

Messaging for ITN distribution in the context of COVID-19 transmission

V.1 September 2020

Remember the COVID-19 infection prevention measures¹

- Maintain physical distance of at least one metre from all others, except immediate members of the family or people with whom you share accommodation
- Regularly and thoroughly clean your hands with an alcohol-based sanitizer or wash them with soap and water. WHO recommends washing hands often with soap and water for at least 20 seconds. If soap or hand sanitizer are not available, rub hands vigorously with wood ashes
- Avoid going to crowded places
- Avoid touching your eyes, nose and mouth
- Practise respiratory hygiene by coughing or sneezing into a bent elbow or tissue and then immediately dispose of the tissue² and wash your hands
- If you have fever or respiratory symptoms, you should stay home and not go to work
- Correctly use and dispose of any COVID-19 infection prevention materials provided. Follow national government guidance for disposal
- Maintain all other measures described even when wearing protective equipment
- Keep up to date with the latest guidance and regulations put in place by WHO and the national government

Core AMP documents: *Key guidance for distribution of insecticide-treated nets (ITNs) during COVID-19 transmission*

Planning for safe ITN distribution in the context of COVID-19 transmission

<https://allianceformalariaprevention.com/about/amp-guidelines-and-statements/>

Maintain key malaria and ITN messages

During the COVID-19 pandemic, it is important to maintain and even increase the dissemination of key malaria, ITN and campaign messages to communities to keep malaria high on people's agendas. As much as possible, messages should be informed by data from existing or new research³, and should respond to the concerns and needs of communities, including adapting messages planned for the post-distribution phase to the lessons learned from the implementation of the current ITN distribution. The messages need to ensure that:

- Communities understand that malaria is a major risk, even in the time of the COVID-19 pandemic. With different restrictions in place for COVID-19 infection prevention potentially not well understood, as well as the fear of infection that may exist among communities and households, there is a possibility that health facility attendance for appropriate diagnosis and treatment in case of febrile illness will reduce. It is important that communities are reminded of what to do in case of a fever, including how they can minimize their risk of

¹ <https://www.WHO.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

² Follow WHO and national guidance on waste disposal. Waste should be disposed of appropriately where it will not be in the environment risking contaminating others. See also: <https://www.who.int/publications/i/item/water-sanitation-hygiene-and-waste-management-for-the-covid-19-virus-interim-guidance>

³ See also AMP guidance: *Planning social and behaviour change (SBC) for ITN distribution in the context of COVID-19 transmission*. URL to follow.

COVID-19 infection when attending health facilities. Messages about febrile illness and what to do about treatment seeking should be aligned with those disseminated by the national COVID-19 task force, since both malaria and COVID-19 have similar symptoms.

- Communities know how to access ITNs. For mass ITN distribution, communities need to be aware of the campaign objectives and processes (e.g. distribution door-to-door or through fixed sites), as well as the COVID-19 prevention measures put in place to ensure their safety and security. Similarly, for routine distribution, messages need to ensure that target groups and procedures for accessing ITNs are understood to allow people to take action. Key messages should include expectations of household representatives for fixed site, door to door and routine distribution, including accepting to participate in triage (where organized), the importance of washing hands at stations or after receiving nets from health workers, maintaining physical distance from campaign personnel or health workers and the need to wear masks where this is mandated. Ensuring that communities know how to access ITNs during the mass distribution will automatically increase ITN use, since people cannot use ITNs that they do not have. The same applies for routine distribution and efforts to ensure that the most vulnerable populations are protected
- Communities understand the need to increase or maintain correct utilization of ITNs by all household members every night. Messages should reinforce that malaria remains a health risk even while COVID-19 transmission is ongoing, and that it is important to decrease the risk of malaria/COVID-19 co-infection (see below)
- Communities know how to properly care for their ITNs. The lifespan of ITNs and their physical integrity can be improved where households understand how to correctly wash and dry their nets, repair holes as soon as they appear, put their ITNs away during the day when not in use and keep ITNs away from areas where they may be exposed to damage, such as in areas where food is stored and rats are attracted. Messages about how to manage ITNs that have been used by suspected or confirmed COVID-19 cases are important to avoid ITNs being unnecessarily disposed of or repurposed (see below)
- Communities know where they can receive more information about malaria, COVID-19, ITNs or what action to take in case of febrile illness
- All members of communities in the targeted areas, including households with people with disabilities, elderly people, households in isolation or quarantine and others who are physically or socially marginalized, know how they will be served with ITNs in a way that protects their health and security

