

ASSESSMENT ON THE EFFECTIVENESS OF AN EXISTING HEALTH PROMOTION INTERVENTION: MALARIA IN FOCUS

Prof. Eze Chídí Nwauba

Department of Public Administration, i-FATOSS University, Republic of Benin E-mail: dparlay@gmail.com
vc@ifatossuniversity,.edu.bj
+2349124673109
+22996547204

ABSTRACT

This paper focused on one of the most popular areas of public health that the Nigerian government has focused so much on in the past decades till date which is malaria control. Malaria control is one of the existing health promotion interventions that the Nigerian government has embarked on for decades. However, the effectiveness and success of this intervention is the purpose of this study. In order to draw conclusions on the success of the health promotion intervention, this study will approach the issue from a scholarly point of view with a defined population. The researcher concluded by an outlined challenges and it also recommended among other things that engaging the private sector through public private partnership program would enhance effective health promotion intervention.

INTRODUCTION

In any polity, the place of healthcare can never be replaced. As a matter of fact, one of the core duties of any government is to provide quality healthcare for its people. This is because a healthy people are a healthy nation. However, there are situations when government lose control of the healthcare sector; situations like diseases outbreak or a pandemic where by the healthcare system is threatened due to the population of people



that might require healthcare delivery at the same time. At this point, an intervention becomes important. This intervention usually comes in form of a health promotion.

At other times, government give earlier warnings of an impending epidemic as a means of preventing its rapid spread. This gives the populace awareness on how to go about protecting themselves. In Nigeria, there have been numerous health promotion interventions in recent past. However, it is important to understand the concept of health promotion intervention before drifting to an existing one and how effective it has been.

Defining health promotion intervention, Ibanga (2022) states that they are processes and approaches targeted at enhancing public healthcare by helping to prevent disease, and promote healthy behaviours among the populace, communities, or individuals. Generally, these interventions are schemed to enlighten people, create awareness, and provide a supportive structure that enhances positive health outcomes (ibid).

For the purpose of this study, one of the most popular areas of public health that the Nigerian government has focused so much on in the past decades till date will be considered which malaria control (Adesanya, 2021) is. Malaria control is one of the existing health promotion interventions that the Nigerian government has embarked on for decades. However, the effectiveness and success of this intervention has been a topic opened to social discourse till date.

In order to draw conclusions on the success of the health promotion intervention, this study will approach the issue from a scholarly point of view with a defined population.

Health Promotion Intervention on Malaria in Nigeria

In the past, malaria was one of the most dreaded plagues that ravaged Sub-saharan Africa. It is still one. In fact, it is estimated that in the 20th century alone, malaria claimed between 150 million and 300 million lives, accounting for 2 to 5 percent of all deaths (Carter and Mendis, 2002 cited in Henry, 2021). This makes it a matter of great health concern for the Nigerian government. A school of thought have called for the



elimination of malaria from the country (see Nsikan, 2019), however, this seems to be an Herculean task for a nation struggling to control malaria.

The most recent health promotion intervention against malaria in Nigeria is the Nigeria End Malaria Council recently inaugurated in August 2022 to replace the past intervention programs like the National Malaria Control Program (NMCP) of 1948, the National Malaria Elimination Program (NMEP) of 2014, the National Malaria Strategic Plan of 2017.

The primary roles of the Nigeria End Malaria Council are fundamentally the same as those performed by other past malaria intervention programs, which includes expanding the reach of insecticide-treated bed nets to the populace, encouraging the proper use and maintenance of the bed nets, encouraging indoor residual spraying or fumigation, and educating local communities about the value of early diagnosis and fast treatment of malaria (Abdulahi, 2018). To promote unity, a common voice, and the approval as well as the implementation of laws enacted at eradicating malaria in society, the NEMC programme added a new twist to the task by incorporating faith communities and religious leaders into its malaria elimination programmes. Since its establishment, the alliance has consistently increased the number of local governments, wards, and provinces in which it advocates against malaria.

With less than one year of its operations, the impact of the programme has been felt by all and sundry. One of the ways it is affecting lives is the ongoing nationwide distribution of insecticide-treated bed nets in alliance with USAID and partners like FHI, EH, Africare, CEDPA, PSI, JHU, and Futures (Elijah, 2023).

