

6: Communication

See Brief 1: *Key communication recommendations.*

Communication is a vital activity before, during, and after a campaign, to mobilize communities to participate and to ensure that the nets distributed are hung up and used consistently and correctly. Communication comprises a variety of activities, with key roles for national and international partners. As we have seen, good coordination is critical at each stage of the campaign, and effective communication among partners under NMCP leadership is vital to ensure that messages are clear, cohesive and supportive of MoH efforts.

A timeline of communication activities (in English and French) is included on the CD as Resource R6-1.

See Brief 2: *Planning and budgeting communication activities.*

See also accompanying *Excel checklist.*

The first step in conducting effective communication activities is to set up a communications sub-committee within the campaign partnership at national level. The committee should be led by representatives of the NMCP and MoH who focus on communication, and members should include in-country implementing partners who regularly conduct communication activities, and other partners with experience in mobilizing communities and behaviour change communication (BCC). If there is not already a functioning IEC/BCC committee that helps to coordinate national malaria communication activities, the MoH will need to mobilize partners to participate. Most partner organizations already have a communication and/or social mobilization focal point. Partner organizations may also be able to assist by hosting the committee meetings if space is not available at the NMCP/MoH.

A sample terms of reference for a communications sub-committee is included on the CD as Resource R6-2.

There are three main categories of communication, all of which are relevant to implementing an effective campaign:

- 1. Advocacy** for LLIN campaigns includes activities to foster political will and support for the campaign, to increase financial and other resources on a sustainable basis, and to hold authorities accountable to make sure pledges are fulfilled and results are achieved. Advocacy is carried out at both the country level, to engage political leaders, national media and funding agencies in the campaign, and at an international level to promote in-country activities and raise further support (often financial) for the planned activities.
- 2. Social mobilization** in the context of campaigns means mobilizing communities to take full advantage of campaign and post-campaign interventions. Social mobilization activities focus on informing target groups of the dates and locations of the campaign, including registration and distribution, and what to expect from household visits. It is the information and motivation needed to ensure high levels of community participation in the campaign activities.



Tchad. © MENTOR Initiative



When you see this icon,
click to open documents containing new or updated information.

3. Behaviour change communication is the process of using communication to encourage continuous positive behaviours. In the case of LLIN distribution campaigns, BCC is important to ensure that beneficiaries use nets consistently and maintain and repair them. BCC works by influencing factors like social norms, perceptions of risk and self-efficacy. By changing these factors, BCC can promote and sustain individual, family, community and societal behaviour change. BCC works best when multiple communication channels are used, and when messages are tailored to communities.

6.1. Planning for communication

See also

Brief 2: *Planning and budgeting communication activities* and accompanying *Excel checklist*

Brief 3: *Using research and data to plan effective social and behaviour change communication*

Brief 9: *Planning and implementing social mobilization and social and behaviour change communication*

Communication comes in a variety of forms, from broadcasting messages to encourage turnout, delivering LLIN-use messages, facilitating VIP and media visits, and ensuring international press coverage. To ensure coherent and consistent communication coverage, it is essential that a costed plan is in place before any campaign begins and that health personnel and others involved are trained to provide effective and consistent messaging.

Communication plan

Each country should have a national malaria communication plan in place, developed to support the country's National Malaria Strategy. The campaign-specific communication plan should build on this plan, using the same or complementary key messages.

Without a comprehensive plan for campaign communication, trainings will be confusing, messages may get muddled and implementation may suffer. The first step in implementing campaign communications is to draft a communication plan, around which in-country implementation partners can provide support and international partners can advocate.

The communication plan generally has the following key sections:

1. Context and background
2. Objectives:
 - a. Overall campaign objectives (these are set in the campaign plan of action or implementation guideline)
 - b. Communication objectives for the campaign
3. Target audiences (primary, secondary, tertiary)
4. Key messages (these address the communication objectives)
5. Communication channels (often arranged by target audience)
6. Tools and materials needed (includes print and radio and/or TV materials)
7. Timeline of activities
8. Budget (item, quantity, unit cost, responsibility for producing and paying for the item)

There is no specific set of activities that will ensure success or failure of the communication plan. It is vital, however, to consider rational use of resources and to focus funds on the activities that will have the greatest impact. Generally, radio messages plus house-to-house visits are the most effective at communicating messages widely and with impact. Television can be expensive and may not reach all areas, but when it does, it can be an excellent way to model the behaviours the campaign is promoting. Some print materials are necessary, such as coupons and supervision forms. Other print materials need to be considered carefully. Flyers often do not have the desired impact, due to low literacy rates or poor dissemination, while posters are really only good for identifying sites, and not useful for

changing behaviour. Consider carefully your communication objectives and prioritize your materials and activities according to your goals.

See the CD Resources R6-3 and R6-4 for an example of a communication plan in French and English.

Macro-planning

We have seen in Chapter 3 that macro-planning is the “big picture” view of what will be needed for the communication activities to support the campaign, including planning, training, and a rough budget based on the number of districts or regions that will be participating in the campaign and the size of the target audiences. All social mobilization materials must be developed early in the planning process to allow time for pre-testing and printing (see social mobilization timeline in Resource R6-1 and example (in French) of a macro-plan from Senegal in Resource R6-5 on the CD) and sent to the districts in a timely manner. A common weakness of campaigns is the late arrival of social mobilization and communication materials at the district or community levels.

Micro-planning

See document: *Microplanning guidelines*

Chapter 3 demonstrated that micro-planning is the process of planning and budgeting out detailed, specific needs at the district and community level. Communication micro-planning should be carried out in conjunction with the technical and logistics micro-planning. This is the point where the numbers of distribution points, volunteers, supervisors, t-shirts, radio spots, megaphones, markers and so on are determined for each district, and resources identified to cover the estimated budget. Requirements for training should also be included. The plan should include a distribution plan, specifying who the target recipients are and who will distribute the various materials. Early planning for transportation of materials to district level requires working alongside the logistics sub-committee.

See Resource R6-6 on the CD for an example of a communication micro-plan from Senegal (in French).



Tchad © MENTOR Initiative

6.2. Advocacy

Advocacy at the international level

At the international level, advocacy is an important tool for raising awareness and funding for campaign activities. International organizations and partnerships work to ensure publicity for the campaign by generating press coverage, arranging appearances and interviews with influential individuals, and mobilizing groups and communities to advocate for and support campaigns. International partners work through a variety of channels, including press releases, media events and other publicity. Messages are tailored to reach specific groups to generate awareness.

Some points for consideration include:

- International advocacy plans should be discussed and agreed upon with the MoH early on for MOH buy-in, input and ultimately ownership. The advocacy plan should be included in the communication plan.
- For integrated campaigns, it is more effective to focus initial approaches with the media around efforts to improve overall child survival, rather than on individual interventions, such as malaria. The issue of child survival also helps satisfy donors' needs for focusing on the most vulnerable populations.
- Attaching campaign efforts to attainment of broader development goals, such as the Millennium Development Goals or the Abuja targets, will help develop interest in the activity.
- Broader-scale advocacy focused on political leadership should be considered. Plan early to engage the president, chiefs or leader of the country at the campaign launch, or to feature high-level officials, faith-based leaders, well-known music, entertainment or athletics stars, or other key spokespeople in radio or television spots.
- It is possible to engage private sector companies in the campaign, particularly if there is a high-level event through which they can advertise themselves. While it can be quite difficult to raise funds from private companies, in-kind contributions (mobile telephone or radio and television airtime,

for example) are easier for them to make as a general rule. Their goal will be to ensure their company's visibility during the campaign through branding on campaign materials or at a launch event. See Brief 4: *Private sector engagement*.

