Following the technical consultation meeting in early February 2004, the Cambodian IEC team has been moving ahead with their IEC materials production. The team has organized a few small workshops with different target groups to plan and further develop a video script focusing on seeking prompt and appropriate treatment, which is one of the main concerns with the ethnic communities. They will invite Kreung villagers to do the acting, using their own language. The team plans to do video shooting in early April 2004. By planning and developing IEC materials with the villagers, the IEC team will be able to produce appropriate materials to suit the needs of the population. The people who participate in the production of the materials can be used to mobilize others in nearby villages and to advocate with local authorities for malaria prevention and control.

During the last week of February 2004, the IEC team pre-tested the malaria flipchart that was produced during a materials production workshop in January 2004. The IEC team received good feedback and many useful suggestions from communities to improve the flipchart. The Directors of the Rattanakiri Provincial Health Department and Culture Department provided good support to the IEC team in their work with the Kreung communities.

Xu Jianwei, IEC specialist based in Simao, Yunnan, has planned with team members in Ximeng County to develop an inter-active video CD (VCD) and posters for community members, booklets for students and guidelines on the “buddy system” for teachers. A flipchart will be developed for secondary target groups, for example village health workers and health centre staff to provide health education. Guidelines on how to utilize the VCD, booklets and flipchart will also be developed. The information to be conveyed includes:

1) Areas with high risk of malaria infection;
2) Early signs of malaria for self-diagnosis;
3) Knowledge of causes and prevention of malaria;
4) The importance of using bednets and insecticide treated nets (ITNs) for malaria prevention and the cost of these nets;
5) The risks of delayed treatment and incomplete treatment;

The VCD and booklets will carry stories that contain the messages to be transmitted. Posters will carry other messages, such as information on the range of available services and their costs, and reinforce messages carried by the VCD and booklets. Each type of IEC material will have its own usage guidelines and these materials will be linked with one
another. In phase II, health staff, village health workers and other peer health educators will be trained in communication skills and in the use of the materials.

The team has been planning to invite Dr. Chen Yigang, Director of Health Bureau of Ximeng County, picture, to direct the production of a VCD and songs in the Wa language. He has been a member of the Ethnic Song and Dance Troup in Ximeng County for a number of years and is also a strong supporter of the IEC project. The RBM IEC Project is one of a very few projects that put emphasis on working with ethnic communities where malaria is still a concern. The mainstream control programme has not fully succeeded in reaching these groups.

In the Annual Conference of the Malaria Control Programme in Yunnan Border Area for the Global Fund AIDS, Tuberculosis and Malaria (GFATM) on 16 February 2004, Xu Jianwei, who is also a member of the secretariat of the programme, presented the project plan of action 2004 for malaria prevention and control along the Yunnan border. 137 participants from 25 border counties of 8 prefectures and staff from the Yunnan Institute of Parasitic Diseases attended the meeting. Malaria health education and communication is one of the main components of the project implementation plan. As there are different ethnic groups that live along the border, IEC materials being developed under the RBM IEC Project can be adapted for use with other ethnic populations in those areas.

From 17 – 22 February 2004, a workshop on “Decision Making, Management and Evaluation of Malaria Control” was organized immediately after the Annual Conference of Malaria Control Program in Yunnan Border Area. The health staff representatives from 28 counties discussed 2003 project implementation. Health education and communication was one of main topics discussed. There was a lot of discussion on health education, which until now has not been a major focus of the malaria control programme. This could be due to a lack of understanding of social science and its relevance to disease control programmes. Behaviour change cannot easily be measured clearly in a short term, unlike bednet coverage, insecticide spraying and chemoprophyllaxis. The 2004 action plan in each county will include more on health education activities.