As much as the programme is going smoothly, there have been reported cases of shortage in manpower as most states government have refused to support the programme with logistics and funds hence the spread to many local communities has been impeded (Akanimoh, 2022). This can be linked to the fact that Nigeria has just



undergone a political transition whereby most politicians or past leaders were unwilling to support the programme but rather channel the funds into their political ambitions.

It is uncontroversial that sound theory goes with successful and goal-oriented health promotion intervention (Timothy, 2020). In other words, theories aid the practice and efforts in health promotion become much more demonstrative. Based on the aforementioned, it is imperative one should take a review of the key theories that have can be linked to Nigerian health promotion intervention.

First, diffusion of innovation Theory (DOI) is a theory that aligns perfectly with the subject matter. In order to apply and spread novel constructs, practices, or interventions among a population, the theory provides a useful framework (George, 2021). This theory was used to evaluate the NEMC program's adoption potential, particularly with regard to motivating people to take a malaria test, and to establish evaluating criteria. The DOI has been used for a long time in a variety of industries to both describe and forecast how particular innovations—such as concepts, ideas, or behavioural norms will "diffuse" (or spread) over time across a population. Conventionally applied in retrospectively evaluating the successes and failures of a new construct or idea, many recent research works have adopted the DOI to forecast how a model is likely to"...intensify the speed of acceptance, increase the number of acceptability, improve the quality of idea implementation, sustain the adoption of commendable ideas, and, as best results, establish the new idea effectiveness at a personalized experience or collective experience" (Denis, 2020). The core tenet of the DOI theory is the hypothesis that any new innovation brings about uncertainty for the population it was created for, and that a reduction in that uncertainty is what ultimately causes the innovation to "diffuse" (Simon & Schuster, 2019).

The DOI hinges on five major features that enhances the comprehension of population's perception of the suitability of an innovation with the mindset that effectively attaining



peoples' expectations of these features will lead to the innovation's quick acceptability. The features include: relative advantage, compatibility, complexity, observability, and trial ability (Mitchel, 2020). Relative advantage has to do with the extent to which the innovation adopted is expected to "improve" on an existing idea, technology, or behaviour in relations to economic advantage, ease, overall contentment, or whatever conditions the populace may rather need (Alexander, 2018).

Relating the aforementioned to this study, relative advantage was adopted to evaluate the degree to which the study participants (i.e., locals in selected communities and health professionals) considered the NEMC program as to its advantage over other past programs on combating malaria. Relatively, compatibility entails the degree to which a potential user counts on an innovation to suit their own values, pre-experiences, habits, or perceived expectations (Sambo, 2022). Narrowing it down to this study, compatibility was targeted at assessing the extent to which the NEMC program aligns with the values and belief system of local in selected communities and health professionals. Complexity, on the other hand, reflects the extent to which a potential adopter has trust issues when it comes to understanding, adopting and using an innovation (Paul, 2021). For this work, complexity attempts to assess the degree to which participants consider NEMC program, if it is a daunting tasks to use the provided mosquito bed-nets, or administer drugs freely supplies on the patients.

Observability explains the extent to which a potential beneficiary of an intervention program has faith in the outcome of the innovation, if they are working or not (Olatokunbo, 2017). As much as this feature is not the focus in this study, observability would in this regard to be operationalized, i.e., an evaluation of the ease with which participants feel they can understand test results with minimal interpretation.



Lastly, trial ability covers the extent to which beneficiaries of health interventions think malaria intervention programs (bed-nets and drugs) can be trailed, studied, or implemented for a time being before its full acceptance (Olatokunbo, 2017). Just like observability, trial ability is not directly operationalized in this work but can be used to assess the degree to which beneficiaries and health professionals feel they could trial NEMC program provisions (mosquitoes bed-nets and drugs) and compare it to past malaria intervention programs before absorbing it into distribution plans. Obviously, survey fatigue and time availability have been the bane of the adoption of a survey instrument that covers all five of the DOI attributes in most health intervention programs hence in collaboration with local partners like religious organizations (like the NEMC program has done), a organized, limited DOI index which only covers the relative advantage, compatibility, and complexity attributes is currently applied in NEMC program (Yusuf, 2022).