While it is understood that certain partners need press coverage for their specific organization or campaign support mechanism, this should be done as part of an overall strategy to promote the agreed objectives and messages of the MoH and implementing partners for the campaign. Keep international partners and donors abreast of the planned activities by sharing copies of the communication plan. Partners can then better generate broader interest and commitment at the international level.

COUNTRY CASE STUDY

In Nigeria, as an example of how international advocacy helped to support campaign activities, NMCP succeeded in persuading some of its international partners to pay the consultancy fees of all the technical assistants and also fund the per diems and inter-state transportation costs of members of teams set up specially to support campaign planning and implementation in the states and Local Government Areas.

Often, international organizations will bring highly visible or well-known personalities (from government, sport, entertainment, faith-based organizations and other groups) to see how a campaign is implemented. The visits are used to convince these personalities of the importance and the impact of the campaign, and to gather photographs, stories and video for use in advocacy in the celebrity's home country for continued support for campaigns.

The campaign is the key activity and visitor delegations should not take away from the ongoing work of implementing the campaign. The MoH and in-country partners need to maintain focus

on the activities at hand and should therefore set limits on how much can be asked of them in other areas. International partners need to be sensitive to the amount of work and planning required for implementation of campaigns of this magnitude. Visitors are important, but they also require work. As far as possible, visits should be included in the overall plan, or if none are originally expected, then they should be included within contingency plans. Certainly, a strategy and protocol for visits should be part of the original planning discussions with partners.

See Appendix 6A for a checklist for international and distinguished visitors.

Advocacy at the national level

It is important for countries to promote campaign activities and ensure that there is understanding and support for the campaign at the highest national levels.

See Brief 5: *Branding and promoting social norms*.

Advocacy at the national level is often part of the work of a communication or social mobilization sub-committee, which reports regularly to the national coordinating committee. National advocacy objectives are to:

- ensure support for the campaign from the key “gatekeepers” in national and local government
- engage national and local media to assist with the promotion of the campaign and provide

- good-quality media coverage of the activities
- generally keep key decision-makers and opinion leaders informed and supportive of the campaign

Advocacy activities must be included from the outset in the communication budget to avoid a last minute search for funding for key events.

National level advocacy activities may include radio or television advertisements featuring key figures in the country (such as politicians, musicians or other cultural figures), official ceremonies to hand over the campaign supplies from partners to the government, and newspaper articles discussing the benefits of the campaign and progress with planning and implementation. Press conferences and the national launch, which can be organized once key visitors have arrived in the country, are important activities for publicity and high-level endorsement of the campaign.

It is important for partners to coordinate outreach to the press, ensure cohesive and consistent messaging, and promote the MoH and partnerships above their own organizations.

Engaging private sector and cultural partners

National bed net distribution campaigns are a unique opportunity to focus national attention on malaria and engage new private sector partners.

COUNTRY CASE STUDY

In 2009, Senegal’s National Malaria Control Programme invited music icon and media owner Youssou N’Dour to participate in planning for the national distribution of 2.2 million nets to children under the age of five years. Working with the local health partnership, Youssou rallied artists, entertainers and local business to produce a nationally broadcast launch concert, a malaria anthem, radio spots in four local languages and other campaign elements that were disseminated to community health workers and regional radio to promote the campaign. According to a national survey, 64 per cent of the population (7.8 million people) recalled one or more elements of the campaign after the distribution and half the country now associates Youssou with the malaria fight. Better still, the collaboration has continued beyond the bed net campaign, helping Senegal’s malaria programme to engage religious leaders, local businesses and national youth in a sustainable manner.

At national level, some points for consideration in terms of advocacy include:

- Coordination with partners
 - Advocacy should focus on ensuring understanding of the purpose of the campaign (rather than just time and place) and what the campaign's impact will be on the health of children and the overall population in the country.
- Press and media relations
 - Put the MoH at the front and centre of all outreach to the press. Work closely with their communication division and protocol offices to ensure visibility and MoH-led decisions around all communication activities. Ensure MoH staff are present during press conferences where possible.
 - Ensure that spokespeople are in contact with one another and are passing similar messages. Preparing a document with talking points or frequently asked questions (FAQ) that contains agreed messages and statements is helpful to make sure that messages are consistent and effective for the audience and stakeholders.
 - Regional journalist workshops can be very effective. Journalists can help promote use of nets in their articles and reports, as well as indicate effective ways to get further information about malaria (and other diseases, if the campaign is integrated).



Kenya © Maggie Halaiban /Sumitomo Chemical

- A launch event can be a good way to mark the beginning of the distribution and show the commitment from national and international leaders to the success of the campaign.
- Shortly before distribution and any launch event, there is an opportunity to spotlight the campaign when the LLINs first arrive for storage. A ceremonial handover of LLINs from partners to the government, involving key representatives, can be organized to draw attention to the upcoming distribution. This is most effective when campaign dates are already known.
- Plan for the possibility of negative rumours being published or spread, and have a shared strategy ready for roll-out to counter such rumours. Identify individuals who will perform as spokespeople in charge of positive and negative communication and solicit for partners' commitment to sponsor any necessary unplanned activity. See the section on crisis communication for more detail on how to deal with negative issues.

See Appendix 6B for some further information on relationship with the press and other media.

See Brief 6: *Media engagement*.

Local advocacy

Local advocacy ensures “buy-in” from local leaders at regional and district levels. The regional level, with its linking role between the district and national levels, has an important role to play to engage both levels to work together for the common objectives that have been set. In many cases, the district and region have important coordinating roles to play and can provide resources in terms of vehicles and storage. However, advocacy at the regional level needs to focus on campaign priorities, while taking into consideration the districts' and regions' other equally pressing priorities. When all priorities are not included, time and resources may be lost or wasted.

COUNTRY CASE STUDY

For example, in Mozambique in 2005, a great deal of energy was expended at the national level, trying to involve key departments and individuals for campaign planning. However, the national level was occupied with a nation-wide vaccination campaign, and the LLIN distribution was sub-national. The planning team later recognized that the district and provincial health authorities of the two targeted provinces were already engaged in the campaign planning process.

The Mozambique experience demonstrated that engaging leaders at the district level, where the campaign was to be implemented, was much more important to the success of the campaign than attempting to organize coordination meetings at national level.

COUNTRY CASE STUDY

In Mali, the social mobilization sub-committee identified various target groups to be involved in informing and motivating the population, including the media, religious leaders, community leaders, traditional communicators, non-government organizations (NGOs) and parents (see Resources R6-3 and R6-4 on the CD). Training and messaging focused on each of these groups specifically and what they could do to improve participation in the campaign at the community level.

This type of training and messaging allows the target audience to identify the actions that can be taken to improve understanding of the intervention and promote attendance at vaccination and distribution sites.

The MoH is normally in charge of informing district managers of both the campaign and role of health centres. At the lower levels, advocacy helps ensure that every health management team,

whether at a health post, health centre, district or regional facility, is informed about the campaign, is ready to support activities, and has the tools needed from the national and regional levels to manage the process effectively.

