

HEALTH CAMPAIGN EFFECTIVENESS
Strengthen Systems. **Maximize** Impact.

A program of



Improving the Effectiveness of Mass Long Lasting Insecticide-treated Net Distribution Campaigns Through Community-based Health Planning and Services Programme in Ghana (MY-CAMP)

Ghana

Health Domains: Malaria

Theme: Transition of Campaigns to Health Systems

Project Lead: Dr. Phyllis Dako-Gyeke

Senior Lecturer/Head, Department of Social and Behavioural Sciences

University of Ghana School of Public Health¹

Project Team: Prof. Philip Baba Adongo¹ (Professor); Dr. Franklin Glozah¹ (Senior Lecturer); Dr. Emmanuel Asampong¹ (Senior Lecturer); Dr. Philip Tabong¹ (Lecturer); Dr. Adanna Nwameme¹ (Lecturer); Dr. Nana Yaw Peparah (Deputy Programme Manager, National Malaria Control Programme); Dr. Margaretta Gloria Chandi (Municipal Health Director, Ghana Health Service (GHS))



Background and Problem to be Addressed

Background

- Long Lasting Insecticide-treated net (LLIN) has been identified by the World Health Organization (WHO) and the global community as an effective approach for malaria prevention (WHO, 2017)
- In line with the Ghana Malaria Strategic plan (2021-2025), the Mass LLIN Distribution Campaign seeks to protect at least 80% of the population at risk with effective malaria prevention interventions, through household registration (90%) and distribution (90%) (UNICEF/WHO, 2015).
- Mass LLIN Distribution Campaigns organized in 2018 and 2021

Problem or Gap

- In spite of progress made with overall LLIN ownership (74%), challenges remain.
 1. Current utilization (43%) is below the 80% target
 2. With 61.8% gap between household access (67%) to and use of LLINs (Bertozzi-Villa, et. al., 2021; GSS/GHS/ICF Macro, 2019).
 3. Mass LLIN Distribution Campaign parallels CHPS structures, where CHOs provide primary health services within communities:
 - CHOs not extensively involved in Mass LLIN campaign processes.
 - CHPS structures, yet to be fully harnessed for Mass LLIN campaign across Ghana.

Purpose and Intended Application of Findings

Purpose

- The purpose of this study is to improve effectiveness by transitioning the Mass LLIN Distribution Campaigns into the Community-based Health Planning and Services programme in Ghana.
- This will be done by assessing the real-life implementation of the LLIN Campaign and prioritizing contextual factors to co-create innovative implementation strategies through a re-iterative refinement process, to ensure effective transitioning into the CHPS program, which will ultimately improve Campaign outcomes in Ghana.

Expected Outcomes

- Reduced gap between access and use of LLINs (61.8%) by 25% in the study sites/districts through increase in demand for, and willingness to purchase and use LLINs
- Increased motivation and enhanced skill set leading to task strengthening among CHOs

Research Questions Addressed

Primary Research Question

- How can the Mass LLIN Distribution Campaign's effectiveness be improved through transition into Community-based Health Planning and Services Programme in Ghana?
- Methods: Concurrent triangulation mixed methods design, involving participatory approaches within an IR framework. Surveys, FGDs, Desk Reviews and Participatory Workshops will be organized concurrently. Results will be interpreted and synthesized culminating into our co-created campaign effectiveness interventions.
- Study sites will consist of communities in 4 regions (Eastern, Volta, Ashanti, Greater Accra) in cluster 3 of the 2021 PMD LLIN campaign rollout plan.

Secondary Research Questions

1. What potential (enablers and barriers) in the CHPS programme can be leveraged to support the implementation of continuous Mass LLIN Distribution Campaign?
2. How can contextual factors and implementation processes be prioritized for effective Campaign integration?
3. What interventions can be co-created through community engagement to strengthen the Mass LLIN Distribution Campaign in Ghana?
4. How acceptable is the co-created intervention at community level in Ghana?
5. How feasible is the transitioning of the co-created intervention into Primary Health Care implementation?

Anticipated Project Timeline

[APR-AUG 2021]-

WP1

- IRB Application
- Desk Review
- Baseline Community Survey (n=768)
- FGDs (HHs, n=56; Caregivers, n=24; CHOs, n=24)

[NOV 2021- FEB 2022] –WP2

- Interim Report on Preliminary Findings and Lessons Learned
- Pilot Testing

[JUNE-AUG 2022]

- Dissemination and Policy Advocacy
- Final Report

[SEPT –OCT 2021]-
WP2

- Co-creation of Intervention (7 Participatory Workshops, n=84)
- Presentation at the annual HCE Coalition Meeting

[MAR-MAY 2022]-WP3

- Effectiveness Evaluation
- End-line Community survey (n=768)

Challenge in next 6 months

The Challenge(s)

- A possible increase in COVID-19 cases may lead to further restrictions in movement that will negatively affect stakeholder engagement processes, participant involvement and data collection.

Strategy for Mitigation

- Mindful of this possibility, the team will engage in constant monitoring of the COVID-19 situation across the country.
- Virtual meeting strategies will be used to mitigate this particular risk.
- During engagements with other stakeholders and participants, all COVID-19 protocols will be strictly adhered to.



THANK YOU