



Evidence Base to Identify Best Practices

Implementation Kits to Replicate Best Practices

Behavioral Assessment Tool
To Build Future Evidence









Designed to help practitioners working in the field of malaria-related social and behavior change (SBC)

- Understand the potential uses of quantitative and qualitative research in the development, refinement, and implementation of malaria strategic communication plans
- Use this toolkit for guidance in conducting malariarelated quantitative and qualitative research









This toolkit can be used to:

- Determine and understand the demographic, social, and contextual antecedents associated with
 - net use;
 - the uptake of Intermittent Preventive Treatment of malaria in pregnancy (IPTp);
 - Indoor Residual spraying (IRS); and
 - prompt and appropriate treatment of malaria in children
- Estimate the effects of program activities on malaria-related antecedents and behavioral outcomes; and
- Propose focus areas for future programs designed to promote appropriate malaria prevention and treatment behaviors









Three components:

- I. Brief Overview of Quantitative and Qualitative Research
 - a. Decision table
 - b. Illustrative questions by social ecological levels and intervention type.
- II. Quantitative Survey
 - a. Illustrative research plan
 - b. Survey questionnaire
- III. Qualitative Approaches
 - a. Qualitative data collection methods
 - b. Qualitative data analysis
 - c. Select summaries of qualitative studies by intervention type
 - d. Sample interview guides for focus-group discussions (FGDs) and in-depth interviews (IDIs)









I. Brief Overview of Quantitative and Qualitative Research

Decision Table – Key Differences between Qualitative and Quantitative Approaches

Criteria	Qualitative Research	Quantitative Research			
Perspective	Emic: from the perspective of the	Etic: from the perspective of the			
	subject.	observer.			
Key assumption and goal	 Idiographic: everyone, every situation is unique. Attempts a comprehensive, deep understanding. 	 Nomothetic: the social world has laws and regularities (as is in the natural world). Attempts to establish laws, find regularities, generalize, predict. 			
Purpose	 To understand and interpret the social world and social interactions. To seek a richer, more personal picture of individual motives, decisions, or practices. 	 To test hypotheses, look at cause and effect, and make predictions. To calculate numerical indicators/parameter estimates of populations. 			
Research Question	Investigates the "what", "why",	Investigates the "how many" and			
Types	and "how".	"how often".			









I. Brief Overview of Quantitative and Qualitative Research

Quantitative Inquiry

Can you tell me which policies, if any, support the distribution and promotion of bed nets in this population? [For each named] Would you say that policy is implemented fully, in part, or not at all?

Where, if at all, in your community can you purchase or obtain a bed net? Did you get the bed net through a local name of mass distribution campaign, during an antenatal care visit, or during an immunization visit?

How many people in your community sleep under a bed net every/most nights? Would you say most, many, a few or none?

How many total bed nets does your household have? Who in your household sleeps under a bed net?

What times of the year do you sleep under a bed net? Did you sleep under a bed net last night (if pregnant woman)?

Bed Net Use

Qualitative Inquiry

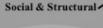
What are the local dynamics, limitations or barriers to the distribution of ITNs? How could these barriers be addressed?

What can be done to make bed nets easier to use? More comfortable to use? What are some reasons that ITN distribution, promotion, and use have been successful or unsuccessful in this population?

What are some reasons that it is important for you to take care of your net? What are some things that people in this community say about others based on their bed net use? What do people say about the

How does your household decide who will sleep under a bed net? Why would some family members sleep under a bed net and some not?

How do you decide what time of year to use bed nets? Why do you only use your net seasonally? (Probe for dry season versus rainy season) Why did you not sleep under a bed net?



Organizational/ Institutional

Community,

Family & Peer Networks

Individual.