After the Technical Consultation Meeting in February, the Lao IEC team has decided to develop a calendar with malaria messages instead of the posters that were planned earlier, since each page of the calendar can contain one clear message, a total of 4 or 5 important messages in the whole calendar. Dates in the calendar could identify local events that would be linked to messages. The team has also discussed and revised a draft
Draft malaria calendar readied for pretesting in the field.

story that was produced by villagers during the participatory IEC materials production workshop in January. The team decided to make it into a picture story. The story focuses on seeking early treatment and correct use of anti-malaria drugs. Guidelines and training in the use of pictorial story cards will be developed to enable village volunteers and local health staff to educate and communicate with target populations effectively.

We would like to introduce a good reference book for people who are involved in designing, implementing and monitoring social sector programmes and in projects for developing and disadvantaged communities. The book, “Involving People, Evolving Behaviour”, contains very useful and relevant information for programme development, especially development of the RBM IEC Project. There is a lot of interesting information from field experience and lessons learned, which offers insight and debate in the context of behaviour development and change. One small section we would like to share with you is “producing effective information materials”, which shows results from a study of college students with different cultural backgrounds on HIV/AIDS messages that were broadcast through public announcement systems.

“A study on audience recall of HIV/AIDS public service announcement (PSA) among US and overseas college students revealed the complex assortment of variables existing in the mindset of members of the audience, which ultimately contributes to their ability in recalling PSAs. …. The study clearly showed that the cultural background, gender and the age of students all affected their ability to recall the PSA message which were tested on them.”

This is quite relevant to the work of the IEC project, which is focused on ethnic populations. These populations have backgrounds, cultures, beliefs and ways of living that are different from those of the majority. Mainstream approaches, therefore, may not be suitable for use with these ethnic populations.

“The only way to find out if a set of information materials is effective is by pretesting the materials on members of the audience for whom the materials are intended. Some communicators go a step further by involving the audience in the process which precedes materials production.”
The RBM IEC has adopted a participatory approach in materials development and has been involving target populations in designing materials to optimize the outcomes of the product.


The following article, “UNICEF calls for action to protect indigenous children”, is also relevant to this topic. It was published in The Lancet on 6 March 2004, volume 363 number 9411.

UNICEF calls for action to protect indigenous children

Indigenous children in developing and developed countries need urgent help to protect their rights and health, UNICEF warned in a Feb 25 report.

Such children are among the most vulnerable and marginalised groups in the world, according to UNICEF. The report details how their rights in rural and urban areas are compromised or denied.

"Lack of opportunity, cultural discrimination, inadequate social support, loss of land, or difficulty integrating into the dominant culture contribute to low self-esteem and loss of identity that can give rise to depression, alcohol and substance abuse, and suicide", the report says. Indigenous children are also "at risk for human trafficking, labour and sexual exploitation", it notes.

Birth registration--often substantially lower among indigenous children than in the general population--is the "first step in establishing a legal identity and claiming rights from the state", says UNICEF. It warns that health services, including access to essential vaccines, and health information are often lacking in areas inhabited by indigenous people, especially in remote communities "even though these areas have been reached and seriously affected by commercial ventures such as logging, mining, and illegal drug operations".

Some 300 million indigenous people live in 70 countries and speak 75% of world's 6000 languages. The report identifies four strategic areas (health and nutrition, education, protection, and participation in decision-making) where investment, particularly when it builds on the capacity and strengths of communities, can help improve the lives of indigenous children.

UNICEF proposes that indigenous people should be trained as health workers who can work with traditional healers to blend and balance traditional and modern medicine; training could also improve bilingual education programmes and make education as relevant as possible to specific communities, empowering children to participate in community, national, and international discussions. "It is the responsibility of the state to promote and protect these rights", says the report.

UNICEF Executive Director Carol Bellamy said: "When indigenous children are allowed to live in peace and security and free from discrimination, they have an enormous potential to contribute to their own communities and to national and global society." 

Indigenous children must be put at the centre of the efforts to achieve "our goals of poverty reduction, education for all, and an end to the HIV/AIDS epidemic", she said.

Xavier Bosch