See Brief 7: *Development of advocacy events and materials.*

6.3. Training for social mobilization

See Brief 8: *Special requirements of social mobilization in urban areas.*

Training is a key component of the communication plan. Volunteers and others such as media people, community and religious leaders, health agents and community health workers involved in campaign communication need to be familiar with key messages and to have the skills to carry out their duties effectively. They must disseminate the approved messages and communicate effectively with beneficiaries. The communication plan requires a clear statement detailing which segments of society are to be mobilized and how, in order to refine the training for agents of communication and social mobilization accordingly. In most cases, community health workers and community volunteers will be those trained to mobilize communities or to encourage the campaign's intended target beneficiaries to obtain their nets. However, representatives from the media, community and religious leaders and health agents can all participate in training in order to widen the outreach.

Good training and training materials are vital to good social mobilization and for the campaign success overall. Make sure all volunteers have the correct information and can disseminate it by the time they finish the training. Volunteer aids or checklists will help to ensure that clear and consistent messages are passed to community members.

In general, training for all individuals involved in social mobilization should be carefully planned. A plan should include detailed information on:

- development of an understanding of campaign objectives
- provision of skills to provide basic information to beneficiaries on prevention of malaria, use of LLINs, and so on
- timeline of campaign activities, including pre-registration communication, registration, distribution and post-campaign visits, where necessary
- knowledge and directions to the closest campaign site, what is available at that site, and start and end times for the distribution each day
- identification of community-level barriers to LLINs and their use and how to discuss any misconceptions or myths with the population
- understanding of the process of behaviour change; that it is more than just delivering information
- expected roles and responsibilities in the campaign and development of action plans, including identification of the communities in which they will be conducting visits and arrangements for supervision
- identification of areas that are hard to reach, strategies to gain access, and ways in which activities will be monitored and supervised
- list of frequently asked questions (FAQs) and replies

Communities may face different barriers to attending the campaign, ranging from geographical (limited access to health facilities), to information (lack of knowledge regarding the location of mobile posts), to misinformation (rumours and stories convincing people that interventions are inappropriate or must be paid for). The role of community volunteers and community leaders is to overcome these barriers, and is critical to the success of the campaign. Community leaders and volunteers, as well as community-based organizations, should be encouraged to assist in conducting social mobilization. In areas where there are ongoing

community health programmes, messages about the campaign can be integrated with those already being disseminated. For instance, in Zambia and other countries, volunteers of Red Cross Red Crescent National Societies and members of various faith-based groups who were already conducting community activities were selected as volunteers for the LLIN distributions, and given additional training to mobilize the community.

Social mobilization for campaigns can be carried out via a variety of channels. The objectives of social mobilization efforts should be clearly identified in advance and agreed upon by all partners/stakeholders (including community representatives).

The social mobilization sub-committee, with support from the technical sub-committee, should develop training tools, including guides, volunteer and supervisor supports and checklists, to make sure that all social mobilization activities have taken place and reached the most vulnerable populations. Job aids containing the key messages about the campaign will help volunteers to provide consistent and clear information to beneficiaries.

See CD Resources, R6-7, R6-8 R6-9 (in French) and R6-10 for examples of training guides, volunteer supports and checklists.

Social mobilization and BCC

See Brief 9: *Planning and implementing social mobilization and social and behaviour change communication.*

For net distribution campaigns, social mobilization means mobilizing communities to participate fully in all campaign and post-campaign activities. Behaviour change communication conveys key messages that support the desired behaviours of collecting and hanging up the net and sleeping under it every night. Social mobilization and BCC are similar

and overlapping. For our purposes, however, in this toolkit, we will think of social mobilization as “IEC” (Information, education and communication) to inform communities about campaign logistics and BCC for promoting and solidifying good net use practices.

Social mobilization is a critical activity for ensuring that communities and caregivers are made aware of the campaign (dates, venues, targets and how to proceed), as well as understanding the health benefits and their responsibility to travel to campaign sites to receive interventions. The goal of communication is to mobilize relevant sectors of society from the national level to the community level to participate actively in campaign preparation and implementation. Communication serves to inform and motivate families to take full advantage of interventions during and after the campaign.

Communication channels may need to vary from community to community, but the underlying messages should all be consistent and direct.

BCC aims to foster positive behaviour change (such as consistent and correct use of LLINs) through increasing knowledge, encouraging dialogue and promoting services. BCC is especially important in the case of LLINs because, once nets are distributed, impact will be low unless caregivers exercise proper behaviours concerning net usage for the most vulnerable groups. This includes hanging and sleeping under LLINs every night, caring for and repairing nets. BCC also helps to achieve the goal of 80 per cent use of nets by the target groups, which dramatically reduces malaria cases. If nets are used community-wide, transmission can be decreased and the community as a whole protected better.

It is important to ensure that community leaders are actively involved right from the planning stages through to the implementation of the campaign. Community ownership and engagement are vital to ensure nets are hung, slept under and maintained following the distribution. Working with community leaders to make sure that they understand the campaign interventions and the resulting health impacts will help the wider community learn about, and engage in, the activities. Figure 1 gives a brief outline of social mobilization (IEC) and BCC activities at various stages of the campaign.

Stage of campaign	IEC/social mobilization	BCC
Pre-campaign	Information to target population via mass media, community and religious leaders, community volunteers, health workers on: <ul style="list-style-type: none"> • household visits, what they entail and why they are needed • dates and venues of any mass distribution • goals of the campaign • target population for the campaign • any other interventions included 	
During campaign: registration	Interpersonal information to households on: <ul style="list-style-type: none"> • dates and venues for each particular household • interventions included • what to bring to the distribution site 	<ul style="list-style-type: none"> • general malaria messages • net use and care and repair messages • other child health messages

Stage of campaign	IEC/social mobilization	BCC
During campaign: distribution	<ul style="list-style-type: none"> reminders motivation to participate 	<ul style="list-style-type: none"> net hanging demonstrations and interpersonal communication (IPC) at site net care and repair messages
Post-campaign		<ul style="list-style-type: none"> mass media and IPC on net use and hanging door-to-door hang-up visits net use and care and repair messages motivation to hang and use nets respond to general malaria questions refer fever cases

Figure 1: IEC and BCC activities

General guidelines for effective messaging

- **Use existing research:** In many countries, research has been conducted on factors influencing net use and access of the population to various communication channels like radio and television. This research can be used to design the key messages and communication strategy. Small surveys, large surveys and focus group discussions can all inform the communication strategy and help to ensure that messages are effective. *See Brief 3: Using research and data to plan effective social and behaviour change communication.*
- **Keep messages simple:** Messages should be clear, simple and easy to understand, action-oriented, feasible and relevant, and sensitive to cultural, political and religious beliefs and practices.
- **Use local language(s):** Use the language(s) that will be understood by the majority of people in a particular area, taking into account radio (where beneficiaries only need to understand the language as it is spoken) and print materials, which require literacy in a language. Strive to use the minimum number of languages needed, otherwise printing and translation costs can balloon.
- **Create a consistent “brand strategy” for the campaign:** Materials should have consistent colour scheme, logo and slogans. The same typefaces should be used on printed materials, and the same voices in radio and television spots. *See Brief 5: Branding and promoting social norms.*



Niger. © John Haskew, IFRC

- **Use multiple channels:** Research shows that disseminating messages through multiple channels is more effective and reaches more people.
- **Adapt key messages to local context:** Key messages should be developed with involvement from the community, so that they are adapted to the local context. Where and when possible, use trusted local celebrities and spokespeople to participate in dissemination of messages for campaigns (on posters, radio, television). Respected leaders can be very effective in reaching large populations. Often countries have a very good idea of what has worked or not worked in the past and communication plans can

be developed based on lessons learned both in-country and internationally. However, communication must be context specific: what works in one country, one part of a country, or one community may not work (or may need to be adapted in order to work) in another. Understanding specific barriers to uptake and utilization of nets will allow messages to be tailored to maximize participation in the campaign and post-campaign hang up activities.