Avoid message overload and prioritize for different ITN campaign distribution phases

While there are quite a number of messages (both malaria/ITN and COVID-19 related) to be disseminated, information overload can lead to confusion, misunderstanding and rumours. To avoid information overload ensure that:

- Messages are developed for each campaign phase (pre-, during and post-distribution) and a clear plan is established to ensure that they are disseminated at the right time, corresponding to the activities for each phase. People should be provided with relevant, actionable information specific to each phase, such as, during the pre-distribution period, reminding people to ensure that they wear masks when attending distribution points or reminding people of the importance of nightly use of ITNs by the entire household during the post-distribution period
- Messages are simple and easy to understand (including being disseminated in the local language) and clearly state the action or behaviour that the target audience is to take
- SBC tools and materials (such as job aids, posters, standard operating procedures [SOPs], radio and television spots, frequently asked questions, etc.) are user friendly, containing key messages only and not overcrowding the material with too much information or too many images and figures. Ensure that SBC tools are developed specifically for the target audience

and avoid generic SBC tools that might not be easily understood by certain audiences. This will mean that key target audiences are identified during the macroplanning phase to allow for timely finalization and availability of materials at the implementation level

Ensure SBC messages are consistent

When developing messages for the ITN campaign, there are different considerations and competing priorities that must be taken into account. Some factors will be more important for some countries than others, emphasizing the importance of undertaking a situation analysis at the outset of the SBC planning for the campaign. For example, countries previously or currently affected by Ebola and/or having managed Ebola outbreaks might prioritize messaging around the reduction of stigma, fear and panic that may result from COVID-19. Countries with regions facing food insecurity concerns may want to focus messaging on the economic benefits of ITN use, i.e. households reducing costs associated with being sick with malaria by using ITNs every night throughout the year. The SBC sub-committee should therefore take into account the ITN campaign strategy, the national COVID-19 situation and response and the broader country, regional, district and sub-district context and experiences in order to develop the right messages for the campaign. Specific messages should be developed for pre-, during and post-campaign periods.

The SBC sub-committee should note that:

- Messages must be consistent across the different channels being used and should complement any information put out by the national COVID-19 task force on behalf of the government. Even if the language, level of detail or communication channel is different, it is important that the message itself is consistent. This is critical to ensure that communities are not overloaded with different or contradictory messages, creating confusion, misunderstanding or misinformation related to malaria, COVID-19 and ITN use.
- Ensure that all print, electronic and digital materials at all levels, such as advocacy packages, job aids, social media posts and standard operating procedures are consistent with their messaging regardless of the channel for dissemination. Develop guidelines for use of campaign SBC materials at all levels and ensure that these are understood during microplanning and training sessions and that supervision and monitoring tools take into account the need to monitor all channels selected for dissemination of messages.

Avoid COVID-19 fear and stigma messages

COVID-19 is, in many cases, a mild illness that does not lead to life-threatening complications. However, since the onset of the pandemic, with information changing regularly, a great deal of fear has become associated with the illness. These fears are increased by media-biased messages about serious and severe COVID-19 consequences, as well as the enormous amount of mis- and dis-information circulating about the disease across different communication channels. The SBC sub-committee needs to take this information into account in developing messages in order to address any identified fears related to malaria, ITNs and COVID-19, as well as to minimize the risk of any ITN messages developed increasing people's existing fears.

Ensure that training includes provision of accurate information about COVID-19 and reinforce the importance of all campaign workers limiting communication and messages that may cause fear, with subsequent effects of low uptake and utilization of the ITNs distributed. Listen to people's beliefs during the training, correct those that are inaccurate and provide sufficient information for people to be able to respond to questions from households during the implementation of activities. For example, households may be concerned that the ITNs or the ITN packaging may risk transmission of COVID-19. Campaign workers should avoid COVID-19 fear messages, such as "yes, the virus can live some time on plastic packaging and you should be concerned". Rather, campaign workers should be trained to respond with positive and actionable messages such as "the risk of COVID-19 transmission

from the ITN or the ITN packaging is very low, but if you have concerns you should wash your hands after receiving the ITN and again after you hang it outside in the shade for 24 hours to air as these two actions are sufficient to reduce your risk to close to zero”.

