

Promoting voices from the field: African scientists as malaria advocates

Luann Tia Blount, MA
Senior Communications Associate
The PATH Malaria Vaccine Initiative



Presentation overview

- Provide a brief overview of the PATH Malaria Vaccine Initiative (MVI)
- Provide the background and theoretical assumptions for the *Malaria Vaccine Science & Society Fellowship Program*
- Discuss the program's history and design
- Provide initial qualitative data on the program's impact and their implications
- Discuss expected long-term outcomes

MVI: who we are

- **Origin:** Established in 1999
- **Donor funding (1999 – 2011):** \cong \$274 million
- **Mission:** to accelerate the development of promising malaria vaccines and to ensure their availability and accessibility in the developing world.
- **Vision:** a world where all children are safe from malaria.
- **Target:** a malaria vaccine for infants and young children in Africa.

MVI: what we do

- Leverage financial and technical resources to explore multiple vaccine concepts simultaneously.
- Develop only the most promising malaria vaccine candidates.
- Help pave the way for developing-country access to vaccines.



MVI: what we do (cont.)

- Disseminate research findings and results; provide communications support for clinical trial sites.
- Engage stakeholders and work with communities to foster understanding and support for clinical trials and introduction of malaria vaccines.
- Undertake advocacy and communications activities aimed at policymakers and those who influence them in donor countries.

MVI: long-term goals

- **Goal 1:** Ensure the development of *P. falciparum* vaccines with at least 80 percent efficacy against clinical malaria in children through age five and in pregnant women.
- **Goal 2:** Ensure that *P. falciparum* malaria vaccines are available and affordable where needed.
- **Goal 3:** Engage malaria-endemic countries to ensure ownership and leadership in use of the vaccines at levels similar to coverage of other childhood immunizations.



Background

- Malaria kills a young child or infant every 30 seconds and a pregnant woman in Africa 30 times a day.
- Many tools—both those that save lives today and those with the potential to save lives in the future—will be needed to finally defeat the disease.
- Despite recent advances in the science and increased awareness of the problem, there are still not enough resources being directed toward this disease.

Theoretical assumptions

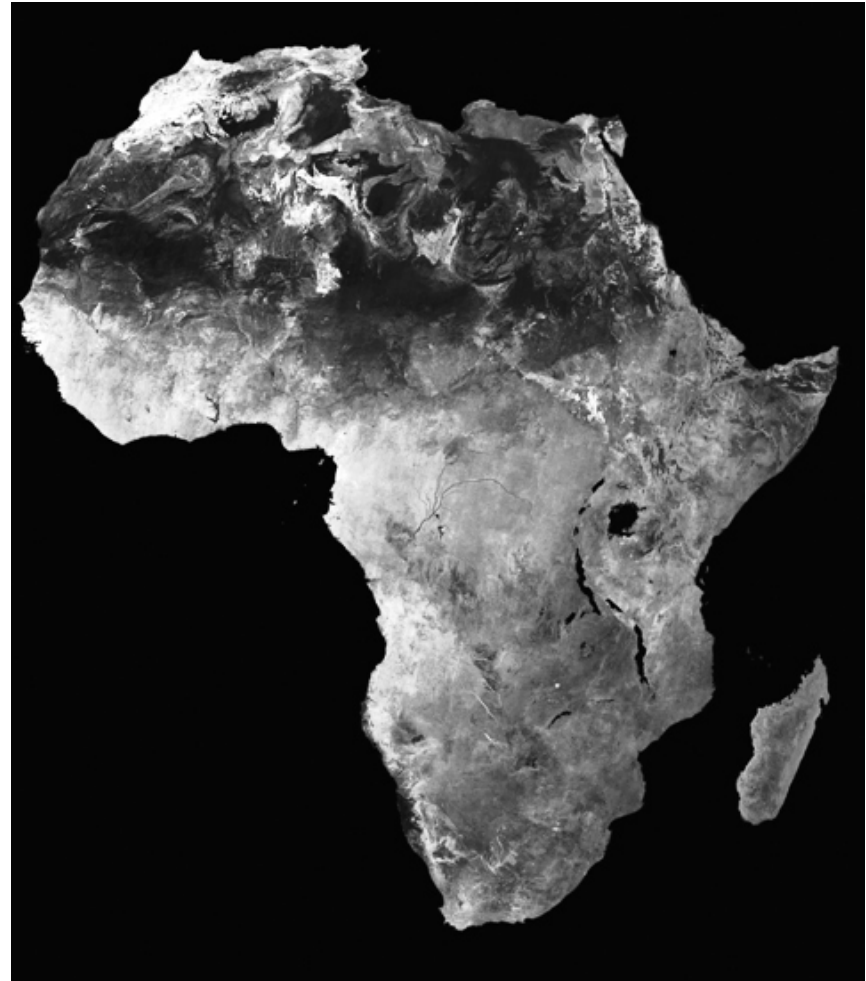
- Advocacy efforts directed toward the disease are not commensurate with the scope of the problem.
- African scientists are already communicating important results of their research within technical circles.
- “Voices from the field” can influence the policy process in donor countries.
- Appropriate training and resources could facilitate the development of a solid network of “champions” for malaria R&D.

