



**Social and Behaviour
Change Working Group**

Virtual Forum: Malaria SBC in Action

September 28 and 29, 2022

Virtual | Zoom

A world map with a blue-to-white gradient, overlaid with numerous white location pins indicating the global reach of the forum. The pins are concentrated in Africa, South America, and Southeast Asia.

Virtual Forum: Malaria SBC in Action

25 Presentations 18 Countries 3 Languages 2 Days

Table of Contents

Background	3
Meeting Highlights	3
Member Engagement	3
Virtual Forum Recordings and Resources	3
Day One - Virtual Forum September 28, 2022	4
Welcome Remarks	4
2022 Steering Committee Elections	7
Technical Presentations	7
Malaria SBC for Service Delivery Panel	7
Malaria SBC for Vector Control	8
Day 1 Lightning Talks	8
Closing Remarks	9
Day Two - Virtual Forum September 29, 2022	10
Welcome Remarks	10
RBM Partnership to End Malaria Working Group Updates	10
Perspectives on SBC from Malaria Program Leadership	11
Technical Presentations	12
Malaria SBC for RTS,S	12
Day 2 Lightning Talks	13
Future of the SBC WG	15
Closing Remarks	15
SBC WG Next Steps	16
Annex 1: Participant List	17
Annex 2: Agenda	17

The SBC WG Secretariat is hosted by the Breakthrough ACTION project, based at the Johns Hopkins Center for Communication Programs, and made possible by the generous support of the American people, funded by the U.S. Agency for International Development (USAID) and U.S. President's Malaria Initiative (PMI) under the terms of Cooperative Agreement No. AID-OAA-A-17-00017. The contents of this report are the responsibility of Breakthrough ACTION and do not necessarily reflect the views of the United States Government.



Background

The RBM Partnership to End Malaria (RBM) [Social and Behaviour Change Working Group](#) (SBC WG), consistent with its Terms of Reference, aims to examine the current state of the science and art in social and behaviour change communication. The SBC WG provides a forum to exchange malaria SBC best practices and experiences; advocate for political, social, and financial resources for SBC as a core component of malaria control; and promote the development of theory-informed, evidence-based SBC programming at the country level.

In place of the 9th Annual Meeting, the SBC WG held the 2022 Virtual Forum on September 28 and 29, 2022 to explore a wide range of malaria SBC content.

Meeting Highlights

2022 Virtual Forum Highlights:

- The 2022 Virtual Forum included more than **25 presentations** from **18 countries** and was attended by nearly **450 participants** from **50 countries**, an increase of nearly 30% from the 2021 Virtual Forum.
- Virtual Forum presentations focused on **SBC for service delivery, vector control, and RTS,S vaccine introduction**.
- New in 2022, the Virtual Forum included five sets of lightning talks, which centred on **malaria SBC at the community level, reaching the unreached, mass media for malaria SBC, working with community and faith leaders, and provider behaviour change and service communication**.
- Members reflected on the successes of the SBC WG over the past year and considered activities for the future.



Member Engagement

SBC WG members can connect and stay abreast of updates through three online channels:

- Subscribe to the **SBC WG Email Listserv**: <https://mailchi.mp/621c2de42f86/rbm-sbc-wg-subscribe>
- Become a member of the **SBC WG's community on Springboard** and connect with over 150 members online: <https://springboardforsbc.org/topics/7020/feed>
- Visit the **RBM SBC WG website**: <https://endmalaria.org/our-work/working-groups/social-and-behaviour-change-communication>

Virtual Forum Recordings and Resources

The presentation slides and meeting recordings, are available on Springboard in English, French, and Portuguese in the [SBC WG Media Centre on Springboard](#).



