



## *success story*

### **C-Change and PMI assist communities in efforts to prevent malaria**

#### **Challenge**

Myths and misconceptions about the causes of malaria kept pregnant women from seeking malaria treatment in western Kenya. And many women doubted that community health workers (CHWs) and health clinics could help them to prevent malaria.

One such doubter was Seline Auma Opiyo, a mother from Khumalaya village. “I would ask for medicine from the neighbors and administer it blindly, not really knowing what I was doing,” explains Opiyo, sitting in the one-room, mud-walled house she shares with her husband and three children. She gratefully points to Regina Ombita, the CHW who encouraged her to visit the health facility.

Ombita recalled how difficult that task was—a challenge that many CHWs face. “Seline was absolutely unyielding. It was more than not liking hospitals; she was influenced by traditional beliefs that say revealing a pregnancy early on [by visiting an antenatal clinic] would expose her and her fetus to



Seline Auma Opiyo, a mother who benefited from the C-Change anti-malaria program

witchcraft. Such are the myths doing the rounds here,” Ombita says. “I found her seven months pregnant and not having visited a health facility once. She did not want to see me at first, let alone listen, but I was able to convince her.” she adds.

#### **Response**

C-Change, with funding from the U.S. President’s Malaria Initiative (PMI), has provided the curriculum and training in social and behavior change communication (SBCC) to district-based NGO staff charged with implementing activities to combat malaria in the western part of Kenya. In turn, these NGOs trained villagers to serve as community health workers (CHWs) to work in health facilities and educate people about malaria.

“The CHWs’ assistance has been immense,” says Nursing Officer Hilda Wafula at the Budalangi Dispensary in Bunyala District. “Since the CHWs came, they have helped combat the many myths and misconceptions about malaria prevention that kept some pregnant women from seeking malaria treatment.”

Opiyo now recognizes the symptoms of malaria. “When my child develops fever, loses appetite, throws up, looks lethargic, complains of headache and develops a running stomach, I know I must rush them to hospital because malaria is a killer,” she says.

She notes, however, that her family does not go to hospital as frequently as before because they now sleep under long-lasting insecticide-treated nets (LLINs). They also know that they can take actions to prevent malaria based on the information that C-Change has provided.

CHW communication training is complemented with radio spots that spread information about malaria

prevention, such as the importance of using LLINs. The popularity of the anti-malaria radio program was highlighted when it briefly went off the air. “Our phones kept ringing,” said Obanda Francis, administrator of the Bulala FM station. “People called to ask that we restore the program because through it they got many health issues sorted out,” he says.

## Results

The C-Change activity has helped turn the tide of malaria in the area, says Lok Joseph Opurong, deputy public health officer in Bunyala: “Now we get reports that people are using nets. Pregnant women are visiting antenatal clinics and our records show that malaria cases are reducing.”

A November 2010 evaluation of C-Change activities in Bunyala, which used baseline data from September 2009 for comparison, showed that use of insecticide-treated nets by pregnant women increased from 28% to 68%. There was an increased demand for malarial prevention services recorded at the health centers, including treatment for children and intermittent preventive treatment for pregnant women (IPTp). In addition, “change agents” emerged in the communities who provided models of positive deviance by talking about their experiences to prevent malaria.



Obanda Francis of Bulala FM station, which played a major role in spreading information about malaria

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Communication for Change (**C-Change**) is an USAID-funded project to improve the effectiveness and sustainability of social and behavior change communication as an integral part of development efforts. AED implements C-Change with US-based partners—CARE, Internews, Ohio University, and IDEO; and regional partners—Centre for Media Studies and New Concept Information Systems (both in India); Social Surveys and Soul City (both in South Africa); and Straight Talk, Uganda. For more information, please contact Sandra Kalscheur, Knowledge Management Advisor at [skalscheur@aed.org](mailto:skalscheur@aed.org), or visit [www.c-changeproject.org](http://www.c-changeproject.org).