



U.S. President's Malaria Initiative

Creative Brief 1 – SSFFC Radio, TV Spots and Poster 1

Shared Vision: Nigerian adults and caregivers of children will access and use good quality malaria medicines to treat malaria.

Background: Approximately 10 percent of artemisinin-based combination therapy (ACTs), the recommended anti-malarial for treatment of uncomplicated malaria, are substandard or falsified, making them ineffective in treating malaria. Most of these are substandard. Some are counterfeit. Substandard and falsified ACTs are most commonly available at unlicensed medicine dealers; they are much less common at health facilities and licensed pharmacies. The National Agency for Food and Drug Administration and Control (NAFDAC) in Nigeria has implemented some interventions to protect the public and have assigned numbers to all ACTs legitimately manufactured or imported into Nigeria. They have also insisted that all ACTs carry a scratchpad consumers can use to determine whether or not the ACTs they buy are legitimate. It is much more difficult to identify substandard medicines; these are usually identified when they do not work to treat diagnosed malaria.

Priority Audience: Consumers of ACTs. These are caregivers of children, adults who are ill and people whom self-medicate. For the purpose of this campaign, communication will be directed at a sub-segment of this group, who have a low social status, low income, low literacy and are living mostly in rural areas or urban slums. Members of this audience segment have a negative perception of health workers, believing that health workers are unfriendly and won't treat them nicely. They also have problems going to health facilities because they are a long distance away, the cost of services and long wait times at the facility. On the other hand, they respect health workers as sources of accurate information about health. There is a perception among these audience members that malaria is normal and that Patent and Proprietary Medicine Vendors (PPMVs) or medicine hawkers have the right medicines to treat their ailments.

Communication Objective: As a result of our communication, our audience will:

- **Know** that:
 - Malaria is a dangerous illness that should not be toyed with at home, but should be promptly treated at a health facility.
 - ACT medicines are the government recommended treatment for malaria.
 - Self-medication exposes them to substandard and falsified malaria medicines that worsen the malaria problem.

- **Feel** that health workers and health facilities are there for them, and the time and money spent at the health facility are worthwhile since they are protected from spurious, substandard, falsified, falsely-labeled and counterfeit (SSFFC) malaria medicines if and when they use health facilities.

- **Action:** If they experience malaria symptoms, they should go to the nearest health facility and demand they are tested before treatment, buy medicines prescribed by the health worker from licensed PPMVs/pharmacies and take the precautions recommended by NAFDAC to ensure they are using good quality medicines.

Competitive Behavior/Barriers:

1. A preference for cheap medicines – substandard and falsified medicines are usually cheaper than good quality medicines.
2. To avoid long waits at health facilities, many would rather self-medicate and purchase medicines at a PPMV or pharmacy or from hawkers.
3. Many believe they know the signs and symptoms of malaria and there is no need for testing before treatment.
4. Many still ask for Chloroquine because it is widely known and it is cheaper than ACTs. Also, Chloroquine has an anti-pyretic effect while ACTs do not.
5. Many cannot read instructions on the packet about how to use the scratchpad, and do not know how to find/read the NAFDAC number.

Positioning Statement/Key Promise:

If you get tested and treated by a health worker, and take precautions to ensure you buy good quality malaria medicine, you and your child will be more likely to recover quickly when you are sick.

Support Points:

- Not all fevers are malaria. One study found that only 7 percent of people buying antimalarials from PPMVs actually had malaria.
- The only way to know for sure that you have malaria is to test.
- Some ACTs are not good quality, but there are measures that NAFDAC has put in place to help you determine whether or not the medicines you buy are effective.
- When you take poor quality anti-malarial medicines, they will not work to treat malaria. Many children and some adults have died because they treated malaria with poor quality ACTs.

Key Messages:

- Always test before treating for malaria.
- It is best to get tested and treated for malaria at a health facility.
- When buying malaria medicines, only buy from licensed pharmacies or PPMVs. (We need to give some information about how to identify those that are licensed.)
- Check the expiration date and make sure there is a NAFDAC number. (We need to give information about what the NAFDAC number looks like.)
- Scratch the pad and text the number to the toll-free Mobile Authentication System (MAS) number indicated on the package.
- If the medicine does not work, please take the medicine back to the place where you bought it and return to the health facility for diagnosis and treatment.
- If you see/suspect any suspicious activities concerning medicines, call the NAFDAC or the “Make a Difference” (MAD) Malaria hotline.

Call to Action:

When you suspect you have malaria, visit a health facility for testing and treatment. When purchasing ACTs, take precautions to ensure it is good quality: check that there is a NAFDAC number, check the expiration date and use the scratchpad to confirm the medicine is authentic.

Creative Considerations:

1. Radio spots (45 to 60 seconds, in English and Ibibio)
 - a. Tone should be authoritative and caring. Instill trust and audience confidence in their ability to protect themselves and their children from poor quality medicines.
 - b. One spot should focus on where to purchase medicines that are good quality
 - c. One spot should focus on the scratch pad, how to use it and why.
 - d. Avoid unnecessary alarm – we don't want to scare people away from treatment with ACTs.

2. TV spot (45 to 60 seconds, in English and Ibibio)
 - a. Tone should be authoritative and caring. Instill trust and audience confidence in their ability to protect themselves and their children from poor quality medicines.
 - b. Demonstrate someone purchasing ACTs from a licensed PPMV, checking the NAFDAC number, expiration date and using the scratch pad to ensure the medicine is good quality.
 - c. Avoid unnecessary alarm – we don't want to scare people away from treatment with ACTs.

3. Poster 1 (Pidgin English)
 - a. This material serves to remind and emphasize the key messages conveyed by the radio and TV spots.
 - b. Use models made-up to represent this audience segment
 - c. Use the same tone as in the radio and TV spots
 - d. Let the audience easily see the connection between the poster and the electronic materials.

Credits:

Posters: At bottom, display the Health Communication Capacity Collaborative (HC3), Federal Ministry of Health (FMOH), NAFDAC and the U.S. President's Malaria Initiative (PMI) logos side by side. All must be the same size, and none may be higher on the page than any others. Below the logos, in much smaller print, the following statement must appear:

This poster was made possible by the generous support of the American people through the United States Agency for International Development (USAID).

Radio spots: At end of spot, announcer should say:

This message is brought to you by the Federal Ministry of Health and NAFDAC with the generous support of the American people through the United States Agency for International Development.

TV spots: At end of spot, display FMOH, NAFDAC and PMI logos followed by the following text:

This message was made possible by the generous support of the American people through the United States Agency for International Development (USAID).

Technical Specifications: Poster will be A2 size, 135 grams art paper, full color and using photographs

Geographic placement: The radio and TV spots will be broadcast on local stations in Akwa Ibom, Nigeria, and on national stations for national reach. Posters will be placed in PPMVs, pharmacies, health facilities and town halls.

Languages: Radio spots: English and Ibibio
TV spot: English and in Ibibio
Poster: English and Pidgin English