Day One Key Takeaways:

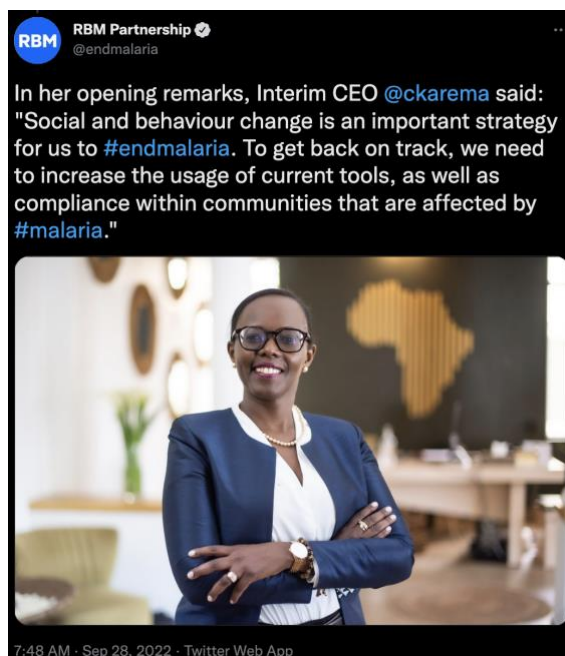
- **Malaria is bouncing back.** We need to strengthen community initiatives, and SBC needs to be included in National Malaria Strategic Plans.
- **Using data to segment audiences in new ways will help us tailor and innovate malaria SBC.** The example of segmenting pregnant women according to their attitudes, perceptions, and knowledge shared concrete ways we can improve ANC attendance.
- **We need to put our SBC data on a map!** Spatial analysis of SBC data on message exposure, recall, and IRS refusal reasons is a powerful way to visualise who, where, and what to target in our SBC programs.

Read more: <https://mailchi.mp/009159c5a1df/takeaways-1-en>

Welcome Remarks

The Virtual Forum opened with introductory remarks from **Gabrielle Hunter**, SBC WG Co-Chair, on behalf of herself and **Mariam Wamala Nabukenya**, fellow Co-Chair. Gabrielle introduced the 2022 Virtual Forum theme – Malaria SBC in Action – which reflected that every country's malaria SBC actions count in the fight against malaria.

Dr. Corine Karema, the RBM Partnership to End Malaria Interim CEO, provided opening remarks. Dr. Karema spoke about how malaria is bouncing back. Over the last two years, the world has seen an increase in malaria, with 214 million cases and more than 600,000 deaths. "We all know that SBC is important and is needed to achieve high coverage," shared Dr. Karema. To get back on track with malaria control goals, Dr. Karema encouraged the SBC WG to ensure SBC is included in all National Malaria Strategic Plans and keep SBC strategies updated and with clear activities and M&E components. The SBC WG needs to also strengthen community initiatives, collaborate with other RBM WGs, and continue to advocate for SBC funding. She ended her opening remarks by saying "*Social and behaviour change is an important strategy for us to end malaria.*"



SBC WG Leadership

Gabrielle introduced and thanked the Steering Committee, Secretariat, and Regional/Linguistic Ambassadors.

2022 SBC WG Steering Committee:

Mariam Wamala Nabukenya
Co-Chair - Uganda



Gabrielle Hunter
Co-Chair - US



Angela Acosta
US



Avery Avrakotos
US



Shelby Cash
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Contact the Lusophone Ambassadors on WhatsApp:
https://bit.ly/GTMSC_WA



MSC para Malaria
WhatsApp Group Invite

2022 Steering Committee Elections

Ashley Riley, Secretariat, thanked the SBC WG Steering Committee for their work and launched the nomination period for the 2022 Steering Committee elections. Terms are ending for the SBC WG Co-Chairs, Gabrielle Hunter and Mariam Wamala Nabukenya, as well as Steering Committee members Naomi Serbantez, Taonga Mafuleka, Debora Freitas Lopez, and Angela Acosta.



From September 28 to October 14, 2022, the Secretariat is accepting [nominations](#) for four Steering Committee seats and two Co-Chair seats. Responsibilities and eligibility criteria are in the [Terms of Reference](#). Following the nomination period, a ballot with eligible candidates will be sent to the SBC WG. If you have any questions, please contact the [Secretariat](#).