II. Quantitative Survey

- A. Two Comprehensive Questionnaires
 - women's
 - men's

Five Modules:

- Demographic characteristics & general malaria-related knowledge and practices
- 2. Bed net use
- 3. Intermittent preventive treatment in pregnancy (IPTp)
- 4. Indoor residual spraying (IRS
- 5. Care-seeking, testing and treatment.
- B. Illustrative Research Plan









II. Quantitative Survey

MALARIA BEHAVIOUR PREDICTORS SURVEY

BACKGROUND INFORMATION

SECTION 1: BACKGROUND INFORMATION

Household member listing

BACKGROUND INFORMATION: LIST OF HOUSEHOLD MEMBERS								
Line #	Usual residents and visitors	Relationship with head of Household	Sex	Resid	dence	Age	Eligi	bility
1	2	3	4	5	6	7	8	9
	Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household. AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP AND SEX FOR EACH	What is the relationship of [NAME] to the head of household?	is [NAME] male or female?	Does (NAME) usually live here	Did [NAME] stay here last night	How old is [NAME]	CIRCLE LINE # OF ALL WOMEN AGED 15- 49	CIRCLE LINE NUMBER OF ALL CHILDREN AGED 0-5
	PERSON, ASK QUESTIONS 2A-2C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK APPROPRIATE QUESTIONS IN COLUMN 5-13 FOR EACH PERSON	USE CODES BELOW				IF 95 OR MORE, RECORD '95'		
01			M F 1 2	Y N 1 2	Y N 1 2		01	01









II. Quantitative Survey

SECTION 2: Insecticide treated nets (ITN)

ITN ownership

	ITN: OWNERSHIP				
1.	Does your household have any bed nets?	YES	Q3		
2.	How many bed nets does your household have?	NUMBER OF NETS	Q4		
3.	Why doesn't your household have any bed nets	NO MOSQUITOES A NOT AVAILABLE B DON'T LIKE TO USE NETS C TOO EXPENSIVE D OTHER (specify) X	ALL SKIP TO Q5		









II. Quantitative Survey

SECTION 3: Indoor Residual Spraying (IRS)

Knowledge and Access

IRS: ACCESS AND USE				
NO.	QUESTION	CODING CATEGORIES	SKIP TO	
1.	Are you aware of programs that spray the	YES1		
	walls inside of a house to kill the mosquitoes	NO2	NEXT	
	that cause malaria?	DON'T KNOW9	SECTION	
2.	Has anyone ever visited your community to	YES1		
	spray the inside walls of the houses to kill the	NO2	NEXT	
	mosquitoes that cause malaria?	DON'T KNOW9	SECTION	
3.	At any time in the past 12 months, has anyone	YES1	Q4	
	come to your dwelling to spray the interior	NO2	Q6	
	walls against mosquitoes?	DON'T KNOW8		









II. Quantitative Survey

SECTION 4: Intermittent Preventive Treatment in Pregnancy (IPTp)

Knowledge

IPTp: KNOWLEDGE					
NO.	QUESTION	CODING CATEGORIES	SKIP TO		
1.	What is the name of the medicine that is given	SP/FANSIDARA			
	to pregnant women to keep them from getting	CHLOROQUINEB			
	malaria?	QUININEC			
		ARTEMISININ COMBINATION THERAPY (ACT)			
	MULTIPLE RESPONSES POSSIBLE	D			
	CIRCLE ALL RESPONSES	ASPIRIN, PANADOL, PARACETOMOL E			
		OTHER (SPECIFY)X			
	PROBE ONCE: Anything else?	DON'T KNOWZ			
2.	When should a pregnant woman start to take	AS SOON AS SHE KNOWS SHE IS PREGNANT 1			
	medicine to keep from getting malaria?	WHEN THE BABY FIRST MOVES2			
		AT HER FIRST ANTENATAL CARE VISIT 3			
		START OF 4 TH MONTH OR 2 ND TRIMESTER 4			
		ANY TIME DURING PREGNANCY5			
		OTHER (SPECIFY) 8			
		DON'T KNOW98			









II. Quantitative Survey

CARE SEEKING AND TREATMENT: PERCIEVED RISK

I am going to read a series of statements about malaria to you and I would like you to tell me how much you agree with them. For each statement, please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with it. INTERVIEWER: DO NOT READ DON'T KNOW OR UNCERTAIN RESPONSE AND ONLY USE OF RESPONDENT IS NOT ABLE TO PROVIDE ANOTHER ANSWER

		STRONGLY	SOMEWHAT	SOMEWHAT	STRONGLY	DON'T
		AGREE	AGREE	DISAGREE	DISAGREE	KNOW/
						UNCERTAIN
26.	I can easily get treatment if my child gets malaria	1	2	3	4	9
27.	My family rarely gets malaria	1	2	3	4	9
28.	People in my community only get malaria when there are lots of mosquitos	1	2	3	4	9









