



# Lessons from the integrated life-cycle based health campaign in Uganda

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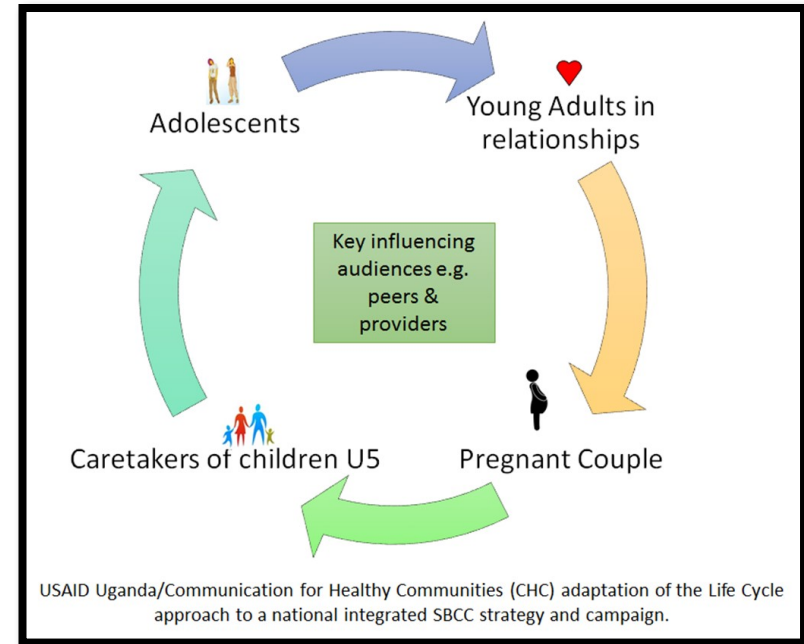
# The Challenge at Inception

## ❖ An audit of HC interventions revealed:

- Limited implementation & scale-up of HC.
- Fragmented implementation of interventions.
- Diseases focused messaging – many messages.
- Audience fatigue with instructive messages .
- Disconnect between mass media & IPC

# Response

- ❖ Formative research
- ❖ Segmented audiences, analyzed social determinants using the Social Ecological model (McKee et al., 2000)
- ❖ Developed an integrated life-cycle based health communication platform called OBULAMU.
  - *Which means, “How’s Life?”*
  - *Responses go beyond “good” or “bad,” to elicit detailed responses about life and feelings.*
  - *Engages people in a conversation, finds out what’s important to them and in their circumstances*



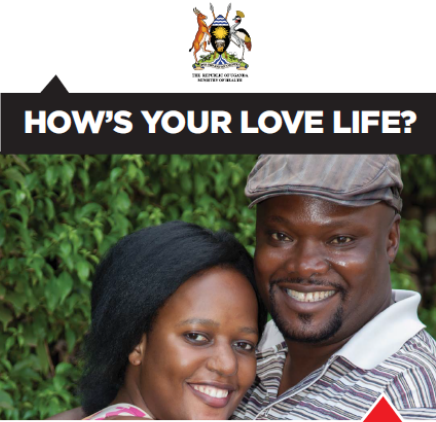
Young adults in relationships	Pregnant Couple	Care Takers of U5s	Adolescents
<ol style="list-style-type: none"> <li>1. Condom use</li> <li>2. Mutual fidelity – reduce sexual partners</li> <li>3. HIV testing &amp; knowing results</li> <li>4. Circumcision for men and support from partners</li> <li>5. Prevention of unplanned pregnancy</li> <li>6. Discordance &amp; adherence to positive prevention &amp; treatment</li> <li>7. TB screening and testing for cough more weeks.</li> <li>8. Correct information on SRH</li> </ol>	<ol style="list-style-type: none"> <li>1. Recognize dangers signs of pregnancy</li> <li>2. Birth preparedness plan</li> <li>3. Early ANC attendance</li> <li>4. At ANC demand IPTp 1-2: Test for HIV and &amp; enroll into eMTCT if positive, receive malaria net and sleep under it)</li> <li>5. Newborn care practices</li> <li>6. Deliver at a health facility</li> <li>7. Adhere to ART &amp; breastfeeding guidelines</li> <li>8. Post-partum care including FP</li> <li>9. Good nutrition practices</li> <li>10. Early Initiation of Breastfeeding</li> </ol>	<ol style="list-style-type: none"> <li>1. Breastfeeding within one hour after birth</li> <li>2. Exclusive breastfeeding for first six months</li> <li>3. Complementary feeding</li> <li>4. Nutrition for breastfeeding mothers</li> <li>5. LLIN use for children under 5 years</li> <li>6. Childhood diseases (diarrhea, pneumonia)</li> <li>7. Child immunization</li> <li>8. Water Sanitation &amp; Hygiene (WASH)</li> <li>9. Child Spacing</li> <li>10. Adherence to ART for mothers and children (pediatric ART)</li> <li>11. Return to the health center (mother and child) for regular check-up and ART refills</li> </ol>	<ol style="list-style-type: none"> <li>1. Information on body growth and changes</li> <li>2. Negotiation &amp; decision making skills on sexuality</li> <li>3. Prevent unplanned pregnancy, HIV and other STIs</li> <li>4. Dangers of early sexual debut and early parenthood</li> <li>5. Condom use for sexually active</li> <li>6. Circumcision for boys</li> <li>7. HIV testing &amp; knowing results</li> <li>8. ART Adherence</li> </ol>