Technical Presentations

Malaria SBC for Service Delivery Panel

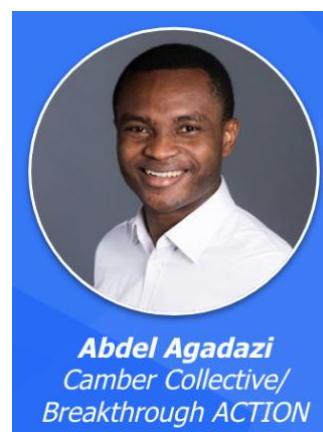
This panel was moderated by **Shelby Cash** of the Steering Committee and included **Abdel Agadazi** of Camber Collective/Breakthrough ACTION and **Yusuf Suraj** of the USAID Integrated Health Program - Palladium on important aspects of malaria SBC for service delivery.

"Segmentation of ANC Clients for Prevention of Malaria in Pregnancy"

-Abdel Agadazi, Camber Collective/Breakthrough ACTION

Abdel's presentation emphasised the importance of using data to segment audiences as it facilitates the use of tailored SBC activities to focus on audience members who are most critical to reach. Segmentation can also be used to design the most effective and efficient strategy for helping each audience adopt and maintain behaviours.

"Once we defined the segments, we built a prototype of a counselling tool to give providers at a facility all the tools necessary to first identify which segment a woman belongs to and also to have specific counselling cards so they can deliver targeted messages for each of the women at the facility." - Abdel Agadazi



"From facility to community: provider behaviour change improves reach of quality malaria care in Northern Nigeria"

-Yusuf Suraj, USAID Integrated Health Program - Palladium

Yusuf emphasised the critical role provider behaviour plays in service delivery as the quality and type of care patients receive may influence a patients' decision to return for future services or maintain healthy behaviours.

"Addressing health worker practice and behavioural determinants such as attitudes towards mRDTs, skill competency, and self-confidence through onsite training and mentoring in their own work environment was effective in



improving provider adhering to malaria standard operating procedures and ultimately resulting in improved quality of malaria diagnosis and treatment.” - Yusuf Suraj

Malaria SBC for Vector Control

This presentation was moderated by **Debora Freitas Lopez** of the Steering Committee and included a presentation by **Pauline K. Wamulume** of the Zambia National Malaria Elimination Programme on using spatial intelligence to improve SBC targeting.

"Towards smarter spraying: Using spatial intelligence to improve SBC targeting for IRS campaigns"

- Pauline K. Wamulume, Zambia National Malaria Elimination Programme

Pauline spoke about the power of using spatial analysis of SBC data on message exposure, recall, and IRS refusal reasons to visualise who, where, and what to target. The Zambia National Malaria Elimination Program used spatial intelligence to improve IRS coverage through real-time monitoring and mapping of data from IRS delivery teams to visualise malaria message exposure, IRS refusal hotspots, reasons for houses missed by IRS, and more.



"By adding the spatial perspective, countries like Zambia can actually detect patterns of SBC delivery and coverage and also mount a tailored, data-driven response to address specific barriers by tapping into local structures and appropriate communication channels.” - Pauline K. Wamulume

Day 1 Lightning Talks

New in 2022 were lightning talks (short, poster-style presentations) that welcomed speakers to briefly describe their recent projects and interventions. Lightning talks were divided into thematic rooms over the two-day Virtual Forum.

Room 1: Malaria SBC at the Community Level

Malaria SBC interventions are impactful at all levels of the socio-ecological model. At the individual and community level, malaria SBC supports communities to overcome barriers to practice malaria-related behaviours critical for successful malaria control and elimination through local social structures, health systems, neighbourhoods, schools, community groups, and more. Many of the presentations in this Lightning Room focused on malaria SBC for vector control and integrated health programs.