- **Pre-test all materials:** It is very important to pre-test all messages and supports before reproduction and dissemination. Pre-testing ensures that messages and images used are culturally appropriate and understandable, that they will reach the target populations and will have an effect in terms of increased awareness and willingness to participate.

See Appendix 6C for pre-testing guidelines and how to conduct focus group discussions.

6.4. Pre-campaign communication

Pre-campaign communication serves to sensitize the target community prior to the campaign and to start engaging the stakeholders by highlighting their respective roles. Messages are designed to inform the population about the beneficiaries of the campaign, why this group is being targeted, where and when the campaign will take place, how household registration will take place and which services will be provided.

In the pre-campaign period, it is important to ensure that targeted messages about the importance of the campaign reach the most at-risk populations. For integrated campaigns, messages should be disseminated to encourage at-risk families to bring their children and receive all campaign interventions. For universal coverage distributions that are not integrated with other interventions, community sensitization is important early on, during the phase of beneficiary identification. Volunteers will succeed in gaining access more readily and will collect

more accurate information where communities have been sensitized about the activity and are forewarned that households will be receiving a visit to collect data for the MoH, after which they will be able to obtain LLINs.

Hard-to-reach populations should be identified and addressed specifically. Groups that are not geographically remote but are hard to reach in other ways (orphans or vulnerable children, the elderly, nomadic or transient populations, for example) should be taken into account when the communication plan is developed.

Pre-campaign messaging should begin, through mass communication channels, at least four to six weeks before the start of the campaign activity. Interpersonal communication should begin one or two weeks before the campaign, targeting highly vulnerable and at-risk populations.

COUNTRY CASE STUDY

In Nigeria, traditional town criers had demonstrated ability to communicate simple information to community members. This is the kind of resource that can be used effectively.

Messages should include:

- information about which services are being provided, the diseases that will be prevented, the dates and places of the campaign, any associated costs or rewards and the importance of the voucher or coupon (if used). Where campaign interventions are free, this should be emphasized in the messages to ensure the population is informed and to minimize the risk of site personnel charging money for nets
- the benefits of participating and what people have to do to participate
- who is included in the target population and why. Stressing the importance of protecting children under five years of age may help the population understand that resources are limited and the campaign can only cover those most at risk

- who is permitted to pick up the net at the distribution site and how many nets they should expect to receive

Channels of communication might include:

- markets, religious gatherings, sporting events and other community activities which offer situations where large groups of people can be sensitized with key messages at the same time
- local radio, where timing of radio messages should coincide with popular programmes to increase the reach of messages
- local or community radio and interpersonal communication such as town criers, particularly for populations where the literacy rate is low
- print materials, but use pictures, diagrams and symbols to ensure understanding by those who have difficulty with reading

The radio: national and community radio are both very effective communication channels. Radio messages should be translated into two or three of the most spoken languages in a country. Avoid translating messages into all languages, bearing in mind that the time and financial expenditure is large for limited results.

It is important to decide on those activities that are more effective for passing messages. These might include household visits, community animation sessions and peer education sessions. Large-scale events may be of interest to donors in terms of visibility, but may not be so successful in terms of reaching target audiences.

6.5. Communication during the campaign period

During the campaign period, it is important to continue to reach communities with social mobilization messages. If the campaign is divided into registration phase and distribution phase, then specific communication is required for each.

Many campaigns use door-to-door visits in order to register beneficiaries for the campaign, by giving out a voucher, coupon or other device, such as a wristband, that can be redeemed for nets during the distribution phase. These door-to-door visits provide a unique opportunity to emphasize campaign messages and explain what is expected of the beneficiaries.

The volunteers registering the households should have a job aid containing the key messages they need to impart to the household. Training of volunteers should include practice with the job aid, to ensure volunteers understand and can communicate the key messages, including:

- date and location of their distribution site
- who should come to the distribution site, either to pick up the nets and/or receive services (if the campaign is integrated)
- what they need to bring with them (the voucher, coupon or wristband)
- the importance of using the net every night, and of mending it if it gets torn

Posters, banners, net demonstrations and other visual supports that identify the campaign site and provide information on interventions should be in place prior to the distribution and remain in place during the distribution period.

During the distribution campaign, interpersonal communication should continue, specifically focused on households who face barriers, such as cultural, religious or geographical obstacles, to participation in the campaign. These households should be identified during registration and then followed up during the distribution period to ensure that they have participated. It is effective to go directly to houses where barriers exist to discuss the importance of campaign interventions with caregivers.

Information for caregivers leaving the campaign site should include points on airing the nets in the shade for 24 hours after removal from pack, hanging LLINs over the sleeping area, who should sleep under the net and the need to sleep under

it all year round, regardless of mosquito density. Additional messages can focus on the importance of routine health services, including vaccination and supplementation schedules for children, and antenatal care for pregnant women.

The site should have a net hanging to demonstrate how it should be correctly hung. Any demonstration should be appropriate to the local context. For example, if families commonly sleep on mats, the demonstration should include a net hanging over a mat. Where families sleep outside, the demonstration should indicate to people how the net can be hung using commonly available materials.

Much depends on the setup of the distribution site. If the site is disorganized or understaffed, it will be extremely difficult to communicate any messages to beneficiaries. A well-planned, orderly, well-staffed distribution site will enable volunteers and health workers to deliver key campaign messages to the beneficiaries more effectively as they receive their nets. See Chapter 7, Implementation, for more on how to set up distribution sites.

Crisis communication

See Brief 9: *Planning and implementing social mobilization and social and behaviour change communication.*

Despite best efforts, issues can arise during a campaign that may threaten its success. Rumours that the nets are dangerous, or that net distribution is a political tool, may start. For example, in the Democratic Republic of Congo, Population Services International encountered serious politically motivated rumours alleging toxicity and death from LLINs. Other issues like net theft, sale of vouchers or nets, and other forms of mild corruption that impact the reach and success of the campaign may need to be addressed. One potential issue is that of genuine discomfort to beneficiaries.

COUNTRY CASE STUDY

During the hang-up campaign in Ghana, a woman with four children living, sleeping and cooking in one room found that after the net was hung up, it filled the room. She decided to take it off during the day and hang it back later but volunteers insisted that she had to keep the net hanging all the time. The presence of a monitoring team was timely to avert a difficult situation. There was also a requirement to give additional volunteer training in order to deal with rumours arising from situations like this.

In Liberia, a situation arose where beneficiaries, and even some volunteers, thought the nets came from a political party. Volunteers had to receive additional training to deliver messages during household visits that the campaign had nothing to do with any political party.

In Ghana, after a hang-up campaign, two volunteers were beaten up by some members of one community. The aggrieved community members thought they were denied nets because they belonged to other political parties. An investigation found that the people were absent from the community at registration time, and so were not included in the distribution.

Key tips for communication in a crisis are to:

- Conduct urgent briefings of key community leaders and people of influence, such as traditional chiefs, religious leaders, local government leaders, local parliamentarians, leaders of women's groups, traditional communicators, the police, the army and others. In principle, briefings should have happened at the start of the campaign to allow community leaders to oversee the implementation of the campaign and be alert for problems that arise. If engagement of community leaders was insufficient to prevent or address negative rumours, working

with them to address problems will be vital. Inform them of the rumours and educate them on the truth. Solicit their questions and ensure they know who to call if there are new rumours or problems that cannot be addressed at the community level.