Implications

One of the most glaring challenges of the existing NEMC program health promotion intervention for malaria in Nigeria is that the intervention has limited reach. Nigeria has a very large land mass that spans 923,770 km² (356,669 mi²) (Okon, 2015). This large geographic and demographic variations makes getting to the entire population a Herculean tasks, with the most affected being those in the hinterlands due to difficulty in accessibility (Abdulaahi, 2018). Poor and dilapidated infrastructure and limited access to healthcare delivery brings about unequal distribution of intervention program benefits, with discrimination in malaria prevention efforts being the outcome.

Another issue worth mentioning is socio-cultural factors, which also brings about the ineffectiveness of the NEMC intervention program. This challenge hinges on cultural beliefs, values, and social norms which usually make cultural-inclined people read meanings to health interventions. This sometimes negatively affects the acceptance of



preventive measures in many Nigerian communities (Hassan, 2019). For instance, there are Nigerian societies where children are not allowed to take immunization against certain health concerns. These areas usually have high rate of epidemics. Not tackling these socio-cultural issues using as culturally sensitive manner can be devil behavioural change efforts and negatively affect the overall impact of the NEMC intervention program.

Limited health literacy and awareness campaign about malaria prevention in most societies is also a major challenge to the effectiveness of the intervention program. Most times, a large percentage of the beneficiaries limited knowledge of malaria, its transmission mode, and how to go about preventing it hence may not consider recommended interventions (Ibanga, 2022). Early and intentional health education campaigns aimed at various population groups and delivered according to their educational levels and the language they can relate with are necessary to address this challenge.

Like most intervention programs in the past, the sustainability of the NEMC intervention program is not feasible due to change of governments which happens every four years in Nigeria. Every administration would want to inauguration its own intervention program either for the reason of being 'politically-correct' or fund embezzlement. Continuity is a big challenge in governance in Nigeria (Ayobami, 2020). Health promotion interventions like the NEMC intervention program needs long-term funding, stable infrastructure, and governmental support to thrive. Without the above requirements, the intervention's impact will die a natural death over time, making it less effective in combating malaria and a sheer waste of tax payer's money.

Furthermore, dilapidated and failing healthcare infrastructure, limited funds, and other threatening health related issues pose brings about another challenge on the NEMC intervention program effectiveness. It is imperative to mention that limited healthcare structures, brain drain of healthcare providers, and inaccessibility to diagnostic and



treatment negatively affects the intervention's results and thwarts the malaria prevention and treatment intervention.

Administrative part of the program is also tasking. Monitoring and evaluation are important for evaluating the effect of any intervention program's effectiveness, however, most of the time, limited funds, capacity, and professionalism in monitoring and assessing the reach of the program can negatively affect accurate measurement of the program's outcome and help spot the areas where future improvement should be carried out.

CONCLUSION

The existing health promotion intervention for malaria in Nigeria, the NEMC intervention program, is plagued by many implications and challenges. One common challenge is that the intervention program has limited reach at the moment, especially in the hinterlands, because of this limited access to healthcare delivery, the resultant effect are unequal access to malaria prevention efforts and disparities in distribution of intervention benefits.

Furthermore, socio-cultural issues such as cultural beliefs and social values are the bane of the application of preventive measures and it usually affects the behavioural change attempts. Poor health literacy and awareness creation on malaria prevention and treatment further reduces the intervention's positive outcomes, as most people, especially those in rural areas may have little or no knowledge of the malady and preventive measures that can be adopted to combat it. Ensuring the intervention stands the test of time is also a challenge, because it needs continual funding long- and governmental support. Withdrawal of funding and support is tantamount to an abrupt termination of the intervention program. Poor, old and dilapidated healthcare infrastructure, limited funding, and other challenging health concerns negatively affects the intervention's expected results. Finally, limited qualified personnel and expertise for



carrying out good administrative roles to get accurate evaluation of the intervention's program and learn of areas that calls for improvement is a challenge. Taking note of these implications and challenges is important for coming up with strategies to tackle these challenges and improve on the effectiveness of health promotion intervention for malaria in Nigeria.

RECOMMENDATION

- Government should engage private sectors through Public Private Partnership programs to further ensure effective health promotion.
- There should be a passionate commitment by the government, policy makers and citizens to advance in the existing malaria control measures and targeted interventions.
- There should be a reasonable research funding for Development of an anti malaria vaccine very important for malaria elimination and future eradication measures.
- Governments must commit to public orientation and enlightenment programs for awareness, preventive and control measures.
- Strong implementation of public health policies will also enhance effectiveness of health promotion.