Moderator: April Monroe, Johns Hopkins Centre for Communication Programs

Lightning Talk Room 1: Malaria SBC at the Community Level	
The impact of community-level SBC interventions on malaria behavioural determinants within a large-scale, integrated health SBC program in Tanzania	Mark Lwakatare <i>FHI360</i>

SBC for the integrated delivery of ITN and SMC during the COVID-19 pandemic in Zamfara state, Nigeria	Pharm. Temitope Ogunbi <i>Johns Hopkins Center for Communication Programs/ Breakthrough ACTION Nigeria</i>
Step Back – how can nets work better for the village sleeping arrangement?	Hélio Rogério Martins <i>FHI360</i>
Using the role model approach to explore caregiver administration of sulfadoxine-pyrimethamine amodiaquine to children 3-59 months in Togo	Dr. Fantche Awokou <i>Malaria Consortium, Togo</i>

Room 2: Reaching the Unreached

One of the U.S. President’s Malaria Initiative's strategic plan key pillars is reaching the unreached. To reach the unreached, we need to achieve and maintain coverage of effective, evidence-based malaria SBC to reach remote, rural, and other marginalised communities. Each presentation in Lightning Talk Room 2 showcased different methods used to reach unreached populations effectively.

Moderator: Anna McCartney-Melstad, Johns Hopkins Center for Communication Programs

Lightning Talk Room 2: Reaching the Unreached	
Reaching marginalised forest goers with malaria prevention services by community engagement and client-oriented voucher mechanism	Dr. Kyaw Myint Tun <i>University Research Co., LLC, Myanmar</i>
Malaria Prevention and Care-seeking Behaviour among Forest-goers in Cambodia	Sochea Phok <i>Population Services International, Cambodia</i>
Initial Impacts of SBC for Hard to Reach Gold Mining Populations in Guyana	Sean Wilson <i>Johns Hopkins Center for Communication Programs/ Breakthrough ACTION Guyana</i>

Closing Remarks

Mariam Wamala Nabukenya and Gabrielle Hunter closed the first day of the 2022 Virtual Forum by thanking the presenters and participants for joining and sharing an overview of day two presentations.

Day Two Key Takeaways:

- While funding gaps for malaria SBC remain, there are champions and allies for malaria SBC within National Malaria Control Program (NMCP) leaders and beyond. We need to interest them in SBC by **providing evidence of accomplishments and results**.
- To strengthen coordination between M&E and SBC and generate robust and usable SBC data, **let's advocate for our SBC indicators to be included in routine reporting systems**.
- For RTS,S vaccine introduction, we need to **employ SBC to help centre the community at the core**, inform the media before and during vaccine introduction, have trusted health personnel to dispel rumours, and aid health workers in understanding vaccine eligibility criteria.

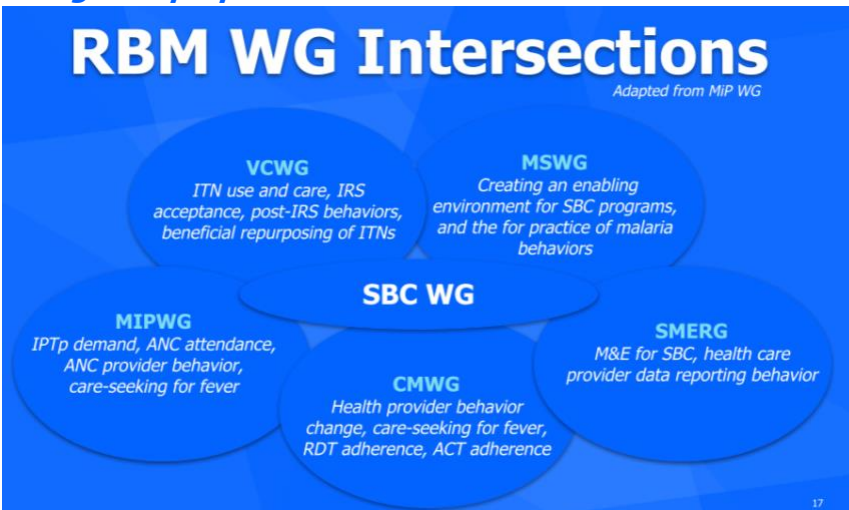
Read more: <https://mailchi.mp/1117ca4834ce/takeaways-2-en>

Welcome Remarks

The second day of the 2022 Virtual Forum opened with introductory remarks from **Mariam Wamala Nabukenya, Co-Chair**. Mariam thanked the previous day's presenters and reviewed the key takeaways from the first day of the Virtual Forum.

