Creative brief for Radio Skits for Uganda Schistosomiasis Prevention Campaign

Priority Audiences:

1) Adults who are at high risk of Schistosomiasis. These include parents of children who are also at risk. These adults live in endemic districts of Uganda, and have frequent contact with lakes or rivers.
2) School aged children (5 – 12 year old) living in endemic districts of Uganda near lakes or rivers.
3) Leaders, teachers, health workers, VHTs, political, religious, and traditional leaders living in endemic districts of Uganda in communities near lakes or rivers.

Objectives and Desired Behavior:
The overall objective of the campaign is to increase the audiences’ perceptions of their own and their community’s vulnerability to Bilharzia, while educating them about how they can prevent Bilharzia and convincing them that these actions are effective and doable.

Preventive actions promoted through the campaign include:

a) If one has to stand, wade, walk or swim in the water, they should do it before 8.00 am, when there are not so many worms in the water.

b) Bathe with water from a protected water source if possible.

c) If one must use water from a river or lake for bathing, they should collect water and keep it for 24 hours before using it.

d) If one has to walk in lake, river or wetland water, they should wear boots.

e) If one has to do anything in a lake, wetland or river, they should limit the amount of time they spend in the water.

f) Children and adults should take Praziquantel (PZQ) as instructed.

g) Always use a latrine and make sure everyone in the family uses a latrine. Do not defecate or urinate outside a latrine, and especially do not defecate in rivers, lakes or wetlands. This is how the worms get into the water.

Competitive behavior/barriers:

- Lack of awareness about Bilharzia—how it is contracted, its consequences, or how to prevent it
- Do not believe they are vulnerable to Bilharzia
- Do not associate symptoms of Bilharzia with Bilharzia
- Need to come into contact with lake, river or wetland water for their livelihood, for laundry, cleaning, water collection, snail collection, etc.
- Perceived and real side effects of PZQ (headache, nausea)
- Bad taste and large size of PZQ tablets
- Belief that they are not infected, so cannot see reason to take PZQ.
• Often adults and children are far from a latrine when they have the need to urinate or defecate.

**Positioning Statement/Key Promise:**

**Overall positioning:** Preventing Bilharzia will improve the health and well-being of adults and children in Uganda, improving productivity and school performance.

**Positioning Statements by Audience:**

**At-risk adults:** If you learn all you can about Bilharzia and commit to protecting yourself and your children from Bilharzia, you and your children will feel well, and will be more productive.

**School age children:** If you take actions to prevent Bilharzia, you will not get a ball-like abdomen (ascites).

**Leaders, health workers, teachers:** If you help enlighten your community about Bilharzia and its prevention and encourage school children and adults to take action to prevent it, members of your community will be less likely to get Bilharzia, will be more productive, and will respect your leadership.

**Support points:**

• One out of every five adults and children in Uganda have Bilharzia; most do not know it.

• Bilharzia is not caused by witchcraft. It is caused by contact with lake, river or wetlands waters where Bilharzia worms live. Virtually all surface water in Uganda has Bilharzia, even if it looks clean.

• If you get in contact with contaminated water, the worms can get into your body.

• When you have the worms in your body, there may be no signs & symptoms for some time.

• If left untreated, Bilharzia causes persistent abdominal pain, diarrhea and fatigue, and may lead to serious disease.

• When a person feels that way, she/he is not able to be productive or do well in school and may not feel good about themselves.

• If you have it for a long time, it will cause liver damage, you may vomit blood and your stomach may swell like a ball. This situation is irreversible—it cannot be cured.

• There are things you can do to reduce the risk of Bilharzia for you and your family:  
  o Avoid contact with lake, river or wetland waters as much as possible. If you must come in contact with the water, do it before 8:00 am when the worms are less likely to be swimming around.
  o Take PZQ during MDA and encourage your children to take the PZQ they are given at school. Swallowing PZQ kills worms in your body.
Always use a latrine and make sure everyone in your family uses a latrine. Do not defecate or urinate outside a latrine, and especially do not defecate in rivers, lakes or wetlands. This is how the worms get into the water.

- Give examples and testimonies from people who used to suffer from Bilharzia and have adopted preventive practices. Now, they feel well and are more productive.
- Example of a leader, teacher or health worker who was able to change the situation in a community or district, demonstrating the improvement in people’s lives and their positive attitude toward the leader, teacher or health worker.