- As quickly as possible, develop and broadcast radio and/or television spots that address the key rumours. Use humour to make them memorable. If the issues are politically sensitive, ensure a high-level government person vets the spot. If there is a campaign ambassador or publicly recognized figure who is willing to assist with addressing rumours among the population, this can also help to ensure messages are widely heard and believed by the local population.
- If the crisis is primarily political, with different groups claiming the credit, it will be necessary to assess any impact on the desired outcome and whether or not you should do anything.
- If resources allow, create a toll-free hotline and staff it with people who have a “cue sheet” of frequently asked questions (FAQs) and standard responses. With the wide use of mobile phones, this is a good way to get a sense of what is going on. Publish the toll-free numbers at the distribution sites, on television and radio. The hotline staff should receive training and should systematically record which town or neighbourhood the calls are coming from, the issue, the response given (responses can be from a standard list) and, if the caller agrees, a telephone number for follow-up. Review the log daily to get a sense of the concerns and where they are taking place and take specific interpersonal action as needed. PSI initially established their hotline to encourage reports of theft or mismanagement of the distribution process, but it proved to be particularly valuable during the toxicity crisis.
- If toxicity of nets, and potential non-use, is an issue, establish a crisis group. This should include authorities from the NMCP and primary health care, together with representatives from net suppliers, at the very

least. A representative from the MOH should also be present or at least briefed daily. Key institutional members of RBM, notably WHO and UNICEF, as well as campaign partners, should also be involved. Staff of the Expanded Programme for Immunization (EPI) who have managed vaccination campaigns in the past are most likely to have handled rumours arising within the cultural context, so if possible, take advantage of their experience.

6.6. Post-campaign communication

Post-campaign communication is crucial to encourage and sustain net use, and must be built into the planning process and given adequate resources. Campaigns involving LLINs require a significant BCC component to ensure that people do hang and use the nets that they have received, and that these nets are used by the target groups. Interpersonal communication is often the most effective method to promote change in behaviour. Messages can be reinforced by mass media, community events and visits by community volunteers and/or health clinic staff.

Post-campaign visits provide an opportunity to follow up any members of the target population who missed the campaign, and deliver information on the importance of routine health services. Promotion of routine services is crucial to sustaining gains achieved during a campaign.

Ongoing post-campaign communication

For three to four months following the distribution, especially if distribution falls at the beginning of a rainy season, it is advisable to conduct an ongoing media campaign to promote continuous use of the nets. Periodic radio and TV spots will reinforce messages. Where resources are available, consider producing a series of spots that will build on each other or tell a story to engage audiences, while delivering the key messages from the communication plan.



Kenya © Maggie Hallahan / Summitomo Chemical

Ongoing communication at the community level is also important. Health workers should be encouraged to remind patients about net use when they come for consultation, and to conduct health talks that include net use messages. Where there are civil society organizations with existing community health activities, messages about net use and care and repair can be integrated with those activities.

“Hang-up”

See Brief 10: *Hang-up*.

Hang-up campaigns are a time-limited activity that uses door-to-door visits and interpersonal communication by community volunteers to assist households with physically hanging up the nets they received during the campaign and encouraging net use, care and repair. Many countries implement hang up campaigns within the first five to seven days following distribution, but hang-up can also take place during targeted periods (such as the start of the rainy season) to increase utilization rates. Hang-up activities can also involve community mobilization meetings with leaders and beneficiaries. These activities, based on interpersonal communication, also offer

a good opportunity to inform pregnant women and families with children less than 12 months of age about routine immunization, antenatal care, vitamin A supplementation, availability of nets, intermittent preventive treatment (IPT) during pregnancy and other health services.

COUNTRY CASE STUDY

In Togo and Sierra Leone, post-campaign coverage and utilization surveys showed a significant difference between net-hanging rates in houses that had received a visit from a community volunteer versus houses that had not received a visit. Anecdotal evidence from Equatorial Guinea indicates that houses generally did not install nets without the assistance of community volunteers. Preliminary results of a hang-up campaign carried out in Grand Bassa County in Liberia showed that there may well be a highly significant increase in net use, and in Ghana, anecdotal evidence showed that the one-on-one communication at the household level between volunteers and community members has helped to increase knowledge significantly.

Keys to good hang-up:

- Appropriate planning for hang-up is crucial. The number of volunteers must be sufficient to reach the targeted households and the supervisor to volunteer ratio must be calculated to ensure that all volunteers can be visited over the course of the activity. Community mapping during the pre-campaign period can assist with calculations of needs.
- Time household visits for when people will be at home. This will vary in urban and rural areas, and according to the season of the year. Maximize the impact of the visits by making them when the whole family is likely to be home and available for a discussion.
- Strong training is essential. Allocate enough time and resources to the training to ensure that volunteers are fully knowledgeable about the key messages they are to deliver, the monitoring forms they are to fill out, and the difficult situations they may encounter. Ensure that practical exercises and role plays are included in the training agenda. If possible, visit households with volunteers and observe them actually talking to households and filling in the form. Corrective action can be undertaken during the training to ensure success in rolling out the actual activity.
- Some households need extra help to get the net hanging, while others will benefit more from the interpersonal communication with the hang-up volunteer. So that volunteers can assist households with physical hanging of the net, include resources such as hammers, nails and string or rope. Estimates for the amount of rope and number of nails needed should be made at the planning stage and included in the budget, and should take into consideration whether distribution has been door-to-door or via a distribution site. Estimates will also need to make some assumptions about the proportion of beneficiaries who will need individual help to hang nets.
- Independent monitoring of activities is recommended to ensure quality of household visits and that all households are covered.

A comprehensive training manual for hang-up is included as Resource R6-11 on the CD.

Net care and repair

As part of post-campaign communication, it is important to emphasize that nets will require a certain level of care and will need repairing if they get torn. While studies show that the insecticide remains effective for at least three years, the physical condition of the net is a key factor in how long a net can be useful. Daily use, washing, smoke or embers from cooking fires and rats all cause holes and tears. It is important to remind households to:

- wash the net as little as possible (no more than five times a year)
- use only mild soap for washing
- hang the net to dry in the shade
- avoid rough handling of the net, to keep it from tearing
- repair small holes as soon as they appear with needle and thread
- tie the net up during the day

Nets provide better protection for longer with good care and repair.

6.7. Producing materials

Developing a creative brief

See Brief 5: *Branding and promoting social norms.*

A creative brief is an outline of written or published material's purpose, main content points and key features. Its main purpose is to serve as a set of instructions for the creative agency or artist who will produce the material. A creative brief is both a process and a product. The process is a step-by-step approach to deciding what the message will be. The product is a short document (two to four pages) that captures these decisions. The creative brief serves as a:

- **blueprint:** like an architectural drawing, the creative brief illustrates the building to be constructed; it outlines your communication objectives, the type of material needed, the tone and necessary visual or audio elements,

and builds on the information and research that you collect during the planning process

- **buy-in:** the creative brief is a good way to get decision-makers to focus on the key elements of the message to be developed; it can be used as a starting point for discussion to get agreement on the approach, the timing of all the production steps, and the budget

See Appendix 6D for further information on the creative brief.

A creative brief must be able to be modified, depending on results of any pre-testing. Even if materials are being adapted from another source, a creative brief is helpful to detail the adaptations and to ensure that communication objectives are achieved.

A creative brief template for a radio spot is included here.