Program history

- Media and advocacy training program initiated in 2005
- Purpose: to train fellows to better engage the media and policymakers
- Pilot training programs held in Washington, DC, in 2006 and Maputo, Mozambique, in 2007
- Total number of fellows: 12; 9 from Africa

Program history

- Fellows' countries of origin:
 - Tanzania (2)
 - Cameroon (2)
 - Ghana (2)
 - Kenya (1)
 - South Africa (1)
 - Botswana (1)



Program history

<i>Fellows</i>	Dr. Antoinette Ba-Nguz	Dr. Andrew Kitua	Prof. Wilfred Mbacham	Dr. Bernhards Ogutu	Dr. Seth Owusu-Agyei	Dr. Boemo Sekgoma
<i>Designation</i>	MVI Senior Program Officer, Tanzania	Director-General of the Tanzania National Institute for Medical Research	Associate Professor, Public Health Biotechnology, Biotechnology Center, University of Yaoundé, Cameroon	Principal Research Officer, Kenya Medical Research Institute; Senior Clinical Trialist, Malaria Clinical Trials Alliance, In-depth Network	Director, Kintampo Health Research Centre, Ghana Health Service, Ministry of Health	HIV/AIDS Policy Advisor, Southern African Development Community (SADC) Parliamentary Forum, Windhoek, Namibia
<i>Advocacy concerns</i>	Sees need for better communication between clinical officers and policymakers	Sees need for greater investments in training researchers to deliver effective messages as a way to influence local health policy in Tanzania	Sees need for more malaria R&D funding	Sees need to bring to life malaria vaccine efforts in Africa	Wants to build acceptance for a vaccine with limited efficacy	Wants to raise malaria profile in SADC. Understands need for simple messages and for tailoring research findings for MPs

Program design

- Three-day program with several training modules including:
 - Media and advocacy theory
 - Message development
 - Op-ed writing
 - Media and spokesperson training
 - Advocacy sessions



Program design

- Coaching
 - Development of individual, targeted advocacy plan
 - Six months of individual advocacy and media coaching

Strategic Advocacy Plan

Seth Owusu-Agyei, KHRC, Kintampo, Ghana

BACKGROUND:

Traditionally it has taken considerable time to introduce effective health interventions into Ghanaian policy and ultimately into a program that would deliver the intervention to those most affected. The key is to engage the Ministry of Health (MoH) early in the process and make them aware of the progress that is being made on a particular intervention. This creates awareness and ultimately fosters support from the MoH in terms of adopting the intervention.

GOAL: To lay the ground work for influencing the Ghanaian government to support a less-than-50 percent efficacious vaccine prior to licensure.