RBM Partnership to End Malaria Working Group Updates

Gabrielle Hunter, Co-Chair, spoke about the many intersections between the five RBM Working Groups. She shared that SBC can support many vector control, malaria in pregnancy, and case management activities. There are important connections to be made for the SBC WG to support SBC monitoring and evaluation. Similarly, multi-sectoral action can help create an enabling environment for SBC programs and support the individuals and communities in the practice of behaviours that are important across all malaria technical areas.



Gabrielle introduced fellow RBM Partnership to End Malaria Working Group Co-Chairs and representatives to share updates on their work.

Julie Gutman (Co-Chair, [Malaria in Pregnancy Working Group](#) (MiP WG)) noted recent drops in intermittent preventive treatment of malaria during pregnancy (IPTp) coverage due to the COVID-19 pandemic and discussed the MiP WG's Speed Up, Scale Up campaign to expand ANC and IPTp coverage. The presentation included the [MiP WG's renewed call to action](#) to advocate to world leaders for increased IPTp funding.

Molly Robertson (Co-Chair, [Surveillance, Monitoring, and Evaluation Reference Group](#) (SMERG)) shared the results of a poll from a 2022 SMERG annual meeting to indicate future directions of focus for the Reference Group. SMERG'S top priority includes "gathering and disseminating best practices for strategies promoting local data use." SMERG's Surveillance Practice and Data Quality Committee is tracking the visibility of surveillance and data quality improvement initiatives and streamlining global coordination of surveillance-related efforts by collecting lessons learned and best practices through this online [survey](#).

Larry Barat (Co-Chair, [Case Management Working Group](#)) provided a recap of the group's [2022 annual meeting](#). He described limitations of current case management indicators (such as focusing on fever as an indicator for malaria, inconsistencies in collection methods leading to difficulties to draw cross-country comparisons and monitor progress) and the CMWG's collaborative work with NMCP representatives, PMI, the Global Fund, and other partners to revisit, review, and revise indicators.

April Monroe (Co-Lead, Task Team on Human Behaviour and Human-Centred Design for Vector Control, [Vector Control Working Group](#) (VCWG)) described task team's work to increase collaboration between the Vector Control and SBC Working Groups; support opportunities to expand the understanding of human-centred approaches through the development of resources and workshops; and document lessons learned, best practices, and information gaps.

Perspectives on SBC from Malaria Program Leadership

Dr. Aimable Mbituyumuremyi, Program Manager of the Malaria and Other Parasitic Diseases and Neglected Tropical Diseases Control Division within the Rwanda Biomedical Center, and **Samira Sibindy**, Officer of Monitoring and Evaluation and Operational Research at the Mozambique National Malaria Control Program spoke with **Gabrielle Hunter** and **Mariam Wamala Nabukenya**, Co-Chairs, on championing SBC in the work of NMCPs.



Samira highlighted many needs in Mozambique to collect and monitor data to show the impact of SBC at the community level and to use it for funding requests. She also shared the experience of integrating M&E and SBC through technical working groups at each level to collect information from SBC

practitioners and they can share information with people in their districts. To strengthen coordination between M&E and SBC and generate robust and usable SBC data, Samira spoke about the importance of including malaria SBC indicators in routine reporting systems.

"We don't have instruments in the country that can measure the work done by all these actors...How do we really know how many patients that come to us in the health facilities were referred by volunteers?... That would be pertinent for us because it would help prioritize... in targeting interventions for SBCC." - Samira Sibindy

Aimable spoke about how there are champions and allies for malaria SBC within NMCPs and across partners. SBC practitioners need to interest these champions and allies in SBC by providing evidence of accomplishments and results. Aimable shared key messages SBC Officers should carry to NMCP Program Managers.