Key content:
- Bilharzia, how it is spread and its dangers;
- Bilharzia is NOT caused by witchcraft; it can be prevented and treated;
- How to reduce your risk of bilharzia:
  a) If you have to stand, wade, walk or swim in the water, do it before 8.00 am, when there are not so many worms in the water.
  b) Bathe with water from a protected water source if possible.
  c) If you must use water from a river or lake for bathing, collect water and keep it for 24 hours before you use it.
  d) If you have to walk in lake, river or wetland water, wear boots.
  e) If you have to do anything in a lake, wetland or river, limit the amount of time you spend in the water.
  f) Take your PZQ as instructed
- PZQ is not a vaccine against bilharzia but a treatment for bilharzia. You have to continue protecting yourself to avoid infection.
- PZQ can have side effects. Taking food before PZQ can reduce side effects.
- Frequent bloody diarrhea and abdominal pain are symptoms of Bilharzia. People who experience these symptoms should visit a health facility and get checked.
- If everybody uses a latrine, the Bilharzia transmission cycle will be terminated. Set an example. Ensure you and everyone in your family and community uses a latrine at all times.
- Encourage everyone in your community to always use a latrine. They should not defecate or urinate outside a latrine. And, never defecate in rivers, lakes or wetlands. This is how Bilharzia gets into the water.
- Leaders should encourage families that have no latrines or whose latrines are dilapidated to build latrines. Reach out to organizations that support latrine construction for advice concerning design and materials. Seek support for families who need to build latrines. It is for the protection of the entire community.

Creative Considerations:
- Five 2-minute radio dramas in 10 languages.
- All should carry the same campaign tagline as the radio spots and radio programs, which is the call to action, and use the campaign jingle for music.
- Each skit should focus on a different message:
SKIT ONE: Audience: Adults in endemic districts. Give an example of a man who has a job that requires him to stand or walk in water (fisherman, car washer, shell collector, sand mining, etc.), living near a lake. Whenever there was a PZQ distribution in his village, he avoided taking it because he didn’t see why he should when he didn’t feel sick. Meanwhile, he had symptoms of Bilharzia (stomach discomfort, diarrhea) but was unaware it was caused by Bilharzia. Then he became very weak and sick. He lost his appetite and lost a lot of weight. He gets treated and learns about how to prevent it in future by avoiding contact with the lake. He adopts practices to avoid contact with lake—using boots, or carrying water in jerry can and letting it sit for 24 hours.

SKIT TWO: Audience: Adults and school aged children in endemic districts; Give example of a mother and children who had Bilharzia symptoms (not severe but enough to feel uncomfortable and tired) but didn’t realize they had Bilharzia. One of the children became very ill and was too weak to go to school. The child is treated and the health worker tells the mother and child that they need to avoid contact with water. They usually wash their laundry in the river and the children bathe and swim in the river. They change their habits to reduce contact with the water (eg. bring water from the river in jerry cans and letting it sit for 24 hours, using that for bathing and washing, rather than standing in the water; stopping her children from swimming and wading in the water. They all feel stronger, and the children start performing better in school.

SKIT THREE: Audience: Adults and school aged children in endemic districts; This could be a family with a child who has severe Bilharzia with abdominal ascites. Everyone in the community ostracizes the child, thinking he is bewitched. We learn that Bilharzia kills children; that it is caused by worms in water that enter through the skin; that it can be prevented by avoiding contact with lake, river, wetland water; that taking the Bilharzia medicine given by the MOH every year kills any Bilharzia worms children and adults have in their bodies. So, it can be cured and it can be prevented. But, if you get it and don’t treat it, you might not feel sick for a long time. But, eventually, it will make a person very sick and even kill.

SKIT FOUR: Audience: Parents and school aged children in endemic districts; focus on PZQ, why to take it every year, that a person can have Bilharzia without knowing it for a long time, how to reduce side effects by eating before taking the tablets, that it is not a vaccine but a treatment and need to avoid contact with lake, river, wetland water to keep Bilharzia-free after taking PZQ.

SKIT FIVE: Audience: Leaders, teachers, health workers; this one should be about latrine use and how it can help stop transmission of Bilharzia, with a particular emphasis on not defecating or urinating near or in the water. It should include a description of the life cycle of Bilharzia. Emphasize what a leader, teacher, health worker can do to reduce the risk of Bilharzia in their communities.
• Languages: English, Ateso, Alur, Runyoro/Rutoro, Rukonjo, Swahili, Luo, Lugbara, Lusoga, Luganda.
• Tone: Serious and educational yet encouraging.
• Credits: This message is brought to you by the Ministry of Health.