- 1. Target audiences:** Who do you want to reach with your radio spot? Be specific.
- 2. Objectives:** What do you want your target audiences to do after they hear this radio spot?
- 3. Obstacles:** Which beliefs, cultural practices, social pressure or misinformation are barriers to your audience doing that action?
- 4. Benefit:** Select one single benefit that the audience will experience upon doing the action, from the audience's point of view.
- 5. Support statements/reasons why:** Include the reasons the benefit outweighs the obstacles and why what you are promoting is beneficial. These statements often become the messages.
- 6. Tone:** What feeling or personality should your communication have? Should it be authoritative, light and humorous, emotional ...?
- 7. Opportunities:** Which times, seasons or events increase the likelihood of reaching your audience? In which other ways might the spot be used?
- 8. Creative considerations:** What should the writers and producers keep in mind during development? Which format is best for the selected radio stations and preferred by the target audiences: announced or produced, monologue, dialogue, testimonial, informational? Will the spot be in more than one language? Who are the characters? Which words, phrases or jingles should be used?

Prepare an additional page which summarizes the results of any research you have gathered or reviewed. Since most creative agencies or artists are not experts on the health topic and context, this will help them focus and understand the situation.

Contracts with creative agencies and artists

A strong contract will prevent money from being wasted and protect both you and the agency from problems. The contract should clearly lay out responsibilities and the expected deliverables, timeline and the ownership rights to the materials that are produced. It should also specify that the agency's work is finished only when final approval has been given, as part of the payment plan, so that the agency cannot continue to charge for each change made after pre-testing, for example. See the Resources CD R6-12 for a sample contract.

Radio and television spots

See Brief 9: *Planning and implementing social mobilization and social and behaviour change communication.*

In most countries, radio reaches a much larger percentage of the population than television, and is a more cost-effective method of disseminating information to the general population.

For integrated and stand-alone campaigns, key messages should be developed and pre-tested at the national level by members of the social mobilization sub-committee. Materials, once pre-tested and approved, should then be translated into selected major local languages (where appropriate and budget permitting) and sent to the regions and districts for dissemination.

To be effective, radio spots must say the right thing, in the right way, to the right people, at the right time, via the right channel, with sufficient frequency for a sufficient period of time, whether adapted or developed from zero. This means they should be developed for a specific audience. They need to communicate a clear objective – a practical, clear course of action, that your target audience is capable of doing. And they should promote one benefit that persuades your target audience to do what the spots are asking.¹

Whether on radio or television, the need for messages to recognize cultural and religious differences is very important. In most African countries, there is a diversity of languages. Translation of messages at the national level should consider this situation to ensure acceptability of the final product. Pre-testing at the sub-national level among the target audience is vital. The wrong accent or terminology in the voice-over can make a message lose its target audience. This becomes even more critical with television spots, where visuals are a key component of the message being delivered. Ages and genders of the characters should promote the believability and weight of the message.

District and community radio can target specific cultural and language groups, as well as groups with access barriers related to beliefs or misunderstandings about the interventions. Dissemination of messages in local languages ensures that the communication will reach even those who do not speak the official languages of the country. It is important to reach groups that may otherwise lack information about the campaign and its value.

In some countries, the national level will produce radio spots in the national and major languages, and regional, district and community radio stations will translate them to local languages either free of charge or for a limited fee.

See resource R6-13 for the Spot-On Malaria: Guide to adapting, developing and producing effective radio spots.

Posters, flyers, stickers, t-shirts and other visuals

Posters and banners are useful for identifying campaign distribution sites, especially in non-clinic sites in urban or very rural areas. They should match the overall look of the other campaign materials, and clearly show the campaign logo (if there is one), key messages and partner logos. As with television and radio spots, persons featured on the print materials should be respected and culturally appropriate. Pre-testing will help to resolve any issues in terms of images used.

By themselves, posters are not very effective at changing behaviours, but when used as part of a comprehensive communication plan, posters, stickers and t-shirts can reinforce interpersonal and mass media messaging.

Flyers are sometimes included at the distribution point so that beneficiaries can refer to them when they are at home. If used, these should be easy to understand by non-literate audiences. When developing the communication budget, ensure that community and district radio and



Sierra Leone © United Methodist Church

interpersonal communication are fully funded before spending money on flyers, since in many countries a significant proportion of the population may be non- or semi-literate.

T-shirts or aprons printed with the campaign logo can identify campaign staff and volunteers and being instantly recognized, may help them gain ready access to households. Aprons or bibs may be the most practical. The Red Cross Red Crescent has found that personnel who received t-shirts to wear during distribution and hang-up did not wear them daily as they needed to wash the t-shirt during the activity, whereas aprons or bibs which go over clothes can be used for multiple days in a row.

Songs and drama

Songs and drama can be an effective way to deliver messages about the campaign and its benefits.

COUNTRY CASE STUDY

The 2007 Mali campaign, the 2009 Kano State campaign in Nigeria, and the 2009 Senegal campaign all broadcast songs throughout the target regions to raise awareness about their respective campaigns, and to engage audiences. In each case, local artists were approached and donated their time, and songs were created using key messages from the campaign communication plan. In Mali and in Senegal, multiple famous artists sang together, so that portions of the campaign song could reflect different linguistic and cultural backgrounds, and to show the whole country they were united against malaria.

Drama can be very effective, although on a smaller scale, particularly in schools and at social gatherings. Local volunteers, familiar with their audience, can put across simple messages via a brief play performed to the community.

Community and/or interpersonal communication

Community health workers or volunteers who are familiar with the population and the context are able to tailor messages to include community-specific barriers that may affect attendance during mass LLIN distribution activities. Community health workers and volunteers, given their knowledge of their area, are also best placed to be able to follow up households who have not participated in the campaign and discuss with parents and caregivers the importance of health interventions. Facility-based health workers are also effective agents for communication where they are respected by community members and considered a reliable source of information.

At the community level, some of the most effective and influential means of communicating messages (in addition to face-to-face contact) include drama, songs, stories, football matches and street announcements by volunteers, town criers and schoolchildren. Another option for reaching the community is school-based communication from teachers or MoH personnel. Children will talk with their families at home about what they have learned at school, reinforcing messages heard from other channels.

6.8. Monitoring and evaluating communication activities

See Brief 9: *Planning and implementing social mobilization and social and behaviour change communication.*

Chapter 8 contains more detailed information on overall monitoring and evaluation (M&E). However, both activities must be included here to demonstrate the importance of M&E for communication activities. It should fit within the larger M&E plan for the campaign, developed by the technical sub-committee or a separate M&E sub-committee. It is however important for the communication sub-committee to provide input to the plan, to make sure that communication activities are captured in supervision, monitoring and evaluation activities and tools.



Uganda. © MENTOR Initiative

Monitoring

Monitoring communication activities during the campaign is crucial as some volunteers, in spite of intensive training, may be disseminating inaccurate information that could endanger the campaign. Monitoring during campaigns must be timely in order to correct potential negative rumours.

Communication elements and indicators should be included in all of the monitoring and supervision tools for the campaign (before, during and after). Pre-campaign and during campaign checklists for supervisors to assess planning and implementation status should include elements related to communication.

The first step is to determine objectives for day-to-day monitoring of activities and operations. These objectives should measure whether activities are on track, how close they are to meeting the projected timeline and budget, and whether staff members understand and perform their roles correctly. The specifics of the intended communication activities will determine the elements and objectives to be included in the process evaluation. This type of

information should be collected and reviewed regularly to make programme adjustments and to ensure that the incoming data is reliable, complete and timely.

