

EXPLORING DIGITAL OPPORTUNITIES FOR DRIVING MALARIA ACSM PATHWAYS IN NIGERIA.

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Background

Despite the urgent need to combat malaria, structural and institutional barriers still intersect with challenging socio-economic and infrastructural context to impede the successful implementation of prevention behaviour in most rural areas of South-West Nigeria where the incidence of malaria remains a threat.

Malaria prevention, control or elimination will contribute to sustainable development, especially the achievement of SDG 3 and its Target 3.3 which focuses on ending epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combating hepatitis, water-borne diseases and other communicable diseases by year 2030.

This study explored contemporary and pragmatic approaches that highlight opportunities in digital space for the application of ACSM for malaria prevention.

Method

Expert interviews on the implementation of ACSM activities in selected rural areas of Oyo and Osun states, and a review of the ACSM strategies recommended by the World Health Organisation (WHO).

Findings

1. Wrong positioning of communication professionals in the ACSM process.
2. Lack of coordination between the state, RBM and Partners as it affects ACSM particularly development of malaria prevention information.
3. ACSM strong at the national level, but not well positioned in the states

Integrating Digital solutions into ACSM Pathways

1. Success of digital communication initiatives in the COVID-19 era should be consolidated into malaria prevention initiatives.
2. Community leaders/Malaria Ambassadors should have digital platforms for information dissemination, consultation and counselling on safe practices for malaria prevention.
3. Mobile network providers should be brought into the loop of ACSM to leverage on their technological resources to offer cheaper communication opportunities.

Conclusion

Addressing the existing challenges around the ACSM pathways through the strategic integration of digital solutions is imperative to ensuring equitable access to malaria prevention resources and to mitigate the burden of malaria in Nigeria, especially among rural communities.

In the two states use for this study a member of staff of the Ministry of Information is made a member of ACSM Committee headed by the State Health Educator, a professional Nurse. The Committee is responsible for the design and implementation of ACSM activities in relation to malaria prevention in each stated

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