

PO-AAJ-141

ISN...577

9311570005301

INFANT FEEDING STUDY

AID/DSAN-C-0211

Second Interim Progress Report

July - December 1981

Prepared by:

The Population Council

Columbia University

Cornell University

TABLE OF CONTENTS

I.	Overview of Study Progress.....	1
II.	Cross-Sectional Survey	
	Sampling Design.....	4
	Development of Survey Instruments.....	5
	Survey Procedures.....	7
	Data Collection.....	8
	Future Activities.....	8
III.	Ethnographic Research	
	Progress, July - December 1981.....	9
	Ethnographic Contribution to Survey Development.....	10
	Future Activities.....	12
IV.	Marketing	
	Training Program.....	13
	Panel Meetings.....	13
	Site Visits and Technical Assistance.....	14
	Integration with Ethnography.....	14
	Consumer Behavior.....	15
	State of the Industry and Retail Audit.....	15
	Health Service Infrastructure.....	17
	Future Activities.....	18
V.	Appendices	
	A. Site Visits, July - December 1981	
	B. Financial Report Through September 30, 1981	
	C. Marketing Training Agenda	
	D. Marketing Study Product Memoranda	
VI.	Attachments	
	A. Collaborating Institution Progress Reports	
	B. Consortium Staff Site Visit Reports	

I. OVERVIEW OF STUDY PROGRESS

The six-month period July 1 - December 31, 1981 was marked by significant advances in the progress of the study in all four sites. As evident in the first progress report, major attention during the period January 1980 through July 1981 was given to selection of sites, country proposal development, administrative arrangements necessary to solidify our collaboration with each counterpart institution* and the development of core technical materials to provide guidelines for further work in each country on each of the three major study components (ethnography, infant feeding practices survey, marketing study). During the last six months of 1981, the following activities were accomplished:

Colombia: The survey was approved by the Consortium and discussed with a subgroup of AID Review Panel members at a meeting with Consortium staff on September 11, 1981. After a one-week training period, the survey was launched on October 26 and data collection was completed by December 15. Retail audit and state of the industry data for the marketing study were collected and submitted to Trost Associates, Inc., the Consortium's marketing subcontractor. A final report is being prepared at this time based on this information. Work on Phases 1 and 2 of the ethnography was completed and a report is expected in early spring.

* Javeriana University, Bogota; Mahidol University, Bangkok; Diponegoro University, Semarang; Central Bureau of Statistics (CBS) and African Medical and Research Foundation (AMREF), Nairobi.

Indonesia: The survey instrument and survey procedures were developed by the research team and reviewed by Consortium staff. Approval for survey implementation was given in December. Data collection is expected to be completed in early 1982. The Phase 1 ethnography has been completed and a report is in preparation. To date, we have received only a brief draft report from Diponegoro University on study progress in 1981. Thus most of our information is based on Consortium staff site visit reports (see reports in Attachment B), and consultations with Dr. Fatimah Moeis in New York City in December.

Thailand: The survey instrument was developed and reviewed with Consortium staff. By the end of 1981 the research team had begun making final revisions in the questionnaire along the lines suggested by Consortium staff. Survey implementation is expected to begin in February 1981. The Phase 1 ethnography has been completed and the first few chapters of the ethnography report have been drafted.

Kenya: As discussed in the Consortium's first progress report to AID, activities related to the development of the Kenya proposal were initiated almost 2-3 months later than in the other study sites. However, through the efforts of a skilled research team under the direction of Dr. John Kekovole at the Central Bureau of Statistics (CBS), with technical assistance from the Kenya study's technical coordinator, Mr. Terry Elliott, work on the Kenya study accelerated at a steady pace during the second half of 1981. A survey instrument was developed by the team in consultation with Consortium staff members Dr. Michael C. Latham and Dr. Iani Stephenson (on sabbatical leave in Nairobi during the present academic year), and was submitted to Consortium staff in New York for review in December. It now appears that the revised

final instrument will be ready in time to begin the survey by the first week in March.