Messages should be developed that address COVID-19 concerns, as identified by the national COVID-19 task force, the national malaria programme and different partners and stakeholders, in order to minimize the risk that people reject the distributed ITNs, or become aggressive towards campaign personnel if their concerns and fears about COVID-19 have not been addressed in the messages developed for each phase of the campaign.

Messages should focus on positive outputs and outcomes, such as “sleeping under an ITN every night will help protect you from malaria” or “campaign personnel will wear masks and keep a physical distance of at least one metre from you and your household members, so that everyone is respecting COVID-19 prevention measures”.

Prepare communication in case of suspension of activities due to COVID-19

It is necessary to be prepared with appropriate messaging in case the ITN distribution needs to be suspended because of an upsurge of community transmission of COVID-19, tightening of prevention regulations where the population is mandated to stay home and isolate themselves, or other unforeseen circumstances which make it impossible to continue the ITN distribution at that time. If a significant number of campaign personnel become infected with COVID-19, the household registration and distribution may need to be suspended for an unknown amount of time and across one or several areas.

In all cases, national malaria programmes should ensure that communities are quickly made aware of the suspension and the reason, and when they are expected to recommence the ITN distribution. National malaria programmes should be sure of the dates when activities will be starting again to avoid changing the dates and creating more confusion and concern among household members and communities. Messages should be designed to reassure communities that measures are being taken to ensure the safety of all⁴.

Ensure SBC messages address community concerns

Malaria is both a cause and a consequence of poverty, so messages should explain the benefits that households will have when they prevent malaria rather than treat it. In many countries, the economic and social restrictions that have been put in place to reduce COVID-19 transmission will have or have had serious effects on households including people being out of work, significantly reduced income and increased levels of food insecurity. Wherever possible, messages developed for the ITN distribution should address these issues where they may have negative repercussions for ITN access, retention and use. Messages should reinforce the importance of keeping and using ITNs received to avoid further economic hardship related to the various costs for malaria diagnosis and treatment, while recognizing that the threats faced by households in terms of food insecurity are real and must also be addressed.

Develop specific messages for high-risk populations

High-risk populations should be identified and listed during the macroplanning stage and then updated during microplanning for each of the districts targeted for the campaign. High-risk populations may include:

⁴ For further information on issues concerning campaign personnel with suspected or confirmed COVID-19, see AMP guidance: *Planning for safe ITN distribution in the context of COVID-19 transmission*.
<https://allianceformalariaprevention.com/about/amp-guidelines-and-statements/>

- Marginalized (ethnically, socially, etc.) groups that may need tailored messages (and channels) to address barriers and concerns with ITNs
- Hard-to-reach communities where there is limited contact with external people
- Fishing communities, where ITNs may be immediately misused to repair or replace fishing nets to improve household food security

High-risk populations will vary from country to country and the SBC sub-committee should review the Global Fund grant submission (where possible) to review the key populations identified during the grant-making process. Ensure that previously identified key populations have been included and work with partners to ensure that any additional key populations that may have been missed or may be new since the time of the grant application are also included in the campaign SBC planning.

Communities at highest risk should be targeted with specific messages and, where needed, different channels to ensure that they are reached. It may be necessary to consider community meetings or other approaches where there are significant concerns that the new ITNs distributed will be repurposed or misused and a face-to-face interaction to discuss the issues and communicate key messages may be more effective.