- Abdulahi, S. Y.(2018), Community-Based Promotional Campaign to Improve Uptake of Intermittent Preventive anti malarial Treatment in Pregnancy in Burkina Faso. Am J Trop Med Hyg 2018; 80: 460–469.
- Adesanya, A.A. (2021), Monitoring community response to malaria control using insecticide impregnated bed nets, curtains and residual spray at Nsukka, Nigeria. Health educ res 2021; 11:133-145.
- Akanimoh,R.O. (2022), Assessing malaria control in the Kassena-Nankana district of northern Ghana through repeated surveys using the RBM tools. Malaria J 2022; 6:103.
- Alexander, D.T. (2018), Cochrane Handbook for systematic reviews of interventions (Cochrane Book series). England, Wiley-Blackwell; 2018 pp. 449-480.
- Ayobami, G.R. (2020), The Role of Mass Media in the Use of Insecticide treated bednets and Integration of Intermittent Preventive Therapy for Malaria Prevention among Pregnant women in Nigeria. 2020 [Internet] available at http://iussp2020.princeton.edu/download.aspx?submissionId=92482 (accessed July, 2020).
- Denis, S. P. (2020), The effect of health care worker training on the use of intermittent preventive treatment for malaria in pregnancy in rural western Kenya. Trop Med Int Health 2020; 12: 953–961
- Elijah, D.P. (2023),Impact of health education on home treatment and prevention of malaria in Jengre, north central Nigeria. Ann Afr Med 2023; 7:112 119.
- George, D,O. (2021),Process and effects of a community intervention on malaria in a rural Nigeria: randomized controlled trial. Malaria J 2021; 7:50



- Hassan, R.P. (2019), A community-directed strategy for sustainable malaria elimination on islands: Short-termMDA integrated with ITNs and robust surveillance. Acta Tropica 2019; 114: 177-183.
- Henry, F. P. (2021), The effectiveness of worksite nutrition and physical activity interventions for controlling employee overweight and obesity: a systematic review. American Journal of Preventive Medicine, 37, 340–357.
- Ibanga, T. I. (2022), Child malaria in sub-Saharan Africa: Effective control and prevention require ahealth promotion approach. Inter Quart Commun Health Educ 2022; 28: 51-62.
- Mitchel,R.A. (2020), Evaluating the community education programme of an insecticide-treated bed net trial on the Kenyan coast. Health Policy Plan 2020; 11: pp.280-291.
- Nsikan, D. T. (2019), Evaluation of a coordinated school-based obesity prevention program in a Hispanic community: choosing healthy and active lifestyles for kids/healthy schools healthy families. American Journal of Health Education, 45, 261–270.
- Okon, H.C. (2015), Barriers to the effective treatment and prevention of malaria in Africa: A systematic review of qualitative studies BMC Int Health Hum Rights; 9:26
- Olatokunbo, A. E. (2017), Impact of home-based management of malaria on health outcomes in Africa: a systematic review of the evidence Malaria J 2017: 6:134.
- Paul, T.P (2021), The Economics of Malaria Control Interventions. Geneva: Global Forum for Health Research; 2021 [Internet] available at http://whqlibdoc.who.int/publications/2004/2949286159.pdf (accessed July 10, 2023)



- Sambo, N.H. (2022), The Guidelines for Systematic Reviews of Health Promotion and Public Health Interventions Taskforce the challenges of systematically reviewing public health interventions. J Public Health, 2022; 26:303–30.
- Simon, G. & Schuster, T.N. (2019), A community randomized controlled trial of insecticide-treated bednets for the prevention of malaria and anaemia among primigravid women on the Kenyan coast. Trop Med Int Health 2019; 3: pp.197-204.
- Timothy, W.E (2020), Distribution Systems of Insecticide-Treated Bed Nets for Malaria Control in Rural Nigeria: Cluster-Randomized Controlled Trial. PLoS ONE 2020; 3: e3182
- Yusuf, A. T. (2022), Insecticide-treated nets for the prevention of malaria in pregnancy: A systematic review of randomised controlled trials. PLoS Med 2022; 4: 0506 0515.