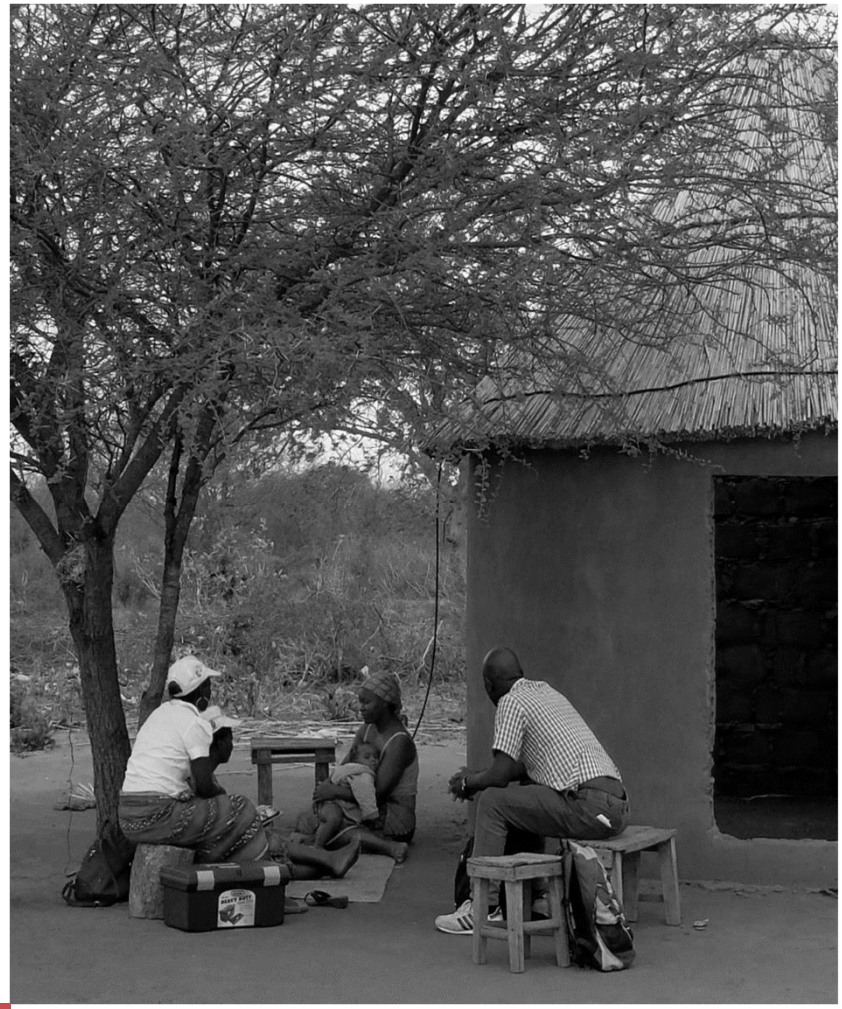
BOHEMIA

Broad One Health Endectocide-based Malaria Intervention in Africa

Mozambique: 2021 & 2022

Kenya: 2022 & 2023



BOHEMIA is funded by Unitaid Innovation in Global Health

BOHEMIA Social Science

Aim

To understand the acceptability of iMDA as a strategy for malaria control in the context of the BOHEMIA clinical trial in Mozambique and Kenya & identify the factors likely to enhance or constrain the uptake of iMDA as a strategy for malaria control.

Objectives

1. Community Acceptability Study (Task A):
   - To contribute to the development of MDA delivery approaches and community engagement strategies that are responsive to local needs.
   - To identify the local norms and daily realities that drive adherence or non-adherence to ivermectin MDA.
2. County & sub-county stakeholders (Task B):
   - To identify the system level enablers and challenges to intervention delivery.