Key questions to ask when conducting monitoring for communication activities include:

- Were the planned activities completed, including timely arrival of communication materials at the furthest campaign sites?
- Were the BCC activities on-message?
- Did messages reach the majority of the population?
- Did the target population attend the campaign and receive the interventions?
- Among the people who attended the campaign, are the LLINs that were distributed hanging in households?

The effectiveness of communication can be monitored before the campaign, by interviewing potential beneficiaries regarding the upcoming activity and the importance of their attendance. For example, questionnaires and short interviews can be conducted to determine the understanding

of services being provided during campaigns. In addition, exit interviews can be conducted with beneficiaries as they leave distribution posts to determine the source of information for their participation, as well as the key messages that they have retained about malaria prevention and LLIN use.

Indicators for each country will depend upon specific communication approaches utilized by partners in that country. Therefore, process and output indicators can vary from country to country to reflect the specific communication plan. As a rule of thumb, each activity should have a way of being monitored and/or evaluated.

Evaluation

Evaluation, as opposed to monitoring, takes place once a campaign has been completed. Nonetheless, it is important to plan for the evaluation well in advance. As with monitoring, the communication sub-committee needs to ensure that appropriate questions are added into evaluation tools, to enable the communication activities to be measured in terms of impact and effectiveness.

In a **process evaluation**, no survey is done, or only very rough surveys are conducted to get a sense of results. Monitoring data and supervision reports play a large role in a process evaluation report, as can the minutes or results from review meetings at local level following the campaign.

If a **post-campaign household survey** is being planned, it is important to work with the technical or M&E sub-committee to include in the questionnaire appropriate questions about the communication activities and their impact. If the country is using an upcoming malaria indicator survey (MIS), demographic and health survey (DHS) or multiple indicator cluster survey (MICS) to evaluate the impact of the campaign, it may be difficult to add a large number of questions on communication,

as the questionnaires are already quite long. A post-campaign household survey should ideally measure the following:

- Exposure to campaign messages, to determine which channels were successful at reaching the population, as well as to measure which messages were retained by the population. Note that it may be difficult for people to recall messages accurately that they heard more than two months in the past.
- Whether households received a hang-up visit, if hang-up was included in the strategy.
- Additional questions regarding net care and repair, reasons for not wanting to use nets, recall of the campaign slogan, knowledge of malaria and malaria prevention, and levels of perceived threat of malaria and perceived self-efficacy can be helpful to include in order to refine the post-campaign communication strategy.

By measuring exposure to messages and to the various channels used, it may be possible to determine which messages and/or channels were most effective at encouraging or changing behaviours. The answers to these questions will inform not only the communication strategy after the campaign, but will also help the planning for communication in future campaigns. Evaluation of effectiveness of communication activities should be included in the final report, so that others implementing integrated or stand-alone campaigns may be made aware of what worked and what did not, especially for particular countries, communities or minority groups. The results of the evaluation of the communication activities can also be used to guide future funding proposal development by providing data on what has worked and associated costs.

For sample questions to include on a post-campaign survey, please see Chapter 8, Monitoring and evaluation and Net Use M&E Guide (Resource R6-14 on the CD).

6.9. Key communication recommendations

See also Brief 1: *Key communication recommendations*.

Campaigns implemented to date have led to clear lessons learned. Often communication activities are undervalued by countries and by donors, leading to underfunding and insufficient planning and evaluation. Recommendations for communication activities include:

- A rational, costed communication plan should be developed sufficiently early to allow for prioritization of key activities. Key partners, organizations and private sector companies that are able to contribute to mobilizing the community by producing and disseminating messages via print, radio or television or able to take other measures to ensure participation and ownership should be engaged in the planning.
- The communication plan should contain harmonized key messages for each stage of the campaign: pre, during and post, to ensure beneficiaries are reached with appropriate and prioritized messages.
- The basic campaign message and key materials should be pre-tested prior to

production and dissemination. What has worked in the past may not be appropriate in the new situation.

- For integrated campaigns, the number of interventions increases the number of key messages that need to be coordinated and harmonized. Care should be taken not to overwhelm the target audience with too many messages. Focus should be on key benefits and actions they need to take. Communication activities, including IPC messaging and mass media dissemination, should have a clear planning calendar and should be included on all supervision checklists and monitoring forms. Activities should be monitored pre-, during and post-campaign to assess effectiveness and to ensure remedial action if necessary.
- Communication activities must be included in the evaluation of the campaign to provide an assessment of their effectiveness, both in terms of reach and reception of messages, and in terms of their cost-effectiveness. Funds should be invested appropriately to ensure maximum reach.
- Communication activities should be included in final campaign reports to use as a future advocacy tool. A brief review of the relative cost and effectiveness of the materials should be included.

Resource materials

R6-1 Communication budget and timeline (English and French) (Excel)	R6-8 Training manual, Uganda (English) (Word)
R6-2 Terms of reference for the communication sub-committee (Word)	R6-9 Formation manuel du relais, Senegal (French and Wolof) (Pdf)
R6-3 Mali Plan d'action – Campaigne intégrée (French) (Word)	R6-10 Volunteer duties, Sierra Leone (English) (Word)
R6-4 Mali communications plan – integrated campaign (English) (Word)	R6-11 Hang-up guide to home visits, IFRC (English) (Pdf)
R6-5 Macro-plan, Senegal (French) (Excel)	R6-12 Sample contract with a creative agency, PSI Kenya (English) (Word)
R6-6 Generic micro-plan, Senegal (French) (Excel)	R6-13 Spot on Radio Guide Malaria (English) (Pdf)
R6-7 Job Aid (English) (Pdf)	R6-14 Net BCC M&E guide (English) (Word)

Appendix 6A: Distinguished visitors

See also Brief 7: *Developing advocacy events and materials.*

Helpful points for both international and national partners to plan for visitors include:

- Plan early (at least four to six weeks ahead of launch) and set deadlines for announcements of arrivals to facilitate protocol issues (such as visa, use of VIP rooms and other services at airport), as well as planning various meetings and activities. Note that special permits may be required for visitors to travel to conflict areas or refugee/displaced person camps.
- Plan for the launch to be a few days before the start of the campaign to allow for this event to be:
 - used as a social mobilization activity
 - picked up by the media to help in publicity
 - attended by high-level donors and visitors
- Ensure that each organization bringing visitors is “attached” to an in-country host organization.
- A central planning person or a small group of individuals representing organizations with visitors coming to a country should draft itineraries for all arriving groups. Working together will ensure no overlap on field trips planned to avoid overcrowding at sites.
- International partners should be asked whether their preference is to go to the field (and if so, for how long and how far) or if they prefer to stay around the capital city. Planning should be done accordingly.
- For site visits, ensure that the MoH provides a list of appropriate sites and that the site supervisor has been informed of the arrival of visitors.
- Visitors should receive a briefing from campaign planners or the public relations focal point that explains the scale of the campaign, what they are going to see, how the campaign was planned and its importance for the health of the beneficiaries. Include a safety briefing at the same time. In addition, visitors should receive briefing documents, including safety advice, key contact numbers, restaurant options and a list of “places to visit” during their free time.
- If possible, a reception can be planned for international partners and donors, and hosted by the MoH and in-country partners.
- Often organizations will wish to arrange “high-level” protocol visits for their most important visitors. If possible, organizations should arrange together to meet with key individuals, such as the health minister or the president of the country, to minimize the number of requests for visits.
- When organizing vehicle rentals, make sure that there are functioning safety belts and that the car and driver are insured. Make sure to include first aid kits in the car, water/food supply for any emergency and appropriate communication mechanisms if there are security concerns.
- Ensure that each visitor has written basic and essential information about the host country.
- Organize an initial briefing or reception for in-country and international partners to provide information about activities and distribution sites. If the briefing is before the campaign begins, put together a rolling slideshow of photos showing the steps that have been taken and the various activities that are complete. Prepare briefing packages for visitors, media and observers to take with them to read.
- Organize a time for visitors, media and technical observers to debrief about their visit and what they have seen, and allow them to discuss their visit. If this proves difficult given arrival and departure dates and times, assign a focal point in-country to be responsible for collecting and collating written comments into a brief report.