"If the coverage, access, and use is very low, do not expect success . . . Program managers focus on the quality project deployment plan, but think of the coverage if you need success . . . We need to use data as SBC experts. If coverage is very low, you need SBC experts to help you increase coverage." - Dr. Aimable Mbituyumuremyi

Technical Presentations

Malaria SBC for RTS,S

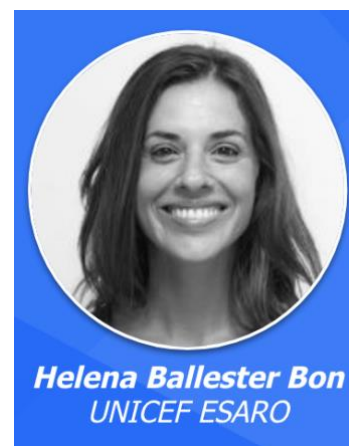
Avery Avrakotos, Steering Committee, began the panel on malaria SBC for RTS,S vaccine introduction with a brief overview of the RTS,S/AS01 malaria vaccine. The RTS,S vaccine builds on 30+ years of research and development and is a breakthrough in malaria prevention. Vaccine studies have shown a significant reduction (30%) in deadly severe malaria in children even in areas with high insecticide-treated nets coverage and good access to malaria diagnosis and treatment. Avery shared a few key considerations for malaria vaccine SBC, including the potential for high demand although introduction will focus on areas of greatest need due to limited supply; the need for follow-up by caregivers to achieve the full schedule, with fourth the dose in second year of a child's life; the vaccine only providing partial protection necessitating continued use of malaria prevention and treatment measures; and the opportunity to reinforce messaging around other child health interventions.

Panellists included **Helena Ballester Bon** of the UNICEF Eastern and Southern Africa Regional Office and **Rose Jalang'o** of the Kenya Ministry of Health National Vaccines and Immunisation Program.

"Drivers of vaccine uptake in Eastern & Southern Africa, a literature review to inform RTS,S rollout"

-Helena Ballester Bon, UNICEF Eastern and Southern Africa Regional Office

Helena presented a literature review on the drivers of vaccine uptake in Eastern and Southern Africa. Key findings included strong consistency in findings across domains of research that consists of the central role of mothers as a liaison between experts at health facilities and their families; the importance of the calculation of opportunity costs and benefits; and the



financial and physical accessibility during previous experience. For example, mothers whose needs and challenges are met by health workers are better able to confidently address the concerns of their husband, are more likely to have children with completed vaccination schedules, and are better able to make cost-benefit analyses.

"You can raise awareness, but if the opportunity costs and benefits, when calculated, do not fit the caregiver, then your awareness-raising campaign will not be as successful." - Helena Ballester Bon

"Malaria Vaccine Implementation in Kenya"

-Dr. Rose Jalang'o, National Vaccines and Immunisation Program

Rose shared Kenya's experience implementing the malaria vaccine pilot program. Kenya Ministry of Health National Vaccines and Immunisation Program built on the existing childhood vaccination schedule by aligning the RTS,S vaccine schedule to correspond with other vaccines. Rose shared the critical role community health workers play in creating and sustaining demand for RTS,S vaccines.

Rose spoke about the need to employ SBC to help centre the community at the core, inform the media before and during vaccine introduction, have trusted health personnel to dispel rumours, and aid health workers in understanding vaccine eligibility criteria.

"It was very key that the community got the right message. So we trained health managers at the county and sub-county level on how to respond to the media no matter what crisis arrived . . . to ensure everyone was speaking the same language during vaccine rollout." - Dr. Rose Jalang'o

Day 2 Lightning Talks

Working with Community and Faith Leaders

Community and faith-based organisations are critical in addressing health issues like malaria. These organisations' values often reflect their service to the community, and these values are an important part of a people-centred approach to malaria social and behaviour change. Community and faith leaders are well trusted in their communities and play a key role in helping community members practice healthy malaria prevention and treatment behaviours.

