Plenary room
12:00	Lunch	
Afternoon sessions 1:00 - 5:00	<ul style="list-style-type: none"> Plenary presentations from countries Poster viewing session Setting Priorities for the SBCC WG in 2020 Daily wrap-up Group photo 	Plenary room and poster gallery
6:30 - 7:30	Welcome networking reception	Reception area I

Day Two		
Wednesday, Sept 11th from 8:15am - 5:00pm		
Time	Session	Location
8:15	Sign-in at registration	Pre-function area
Morning sessions 8:30 - 9:30	<ul style="list-style-type: none"> Setting Priorities for the SBCC WG in 2020: Recap of day one discussions Introduction to skills-building sessions 	Plenary room
Morning skills-building sessions 9:30 - 12:00	Concurrent sessions: Participants can attend 1 of the 4 offered sessions <ol style="list-style-type: none"> Discovery research for Human Centered Design Outcome monitoring for malaria SBC 	Breakout rooms

	<ol style="list-style-type: none"> 3. Developing ITN SBCC strategies for the “3-year net life cycle” 4. Costing for malaria SBC 	
12:00	Lunch	
Afternoon sessions 1:00 - 2:15	Poster viewing session	Poster gallery
Afternoon skills-building sessions 2:15 - 4:45	<p>Concurrent sessions: Participants can attend 1 of the 4 offered sessions</p> <ol style="list-style-type: none"> 1. Discovery research for Human Centered Design 2. Outcome monitoring for malaria SBC 3. Developing ITN SBCC strategies for the “3-year net life cycle” 4. Costing for malaria SBC 	Breakout rooms
4:45 - 5:00	Daily wrap-up	Plenary room

Day Three Thursday, Sept 12th from 8:15am - 5:00pm		
Time	Session Title	Internal Notes
8:15	Sign-in at registration	Pre-function area
Morning sessions 8:30 - 10:00	<ul style="list-style-type: none"> ● Welcome ● Plenary presentations from countries 	Plenary room
10:00	Poster viewing session	Poster gallery
Morning sessions cont. 11:15 - 12:30	<ul style="list-style-type: none"> ● Plenary presentations from countries 	Plenary room
12:30	Lunch	
Afternoon sessions 1:30 - 5:00	<ul style="list-style-type: none"> ● Prioritization and next steps for WG priorities ● Meeting evaluation ● Closing remarks 	Plenary & breakout rooms