AUDIENCES:

Owusu will need to engage a variety of stakeholders in his plan. They include:

- Minister(s) of Health
- Director General
- Director of Public Health (including the National Malaria Control Program)
- Technical advisors for Policy, Planning and Evaluation, Public Health, and Health Research Researchers and other scientists
- The media (as a conduit to the audiences above).
- MVI and GSK

TACTICS and TIMELINE

1. **June 21 – early July: Preparation for media briefing and journalists' site visit.** Twelve Ghanaian journalists representing TV, radio, and print will cover a briefing on the progress of MAL047 and news about the launch of MAL050. Following the briefing, journalists will have an opportunity to

Program evaluation

- Evaluation tools:
 - Open-ended questionnaire.
 - One-on-one interviews with fellows.
 - Tracking of individual progress towards implementing the advocacy plan developed during the coaching phase of the program.

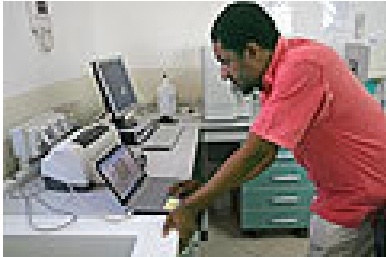
Program evaluation (cont.)

- Feedback to-date:
 - Solid and well-organized program structure.
 - Fun and engaging training modules, particularly the on-camera, message development, and journalists sessions.
 - Competent trainers.
 - Real demand for media and advocacy programs such as this fellowship program.
 - Need for funding to support ongoing advocacy efforts.

Lessons learned

- The three-day duration of the workshop is critical to the success of the program.
- Organizing one-on-one assessments and logistical planning calls are also critical.
- Fellows must give more thought to their advocacy goals prior to the training.
- Fellows are often overstretched; need to further develop the coaching phase of the program to ensure follow up is consistent.

Outcomes: more malaria advocates



Dr. Salim Abdulla, Leader of the malaria-vaccine project in Bagamoyo, Tanzania
"We need a vaccine."



Dr. Abdi Mohamed, Leader of the Malaria Control and Evaluation Partnership in Zambia
"There's a ... fatalism, a feeling nothing can be done... We have to change this."



Dr. Chilandu Mukuka, Deputy Director, Zambian National Malaria Control Centre
"If they (the Gates Foundation) are associated with Zambia, and we are getting results, the whole world will be