More specific information on study progress in each participant country is described in the following sections of this report.

II. CROSS-SECTIONAL SURVEY

Sampling Design

Between July 1 and December 31, 1981 the final sampling plan was completed for the infant feeding surveys in all four countries.

Colombia: During his site visit to Bogota, Dr. Solimano and Mr. Leonel Castillo, the Colombian sampling consultant, met to discuss the final sampling plan. Upon Dr. Solimano's return to New York, he met with Dr. Laukaran and Mr. Irving Sivin of the Population Council to review the Colombian sampling document and maps. This consultation resulted in the final approval of the Colombian sampling plan.

Indonesia: Mr. Sivin spent two days in Semarang in late October meeting with Prof. Moeljono, Dr. Budioro, and staff of the Central Census Bureau in Semarang to review and modify sample selection procedures. This consultation, which was very satisfactory both from the point of view of the Consortium as well as the Indonesian study team, resulted in the approval of the Indonesian sampling plan.

Thailand: Mr. Sivin was in Bangkok on other business in December, but was able to meet with Dr. Somchai of Mahidol University to discuss sampling procedures. This consultation was brief because of the schedules of Dr. Somchai and Mr. Sivin. Mr. Sivin held a subsequent meeting with Dr. Anek, the statistician for the project in Bangkok, but felt that further clarification of the proposed sampling procedures was required. Population Council Bangkok staff members Dr. John Stoeckel and Dr. Barnett Aaron will

review these procedures with Dr. Somchai in January. It is anticipated that, as a result of their discussions, the sampling plan for Bangkok will be approved at that time.

Kenya: Because of considerable sampling expertise at the Central Bureau of Statistics (CBS), little technical assistance was required for the sampling procedures in Kenya. Correspondence was exchanged regarding the sampling plan for the survey in Kenya and final approval was given after reviewing the sampling plan with Mr. Sivin.

Development of Survey Instruments

During the last half of 1981 the completion of survey instruments for each of the four sites proceeded at a rapid pace.

Colombia: During July, Dr. Solimano and Dr. Van Esterik traveled to Bogota for consultations with the research group at Javeriana University. The main focus of this trip was to review the progress of the Phase 1 ethnography and hold working sessions with members of the Javeriana research team to ensure that the findings of this research would be integrated into a locally adapted questionnaire based on the Consortium's core survey instrument. The goal was to construct a questionnaire both appropriate to the interests of the Colombian investigators and suitable for international comparison.

The research team prepared a second draft of the questionnaire based on the meetings held with Dr. Solimano and Dr. Van Esterik (see site visit report in Attachment B). On September 11, Consortium staff met with members of the AID Review Panel to review this draft instrument. The meeting resulted in suggested revisions which were communicated to the Colombian team. This communication resulted in a final agreement on a set of hypotheses emanating from the ethnographic findings and on a questionnaire which was approved for implementation.

Indonesia: Dr. Laukaran traveled to Indonesia in September to provide technical assistance with the development of the survey questionnaire and with the integration of the ethnography into the questionnaire. Dr. Laukaran worked with Prof. Moeljono, the Diponegoro University staff involved in the preparation of the first draft questionnaire, and the ethnographic team to discuss integrating ethnographic findings into the questionnaire.

Dr. Van Esterik's site visit in October provided an opportunity for her to review the questionnaire with the research team to ensure that ethnographic findings were used in the construction of survey questions.

In December, Dr. Fatimah Moeis traveled to New York following her participation in a conference in Santiago, Chile, and spent three days in consultation with Consortium staff. At that time, a second draft questionnaire was reviewed and further modifications were made, including those necessary to integrate the consumer behavior module. The Consortium approved the questionnaire for field implementation.