Study Design Task A

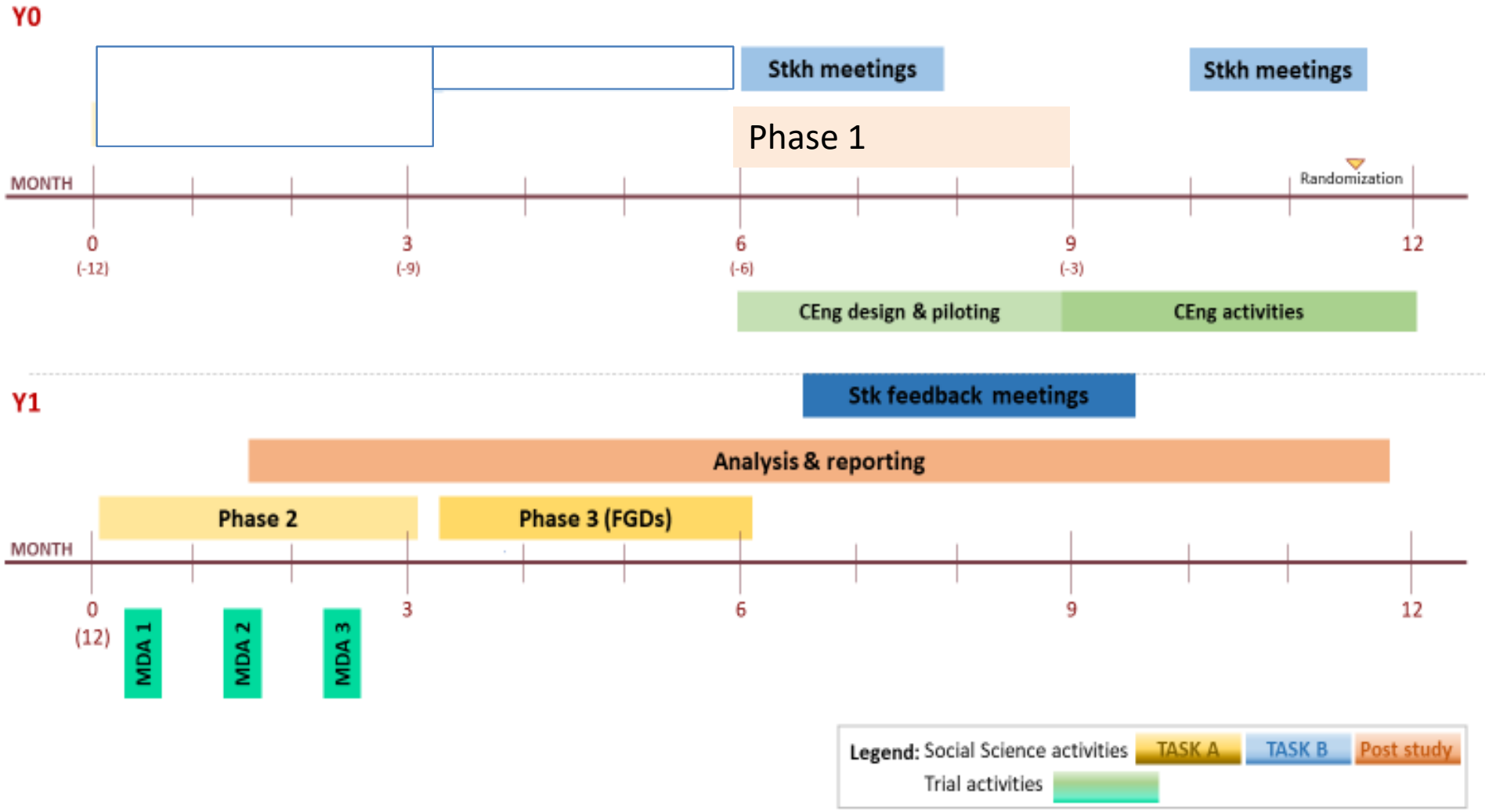
Longitudinal qualitative exploratory study using an ethnographic approach:

- Phase 1: Formative Study (prior to trial)
  - ***Rapid ethnographic assessment***: researchers live in villages for 1 to 2 months collecting data through participant observation; informal conversations; formal interviews & groups discussions.
  - **Data on**: key community stakeholders & influencers (engage for co-design of CE); structural & social/cultural context; key health concerns, health maintenance practices and perceptions of disease prevention; Livestock husbandry practices; previous experience of MDA

Study Design Task A (2)

- Phase 2: Implementation study (during iMDA)
  - ***Ethnography of implementation***: researchers live in villages for 2 weeks during each round of iMDA collecting data through participant observation; informal conversations; formal interviews & groups discussions.
  - **Data on**: exposure to and interpretation of CEng activities; experiences of iMDA process; perceptions and effects of ivermectin in the days after administration.
- Phase 3: Uptake study (1 – 3 months post iMDA)
  - ***Cross sectional qualitative study***: FGDs among additional villages spanning types of adherence.
  - **Data on:** perceptions & experiences of iMDA; effects of intervention; advantages and concerns; factors affecting adherence/non-adherence

Social Science Timeline of Activities



Value of Ethnographic Approach

- Development of ‘trust’ between ‘researcher’ and ‘researched’
  - Helps in development of appropriate community engagement strategies and messaging
  - During trial helps identify and resolve rumours quickly
  - Observe and hear things that are often ‘hidden’ in one off interviews and FGDs

Value of Ethnographic Approach

- Allows researcher to develop understanding of what is ‘normal’ in a community
  - Can identify unusual behaviours and ‘silent refusals’ during the trial
  - Helps unpick which experiences and perspectives are related to the trial effects and which to the intervention itself.
  - Provides in-depth understanding of context that helps inform effective ‘probes’ in FGDs and interviews.

Key Messages

- Understanding the acceptability of an intervention is central to understanding it's likely efficacy
- However, trials of interventions come with huge inputs that are never replicated under routine conditions
- In gauging acceptability, disentangling trial and intervention effects is very challenging.

Way Forward

- Cross sectional social science research is more likely to provide insight into the acceptability of the trial than the intervention itself.
- Longitudinal qualitative research using and ethnographic approach can help disentangle the experiences and perceptions of an intervention from the experiences and views on trial participation.
- Data from acceptability studies conducted alongside a trial should always reflect on potential trial effects.

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