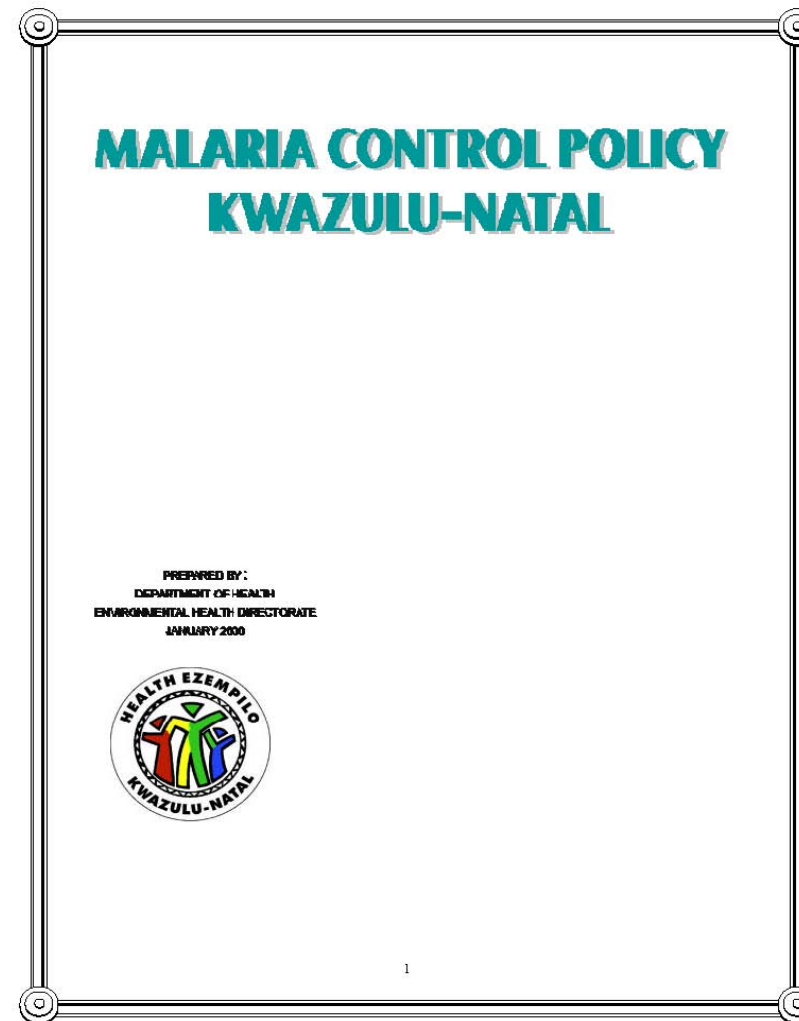
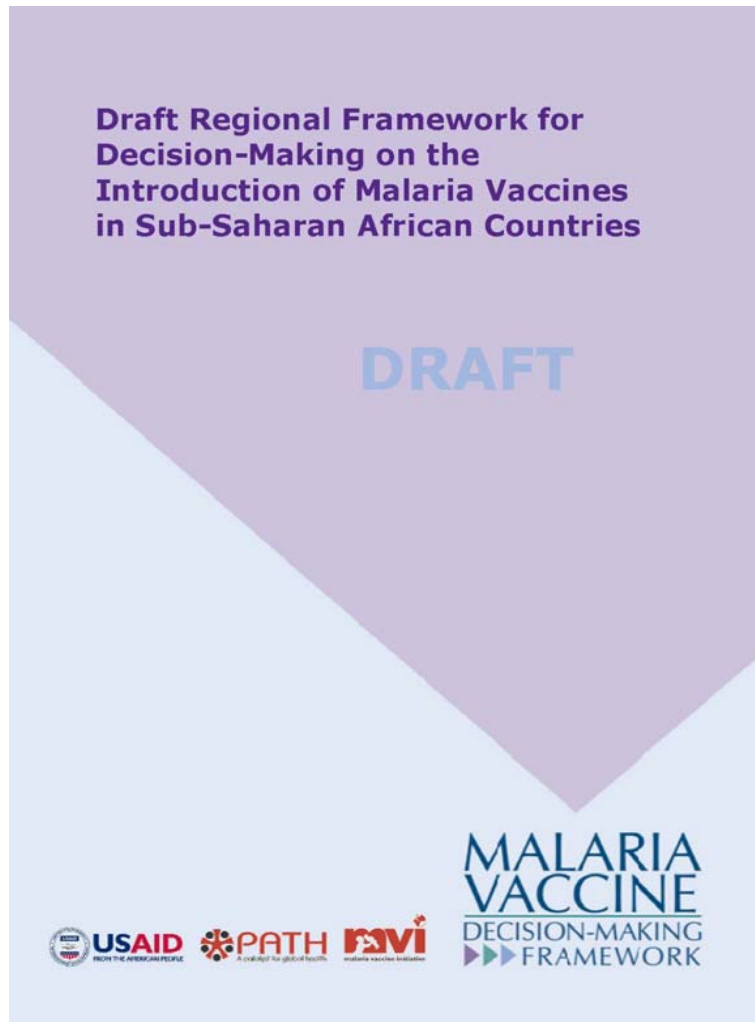


Dr. Seth Owusu-Agyei, Director of the Kintampo Health Research Centre in Ghana
"I am very hopeful that by the year 2011...we would have come out with a malaria vaccine."

Outcomes: better-informed press corps and policymakers



Outcomes: greater support for malaria vaccine and control programs in-country



Thank you