Moderator: Anna McCartney-Melstad, Johns Hopkins Center for Communication Programs



Lightning Talk Room 1: Working with Community and Faith Leaders	
Social Behaviour Change Communication intervention, a community approach through religious leaders in Mozambique, rural areas	Bishop Dinis Matsolo <i>Inter-Religious Platform for Health Communications (PIRCOM)</i>

Synergy between FLAME Faith Leader Advocacy and SBC	João Lino Rafael <i>Faith Leader Advocacy for Malaria Elimination (FLAME) Angola</i>
Community Action Cycle (CAC) approach success story: Utilisation of data by the community to target malaria control interventions, Chidodo Health Facility, Mashonaland Central, Zimbabwe	Cynthia Ncube <i>USAID/Zimbabwe Assistance Program in Malaria II (ZAPIM II)</i>

Mass Media for Malaria SBC

Understanding how to effectively use mass media to communicate SBC messages allows campaigns to penetrate large segments of the population over short periods of time. The following lightning talk presentations focus on different vehicles for SBC messages, including radio and social media.

Moderator: Mike Toso, Johns Hopkins Center for Communication Programs

<i>Lightning Talk Room 2: Mass Media for Malaria SBC</i>	
Impact of a radio campaign on treatment seeking behaviours of caregivers of children aged under five with fever in Zambezia, Niassa, and Tete provinces in Mozambique: findings from a cross-sectional survey	Dr. Sonali Wayal <i>Development Media International</i>
Digital amplification of SBC intervention – integrating health areas for improved impact	Suse Emiliano <i>PSI Angola</i>

Provider Behaviour Change and Service Communication

Provider behaviour change and service communication can improve the client experience and malaria outcomes. Service communication refers to the use of communication approaches before, during, and after service delivery to boost service uptake and maintain healthy behaviours. Provider behaviour change seeks to address behavioural factors that influence the way health providers carry out their tasks. These tasks can include diagnosis, treatment, counselling, reporting, supply chain management, and many others.

Moderator: Angela Acosta, Johns Hopkins Center for Communication Programs

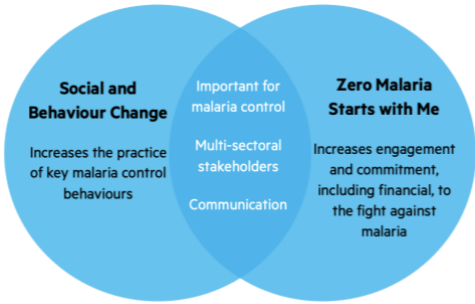
<i>Lightning Talk Room 3: Provider Behaviour Change and Service Communication</i>	
Segmenting health care providers to inform malaria SBC implementation	Jessica Vandermark <i>Breakthrough ACTION/Camber Collective</i>
Client/Health Provider Communication trickles behavioural change in Malaria epidemic in Uganda: Could this be a trigger for behavioural change during emergencies?	Nakamatte Rukia <i>Uganda National Malaria Control Program</i>

<p>Use of an effective model for behaviour change through information, education, and communication (IEC) through Health Promotion among Malaria patients, Community Based Volunteers, health workers and Communities in Mpongwe District, Copperbelt Province, Zambia</p>	<p>Lottie Mwale <i>Community Action Support Project</i></p>
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Future of the SBC WG

Gabrielle Hunter shared remarks about the future of the SBC WG with the membership, including thanking the membership for their commitment to the malaria SBC community. Gabrielle highlighted the 2021-22 SBC WG successes:

- Hosted a webinar on **Guidance for Implementing Malaria SBC with Zero Malaria Starts with Me**
- Updated the WG’s **Malaria SBC Guidance in the Context of COVID-19** to reflect the many changes that have occurred since 2020
- Continued building our **Malaria SBC Toolkit for Community Health Workers**
- Launched workstream to create a **global SBC Guidance for RTS,S Vaccine Rollout**
- Attended all four **regional CRSPC in-person meetings** to share the latest resources in malaria SBC to inform Global Fund requests and the SBC consultant roster
- Hosted **Lusophone and Francophone Networking Sessions** with 19 Lusophones and 61 Francophones in attendance
- Increased Springboard pageviews by **nearly 50%** compared to 2021 pageviews
- Increased participation during General Calls over the last three years, with **over 100 participants** on all calls in 2022