*Figure showing key actions for the four Life Stages in the OBULAMU campaign. Each of these actions is creatively developed into specific messages to support HIV prevention, ART uptake and adherence, contraceptive choices and use, MCH, nutrition, TB and malaria prevention and case management.*

# Obulamu?

## Campaign Rollout

### Life Stage 1



**HOW'S YOUR LOVE LIFE?**


**HE CARES!**  
He got circumcised to reduce the risk of HIV.

**TAKE CHARGE OF YOUR LIFE!**  
GO TO YOUR HEALTH CENTER FOR MORE INFORMATION

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THIS MESSAGE IS CLEARED BY UGANDA AIDS COMMISSION

### Life Stage 2



**HOW'S YOUR PREGNANCY?**

**INVOLVED!**  
We go for antenatal together.

**TAKE CHARGE.**  
Go to the health center for more information.

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### Life Stage 3



**How is your baby?**

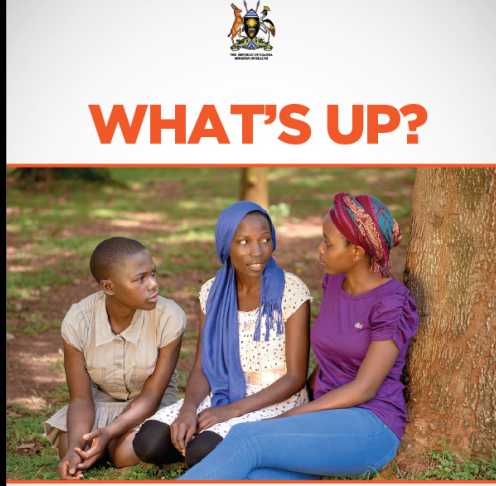
**At 6 months, she is eating soft foods**

**WHAT ABOUT YOURS?**

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For more information, call toll free 0800 100055

### Life Stage 4



**WHAT'S UP?**

**I met this boy and I really like him.**  
**WHAT'S MY CHOICE?**

TALK TO A TRUSTED PERSON OR CALL,  
TOLL FREE NUMBER 0800120333

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1. Interpersonal Communication (Campaign Champions, one-on-one, small and large group activations)
2. Mass Media (Radio, TV and outdoor placements)
3. Social Media (Facebook and Twitter)



# Results

- ❖ Standardization of messages and interventions.
- ❖ Country-wide adoption & scale-up by GOU & partners.
- ❖ Shift from disease-based communication to audience-specific programming.
- ❖ Massive appeal of the brand & campaign which improves IPC connection.
- ❖ Daily reach of estimated 10 million people.
- ❖ Early results show: average exposure of 85%, intention to act 60%, and 10%



# Key lessons to date

- ❖ It takes time to build consensus and secure buy-in from IPs and government agencies on key actions for each life cycle.
- ❖ Integration is still a new concept, many partners still prefer the comfort of the disease based approach.
- ❖ Cross cutting audiences e.g. KPs & PLHIVs are difficult to prioritize for each life stage.
- ❖ Health facilities' set up and personnel are not ready to provide integrated services.
- ❖ The traditional types of evaluation limit the learning agenda. There's need for more agile methodologies.

# Obulamumu?

