Community Involvement in Research Projects in Manhiça: the Case of a Malaria Intervention by CISM



Centro de Investigação em Saúde da Manhiça

Presentation Structure

- Some research activities at CISM
- The relationship between CISM and the community
- An example of the relationship CISM/community
 - The IPTi clinical trial
 - Problems faced during recruitment
 - Measures taken to resolve such problems
 - The socio-cultural study
- Lessons learnt and conclusions

The Relationship CISM/community

- The community: CISM's main target group
- Health Research is a relatively new concept to the communities of Manhiça
- This calls for dialogue/ understanding/ rapport building between CISM and the target group. I.e., clarity in:
 - CISM objectives, research objectives
 - Clinical procedures
 - Implications to participants
 - Benefits
- From CISM's perspective it is important:
 - Adherence to malaria control projects
 - Continuous participation

An example of the Relationship CISM/Community: the IPTi Trial (1)

Over 2000 children participated in a clinical trial: IPTi

- Overall procedure:
 - SP (fansidar) administrated at 3, 4, 9th months following the EPI routine vaccination calendar
- Problems found regarding recruitment to the trial:
 - ...Initially high enrolment rates
 - Resistance to participation/ rumours
 - Low adherence/ increased drop out rates

An Example of the Relationship CISM/Community: the IPTi Trial (2)

- Immediate reaction by CISM:
 - Setting up of a Social
 Science research team
 - Socio-cultural study of community perception of the trial



- Main finding:
 - A number of IPTi procedures culturally uncommon

Examples of Rumours

How dare they collect litres of blood from a child who lacks blood?

They are measuring the height of our children so that they can make coffins for them





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Measures Following the Socio-Cultural Study Results

- Community sensitisation and mobilisation:
 - Frequent community meetings
 - A tour of CISM offered to community leaders
- Alterations in some recruitment procedures:
 - Refinement of the informed consent
 - Selection of respectable staff to conduct recruitment
- Alterations in the procedures:
 - The format of the measuring tape was modified
 - Blood collected in capillary tubes
 - Withdrawal of meal offered to mothers

Lessons Learnt and Conclusions

- Non-participation of community members in study design per se
- Active presence of a social science research team in all clinical trials
- Active participation of the community in the choice of appropriate study procedures
- Researcher must be open to suggestions to constant re-adaptations to research tools and procedures
- Continuous Feed-back to the community leaders and their communities

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