Following these highlights, Gabrielle moderated a series of poll questions to learn about the priorities of SBC WG members as the Steering Committee plans for 2022-23 activities. **The membership is invited to complete the Future of the WG Poll before November 15.**

Respond to the poll: <https://bit.ly/sbcwgfuture22>

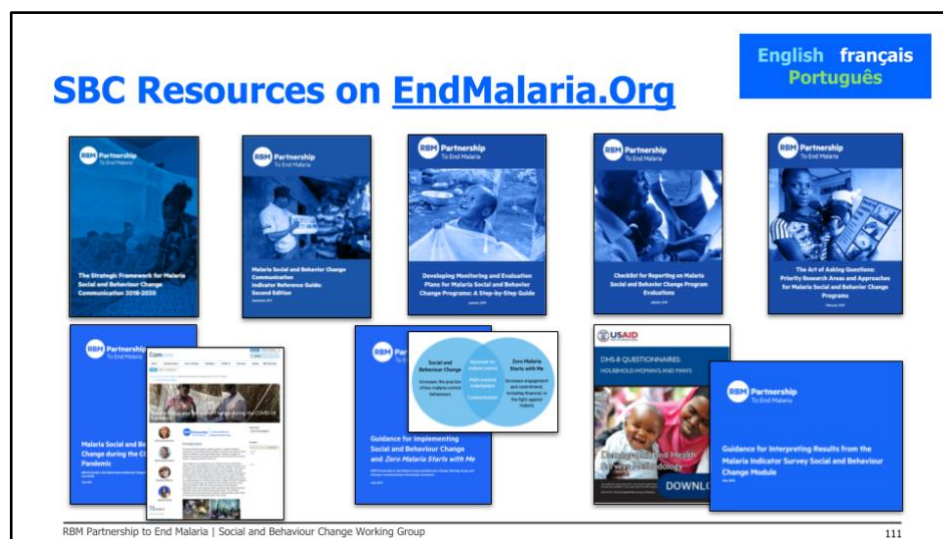


Closing Remarks

Ashley Riley, Secretariat, closed the two-day SBC WG Virtual Forum by sharing next steps for the SBC WG, outlined in the [SBC WG Next Steps](#) section of this report.

The SBC WG has many technical malaria SBC resources available on EndMalaria.org, including the SBC WG Strategic Framework for Malaria SBCC and Indicator Reference Guide, a step-by-step guide on

developing M&E programs, the MIS SBCC Module and interpretation guidance, and resources for malaria SBC in the context of COVID-19.



Ashley reminded the membership of upcoming virtual, in-person, and potentially hybrid events, starting with the **SBC WG Auxiliary Meeting at the 2022 SBCC Summit** (Marrakesh, Morocco | December 4). The Secretariat will share the **2023 General Call** schedule soon via the listserv. SBC WG members should contact the Secretariat with technical presentation topic ideas for 2023 General Calls. Finally, the SBC WG plans to host an in-person **2023 Annual Meeting**, more information will be shared by the Secretariat in the coming months.



SBC WG Next Steps

- The Steering Committee will evaluate the [Future of the SBC WG Poll](#) responses to chart the path forward for 2023.
- The Secretariat will initiate **Steering Committee Elections** for 2 Co-chair positions and 4 Steering Committee seats in October 2022.
- The Steering Committee and Secretariat will host an in-person **auxiliary meeting** on December 4, the day before the 2022 International SBCC Summit.
- The Secretariat will continue to build the WG's presence on [Springboard](#) and the [RBM Partnership website](#).
 - All SBC WG members are encouraged to engage with each other through the SBC WG community on [Springboard](#).
- The Steering Committee will continue to hold online General Calls in 2023. The Secretariat will share the full calendar soon.

Annex 1: Participant List

[Click here to view the participant list](#)

Annex 2: Agenda

[Click here to view the agenda](#)