Thailand: In September, Dr. Laukaran visited Thailand to provide technical assistance with the development of the questionnaire and the integration of the ethnography into the questionnaire. The first draft questionnaire was reviewed with Dr. Somchai and his staff and with Mr. Tawisak and the ethnographic team. In November, a second draft questionnaire, which had been reviewed with Dr. Van Esterik during her brief site visit, was submitted by Dr. Somchai for Consortium review. However, the Consortium requested further modifications. The research team continued its work on questionnaire revisions during the month of December. The Consortium expects to receive the revised instrument in early January 1982.

Kenya: During Dr. Van Esterik's visit to Kenya, working sessions were held with Dr. John Kekovole, Dr. Michael C. Latham, Mr. Terry Elliott, and other members of CBS and AMREF staff to continue work on the draft questionnaire to be used in Kenya. This questionnaire was reviewed in New York during December and suggested revisions were sent to Dr. Kekovole. The questionnaire will undergo additional revisions in January. Approval for survey implementation is anticipated in time to begin the field work by March 1, 1982.

Survey Procedures

During this report period, considerable attention has been given to the need for technical assistance in the development of appropriate survey procedures. Every effort has been made to provide technical assistance appropriate to the needs of each research team.

Colombia: Minimal Consortium input was required in Colombia with the development of survey procedures because the research team at Javeriana University has had considerable prior experience in survey implementation.

Indonesia: Procedures for the survey in Indonesia were reviewed by the Diponegoro research team with Mr. Sivin. Consortium staff also discussed these procedures with Dr. Fatimah Moeis during her visit to New York in December.

Thailand: The survey procedures for Thailand were the subject of detailed discussions and modifications during Dr. Laukaran's visit in September. Population Council Bangkok staff will review the procedures and provide technical assistance prior to final implementation of the survey.

Kenya: CBS has had considerable experience with survey administration and has well established survey procedures. In addition, Mr. Terry Elliott, who has been in Nairobi throughout the project period, has been providing continuous on-site technical assistance. Dr. Latham and Dr. Stephenson meet regularly with Dr. Kekovole, Mr. Elliott, and other key staff to monitor progress and provide expert consultation.

Data Collection

Data collection for the infant feeding practices survey in Colombia began on October 26 and was completed by December 15, prior to the Christmas holidays. The actual process of data collection is reported more fully in the Colombian progress report in Attachment A.

Data collection had not yet begun in any of the other four countries by year's end; however, the survey in Indonesia is expected to begin in January 1982, the survey in Thailand in February 1982 and the survey in Kenya in March 1982.

Future Activities

During the next six months, the following work will be accomplished:

- 1) Data collection will be completed in all four countries.
- 2) Plans for in-country data analysis will be completed.
- 3) Data coding, entry, editing and cleaning will be completed and analysis will begin.

III. ETHNOGRAPHIC RESEARCH

Progress, July-December 1981

During this six-month period, all country teams completed the field work for the Phase 1 ethnography. Currently, all four country teams are analyzing their field data and preparing reports. The methodology and depth of analysis differed in each site depending on the experience and training of the ethnographic team. Dr. Van Esterik is making every effort to monitor ethnographic activities in each site and provide the necessary assistance with report preparation. In general, no major problems have developed, and we anticipate the field reports will be a valuable contribution to the understanding of infant feeding practices in the four countries.

Colombia: The Colombian team, under the direction of Lic. Maria Eugenia Romero, combined the Phase 1 and Phase 2 ethnography in each of three sectors of Bogota. Field work in the third sector was completed at the end of October, after review of the results of sectors one and two during a site visit by Dr. Giorgio Solimano and Dr. Penny Van Esterik in July. The report on this phase of the research is in progress and is expected in the spring.

Thailand: Field work in four communities in Bangkok was completed at the end of September 1981 with no unexpected delays or problems. The team gathered a great deal of information, and the task of analysis and report writing will be formidable. During a brief site visit by Dr. Van Esterik in November, agreement was reached on the format for the final report, and a draft of the first three chapters was submitted. The final report is in progress.