II. Quantitative Survey

EXPOSURE TO MALARIA MESSAGES					
NO.	QUESTION	CODING CATEGORIES	SKIP TO		
13.	In the past 6 months, have you seen or heard any messages about malaria?	YES	Q16		
14. Where did you see or hear the messages or information? Revise options per local context	information?	Government clinic/hospitalA Community health workerB Friends/family			
	Peer educators F Posters/billboards G Television H Radio I				
		Newspaper			









III. Qualitative Approaches

Qualitative Data Collection Methods

Qualitative data are collected with unstructured techniques or semi-structured guidelines. Some common methods are focus group discussions, group interviews, individual interviews, ethnography and participation/observations. The sample size is relatively small, the interviews or other techniques elicit detailed responses and, ideally, yield "rich" descriptions of lived experiences or the processes that lead to particular action or inaction, and respondents are purposively chosen to fit predetermined categories. There is no assumption of randomness or generalizability. The three qualitative approaches used most frequently – ethnography, observation, focus group discussions, and semi-structured interviews – are described below.

Ethnography

Ethnography is a qualitative approach to research that seeks to understand how groups of people interact in their own settings and over time. The focus is often to learn about the socio-









III. Qualitative Approaches

Loll, D. K., Berthe, S., Faye, S. L., Wone, I., Koenker, H., Arnold, B., & Weber, R. (2013). Userdetermined end of net life in Senegal: a qualitative assessment of decision-making related to the retirement of expired nets. *Malaria journal*, 12(1), 337.

Background

Procurement and distribution of long-lasting insecticidal nets (LLINs) in the African region has decreased from 145 million in 2010 to 66 million nets in 2012. As resources for LLIN distribution appear to stagnate, it is important to understand the users' perception of the life span of a net and at what point and why they stop using it. In order to get the most value out of distributed nets and to ensure that they are used for as long as possible, programs must communicate to users about how to assess useful net life and how to extend it.

Key Research Question(s)

- What are the users' perceptions on the life span of a net?
- At what point and why do users stop using nets?

Methods

Data were collected from 114 respondents who participated in 56 *in-depth interviews* (IDIs) and eight *focus group discussions* (FGDs) in August 2012 in eight regions in Senegal. Households were eligible for the study if they owned at least one net and had an available household member over the age of 18. A team of four coders coded the data in ATLAS.ti using a primarily deductive approach.

Rationale for method choice: In trying to understand net users' perceptions on the lifespan of nets, the use of IDIs helps identify individual perceptions and preferences independent of group/social influence, and the use of FGDs helps elicit social normative responses that exist within the population of interest as a group. By using both IDIs and FGDs, the researchers tried to gain a full understanding of the individual as well as the interactive group dynamics around the lifespan and use of a net within the target population. Qualitative inquiry allowed for more flexibility and increased depth in understanding net users' perceptions on the lifespan of nets, rather than limiting it to a quantitative inquiry within the researcher's understanding. The qualitative approach was thus able identify contextual and situational factors associated with the net users' perceptions.

Results

Respondents reported assessing useful net life using the following criteria: the age of net, the number and size of holes and the presence of mosquitoes in the net at night. If they had the means to do so, many respondents preferred the acquisition of a new net rather than the continued use of a very torn net. However, respondents would preferentially use newer nets, saving older, but useable nets for the future or sharing them with family or friends. Participants reported observing alternative uses of nets, primarily for nets that were considered expired.

Recommendations

In the context of uncertain resources, it is important that households continue to use their nets for as long as possible. The lengthening of net life also maximizes the value for money of nets procured by individuals, governments, and aid donors. This research provides an initial look into the cues for retiring or repurposing one's net. Additional research is needed to further understand how households decide to stop using nets and how health communication programs can encourage communities to undertake measures to prolong useful net life and prevent damage through care and repair activities. Finally, malaria policymakers need to develop recommendations surrounding the useful life of nets and communicate these guidelines to those in malaria-endemic countries, while implementing strong continuous distribution systems to ensure access to replacement nets, as needed. This will help to ensure that people are protected by their nets for as long as possible, without putting themselves at risk by continuing to use nets that are no longer protective.









III. Qualitative Approaches

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