Appendix 6B: Press and media relations

See also Brief 6: *Media engagement*.

- Obtain a letter from the country president or prime minister and send it to major media outlets four to six months before the campaign. Journalists will usually be interested in visiting the campaign on a presidential invitation.
 - Send broadcast media footage (such as film) to partners (national and international) ahead of time for production of mass media materials.
 - Plan for the possibility of negative rumours being published or spread, and have a shared strategy ready for roll-out to counter such rumours. Identify individuals who will perform as spokespeople in charge of positive and negative communication and solicit for partners' commitment to sponsor the activity. See the information on crisis communication in 6.5.
 - Ensure that spokespeople are in contact with one another and are passing similar messages. Preparing a talking points document with agreed messages and statements is helpful to make sure that messages are consistent and effective for the audience and stakeholders.
- Avoid discussion of individual interventions, but focus on the campaign and its impact on improving overall health and child survival.
 - Involve media such as television and radio early in the campaign process in order for the media to get a full picture of what is going on. Often, media tell a story without understanding the background to it. Journalists should be encouraged to visit a village where a LLIN campaign takes place.
 - Media tools should involve local people and should be done at regional and district levels to be sure to reach the targets. Video, photos and radio are very effective if the target population can identify with the content.
 - Local journalists should be trained and briefed on the campaign. They should be encouraged to use their role to promote and support activities. Journalists should be encouraged to get in touch with doctors and community leaders to get better stories and to use these stories to mobilize support for the campaign, as well as to mobilize the population to participate.
 - Post-campaign advocacy with the media can focus on follow-up, including the utilization of LLINs.

Appendix 6C: Pre-testing

See also Brief 3: *Using research and data to plan effective social and behaviour change communication.*

Once communication materials and messages are developed, it is crucial to pre-test them before disseminating them widely. Pre-testing is a way to find out from members of your intended audience how to improve your draft materials.

Pre-testing helps to avoid costly errors by pinpointing problems before final production and distribution. It helps ensure that materials are appropriate, understandable by your intended audience, non-offensive, and that they communicate your intended message. Even with high-quality formative research, and a talented and creative materials development team, unintended interpretations of the messages and materials can still occur. This can waste resources, alienate or annoy people, and/or communicate the wrong messages. In some cases, these problems can seriously affect the project's impact.

Methods for pre-testing

Pre-testing is most often done using one or more of the following methods:

1. Focus-group discussion: qualitative interviewing typically conducted with groups of eight to ten people representing the intended audience.
2. Informant interview: one-on-one interviews conducted with experts and/or peers whose input is necessary due to their technical knowledge or skill.
3. Intercept interview: brief interviews consisting of short, closed-ended questions, used to assess logos and slogans.

Pre-testing can be carried out by:

1. Representatives from the target audience (most important).
2. Gate-keepers: partners and ministry officials who must approve materials.
3. Technical experts, to check accuracy of information.

It is vital that the pre-testing be done with participants who represent your target audience. Officials and those working in the capital cannot completely put themselves in the shoes of your target population in the village. Take the time to gather a small group of people, or several groups in different geographic areas if needed, and show them the materials.

Pre-testing guidelines

1. Design the pre-test methodology
 - a. Outline characteristics and requirements of pre-test respondents. They should match your intended audience by age, gender, educational level, rural versus urban, etc.
 - b. Decide which method you will use to gather data (focus group discussions,
 - c. in-depth interviews, intercept interviews).
 - d. Draft budget and timeline.
2. Select and train facilitators for the pre-test and ensure that they:
 - a. Understand the material they are pre-testing.
 - b. Can use the pre-test tool.
 - c. Can speak the language of the participants.
 - d. Are similar to the pre-test participants (gender, age, etc.).
 - e. Are able to ask probing questions.

3. Design the pre-test tools using the following questions as a guideline. NOTE: ensure that pre-test questions address both the images and graphics (print and video) and text (written and audio):
 - a. What message does the audience get from the material?
 - b. Who do they think the materials are designed for?
 - c. Is it easy to understand the materials and the message?
 - d. Is there anything offensive? If so, what?
 - e. Is there anything they do not understand? What?
 - f. What do they like about the materials? What do they dislike? (including sounds, voices)
 - g. Is there anything that should be added or removed from the material to improve understandability?
4. Prepare the materials for the pre-test:
 - a. Prepare the tape-recorders or digital voice recorders, or prepare note-takers with pens and paper.
 - b. Make copies of the pictures/drawings for print materials.
 - c. Make copies of text.
 - d. Prepare storyboards for videos.
 - e. Develop pre-test instruments and make copies for facilitators.
 - f. Prepare dramatic readings or recordings for radio scripts, in local language where necessary.
5. Pre-test:
 - a. On the day of the pretest make sure all the participants are present on time.
 - b. If using focus groups, facilitate the discussions using at least two people: one moderator, who asks the questions and the follow-up questions, and a recorder, who starts the tape recording and also takes written notes on participants' reactions to the materials.
 - c. Tape record all discussions if possible.
6. After the pre-test:
 - a. Summarize the findings in a brief report.
 - b. Revise materials in accordance with comments, especially if the majority or "sizeable minority" have made similar comments.
 - c. Finalize materials and produce!

Appendix 6D: Creative brief template

See also “[How to Write a Creative Brief](#)”.

Steps	Instructions
1. Intended audiences	Who do you want to reach? Be specific in terms of primary audience and secondary audiences.
2. Desired behaviours, social norms or policies	What do you want the audiences to know, feel or do after they experience your communication?
3. Obstacles and barriers a) Reasons why the audience is currently not doing this? b) Key constraints to adopting behaviours above	Choose from the obstacles the one that is providing the biggest barrier to adopting behaviours above.
4. Communication objective by audience addressing the key constraint	<i>After the communication there will be an _____ increase in the proportion of primary audience who _____</i>
5. a) Key promise/benefit b) Support statements/reasons why c) Call to action	Select ONE single, subjective benefit that the audience will experience upon following your communication objectives. Use the following formula: <i>If you do (communication objective) _____ you will benefit by (key promise) promise _____</i> Include the reasons why the key promise outweighs the key constraint. These often become the key messages. Continue the sentence from above: <i>Because</i> What do you want people to do or where should they go to use the new product? E.g., “for more information, call the hotline at”
6. Key content	Give key content bullet points grouped in the order they should appear in the material.
7. Tone	What feeling or personality should your communication have? E.g., warm, funny, surprising, innovative, traditional etc., or a combination thereof.
8. Activities	Give details on number and type of materials and activities that are planned to best reach your audience.
9. Openings and creative considerations	What opportunities, (e.g., times and places) exist for reaching the audiences? Is there anything else the creative people need to know? Will more than one language be used? Literacy level? Style? Illustration type?