Explain what households containing people with suspected or confirmed COVID-19 should do to receive their ITNs

Communities should understand the critical importance of the need for people with suspected or confirmed COVID-19 to sleep under an ITN to protect them from co-infection with malaria. SBC messages should focus on:

- Ensuring that campaign personnel understand that households with suspected or confirmed COVID-19 cases should receive ITNs the same as all other households in the targeted area. National malaria programmes should discuss with the decentralized health teams (district and sub-district) to identify a strategy for ensuring that all households receive ITNs while maintaining the safety of campaign workers. An explanation of the strategy should be included in training for campaign workers at all levels. Clear protocols for ensuring COVID-19 infection prevention when serving households that are in isolation, quarantine or have suspected/confirmed COVID-19 cases should be put in place, in collaboration with the national COVID-19 task force, to facilitate the development of consistent SBC messages. For example, households with a suspected or confirmed COVID-19 case may be asked to contact a community leader, a supervisor or another campaign worker to provide information about the number of people in the household and where the household is located so that ITNs can be delivered to the household in a safe manner.
- Reinforcing that COVID-19 infection prevention measures that have been put in place for the campaign are sufficient to limit exposure and transmission from campaign workers to the household and vice versa. The SBC messages communicated through all channels must be clear on procedures to follow for both door-to-door and fixed site distribution, including whether people need to wear masks when attending sites to pick up ITNs or when interacting with door-to-door teams.
- Ensuring that households understand the need for suspected or confirmed COVID-19 cases to sleep by themselves (as far as possible) under an ITN to protect them from co-infection. In many cases, isolating people with suspected or confirmed COVID-19 will not be possible in households and, in these cases, entire households may be presumed to be exposed to the virus and may be in isolation until they have passed through the infectious phase of the disease.

Explain ITN management for people with suspected or confirmed COVID-19

Households will need to know what to do with ITNs that have been used by people who are/were sick or died from COVID-19 to ensure that they are not repurposed or misused. This is very important as many households may feel that ITNs used by COVID-19 suspected or confirmed cases will:

- Need to be destroyed (often by burning)
- Need to be washed vigorously, with hot water or with harsh detergent, which would minimize the effectiveness of the insecticide and also may reduce the lifespan of the net
- Need to be used for purposes other than sleeping under to avoid further COVID-19 infection among household members

WHO guidance recommends that ITNs used by suspected or confirmed COVID-19 cases will be safe for re-use after they have been washed in cool water with soap, and left to dry in the shade⁵. The water should be discarded away from clean water sources. ITNs should only be washed after the person with suspected or confirmed COVID-19 has recovered or died from the illness. There is no need for regular washing during the period of illness to limit other people in the household exposing themselves to the person who is ill.

Develop messages about waste management

Waste generated through the ITN campaign will increase in the COVID-19 context due to the use of personal protective equipment (PPE), including hand sanitizer/water bottles, gloves, masks and other materials (based on national policies for infection transmission reduction) in addition to the typical waste generated from bales and individual packages, where these have been ordered. Campaign waste, particularly non-reusable PPE, has environmental and health concerns if it is not disposed of/managed correctly, and especially if it is repurposed for sale. Decisions about waste management need to be taken at the start of the planning for the campaign to allow the different sub-committees to implement their actions (e.g. microplanning may need to include mapping of available incinerators, logistics may need to plan for costs for moving waste from peripheral to more central levels, SBC may need to plan for messages about household-level waste management, etc.).

Waste management messages for campaign personnel and communities should be centred on:

- How non-reusable PPE should be disposed of correctly taking into account the local context and available options e.g. availability of covered bins if the advice is to dispose of non-reusable PPE in covered bins
- The environmental and health concerns of not disposing of PPE correctly
- Reinforcing the management of waste as a social norm

It is important that the SBC sub-committee works with the implementation/operations and logistics sub-committees, as well as the national COVID-19 task force to ensure that correct and consistent messaging (that is in line with the approved waste management strategy) is being disseminated to campaign personnel and communities.

Pre-test messages and visual supports

Standard ways of pre-testing SBC materials, such as through focus group discussions in communities, are unlikely to be the best option for the COVID-19 context. However, it is still important that materials are pre-tested to ensure that they resonate with the audiences that they are targeting.

Consider alternative ways of doing pre-testing including:

- Through family, friends, colleagues from other departments and social media networks by sharing messages and images and requesting feedback

⁵ <https://www.who.int/publications/i/item/water-sanitation-hygiene-and-waste-management-for-covid-19>

- Using an online platform, such as Survey Monkey or others, where the images and messages could be reviewed and rated, and comments collected for updating materials (remembering that using an online platform may mean pre-testing materials with a group that may not be fully representative of the target population)
- Undertaking phone interviews to review key messages being considered and gathering feedback for improvement
- Gathering a small group of people either virtually or face-to-face (while respecting COVID-19 infection prevention measures put in place by the national COVID-19 task force) to review and critique the materials developed

Pre-testing will likely only be done once, so it is important that whatever channel is used to generate feedback, comments and suggestions uses a sufficiently rigorous approach to gathering the needed information for reviewing, updating and improving the materials that will be used.

Quantify and reproduce all SBC key message supports and materials early

Once the key messages have been agreed upon, it is critical for the SBC sub-committee to determine through which channels the messages will be disseminated (e.g. mass or mid media, interpersonal communication, personnel identification materials, visual supports such as posters, etc.) and to quantify what is needed at each level for procurement processes to take place and delays to be avoided. In the context of the COVID-19 pandemic, where there may be national or more local lockdown periods that affect the movement of workers in all sectors, SBC materials development needs to take place early to ensure that everything is available in line with the campaign activity timeline.

Where SBC messages will be disseminated through channels that involve face-to-face interactions, quantification for all necessary COVID-19 infection prevention materials for all participants should be included to ensure sufficient materials are procured and made available in a timely manner.

Plan messages in advance to respond to anticipated misunderstandings and rumours

Countries should expect some miscommunication that can lead to misunderstanding, confusion and potential rumours, and should plan for mitigating actions and appropriate response messages. Several countries have already seen the creation of rumours within communities that link the ITNs with COVID-19 because the nets are manufactured in China, or because of the rise in COVID-19 cases shortly after the mass ITN distribution⁶. National malaria programmes should develop messages that will respond to these rumours should they arise, e.g. reassuring communities that the nets will not give them COVID-19 by telling them that “the ITNs being distributed have been approved as safe to use by the Ministry of Health and the World Health Organization”. As well as planning the various messages to respond to rumours, mis- and disinformation, countries should also think about the most appropriate media channels to respond to these rumours. As an example, South Sudan found that community leaders were effective in quelling COVID-19-related rumours at the local level before they spread outside the community and were more difficult to manage.

Plan and budget for generic post-distribution messages that can be used to address anticipated issues

Issues and challenges will continue when campaign activities are no longer being actively implemented in communities, and where frequency of message dissemination about malaria may

⁶ For further information on the most appropriate channels to respond to such rumours, see AMP guidance: *COVID-19 considerations for the development of rumour management plans related to ITN distribution and Engagement of community leaders in ITN campaigns in the context of COVID-19 transmission*.
<https://allianceformalariaprevention.com/about/amp-guidelines-and-statements/>

have significantly reduced. Messages should be developed that will address country-specific issues that are likely to arise. These can include:

- Positive repurposing of old nets to meet community needs
- The management of ITNs that have been used by suspected/confirmed COVID-19 cases
- Promoting consistent yearly use of ITNs by the entire household vs. seasonal use
- Accessing malaria diagnosis and treatment in a timely manner from public health centres or community health workers (CHWs) (where community-based malaria-specific or integrated diagnosis and treatment programmes are being implemented)
- Accessing routine health services, particularly for pregnant women and children under five, where ITNs may be available as part of the antenatal care or child health service package

National malaria programmes should refer to existing research to determine potential ITN use and care issues which may arise post-distribution as conducting field research is not recommended during COVID-19 transmission, unless absolutely necessary⁷. For example, if existing quantitative, qualitative or anecdotal data or information show previous high levels of ITN misuse for fishing in certain areas, post-distribution activities in those areas should focus messages on the environmental impact of ITN misuse for fishing, and the economic benefits of sleeping under ITNs nightly (preventing malaria and costs associated with treatment), using a communication channel that reaches fishing communities. National malaria programmes should plan and budget for post-distribution communication that will sustain SBC activities and messaging that address malaria and ITN behaviour concerns within communities.

⁷ See the ITN use and access report: <https://breakthroughactionandresearch.org/itn-use-and-access-report/>