Indonesia: The Indonesian team completed field work in three areas of Semarang at the end of September. They produced a sizeable file of descriptive material about each community. The team relied heavily on Dr. Nico Kana from Salatiga University for direction. They produced an impressive mini-ethnography seminar on November 1, 1981, outlining the main findings from the Phase 1 research. This forum generated substantial discussion about infant feeding and the application of ethnographic methods to investigate infant feeding practices. Following Dr. Van Esterik's site visit in October, the team outlined their proposed final report to be submitted in the spring.

Kenya: The ethnographic field work was conducted in Kibera, a community on the outskirts of Nairobi, by two field officers from the African Medical and Research Foundation (AMREF). Kikuyu and Luo women of several income levels were interviewed. Field work was completed in November and a final report is expected by February 1982. An outline of the final report is included in Dr. Van Esterik's site visit report (see Attachment B).

Ethnographic Contributions to Survey Development

As recommended by the Consortium, meetings were held between the ethnographic teams and the survey teams to discuss the incorporation of ethnographic information into the construction of the survey questionnaire. Dr. Laukaran and Dr. Van Esterik had a further opportunity to observe the interaction between the teams in both Thailand and Indonesia during their site visits. The ethnographic component guided the construction of the survey instrument in the following ways:

Colombia: The small size and closeness of the study team guaranteed continual feedback between components. In addition, Dr. Solimano and

Dr. Van Esterik participated in the construction of the draft survey instrument in July 1981 (see site visit reports, Attachment B).

Thailand: The ethnography contributed some new content areas to the survey instrument. Technical assistance ensured that most questions were culturally appropriate and suitably phrased and that the instrument covers the core areas. In addition, the ethnography itself should be a strong complementary study.

Indonesia: Although meetings were held between the ethnographic and survey teams, the survey instrument was developed independently from the marketing and ethnographic components. During the mini-ethnography seminar, the teams began to think and respond to the needs of the study as a single unit, generating hypotheses and producing new questions. This kind of cooperation and exchange between the research teams will continue during the period of data collection and analysis.

Kenya: The ethnographic and survey teams worked completely separately, but an all day meeting between the two teams in November (see Dr. Van Esterik's Kenya site visit report, Attachment B) produced excellent integration. The ethnographers described their work, with the survey team asking questions; later the survey team produced their survey instrument, with the ethnographers commenting on the order and phrasing of questions, and adding new content areas. The instrument produced reflects the work of both teams. Content areas not included in the survey will be explored in the Phase 2 ethnography.

Future Activities

During the next six months, the following work will be accomplished:

- 1) Work will continue on the Phase 2 ethnography in Kenya, Thailand and Indonesia (see attachments to Dr. Van Esterik's Thailand, Indonesia and Kenya site visit reports).
- 2) The ethnographic results will be reviewed to provide additional background information for the marketing component, with the objective of integrating the results from the two components.
- 3) Following receipt of the Phase 1 ethnography reports from each country, Dr. Van Esterik will begin work on a final report based on the reports from each country, trip observations, and a secondary literature review. This report can be used by the survey teams to help explain findings from the survey. Plans for the integration of the ethnography with the survey and marketing components will be made after the initial analysis of ethnographic data.

IV. MARKETING

Training Program

During the first two weeks of July, Trost Associates, Inc. (TAI), in collaboration with Consortium staff, conducted a training program to introduce key country researchers to the basic purpose and approaches of market research in general and to familiarize them with the specific objectives, methods and materials developed for the infant feeding study. Participants were Adela Morales de Look (Colombia), who has responsibility for all segments of the marketing component; Dr. Sahid (Indonesia) who has responsibility for major portions of the state of the industry analysis, the retail audit and the consumer behavior questionnaire; and Terry Elliott, who is assisting in the design and implementation of the overall study in Kenya. Dr. Thonglaw (Thailand) and other Kenyan project staff involved in the marketing component were unable to attend because of budget limitations, but they received all training materials, background information and detailed explanations of the training sessions. The schedule for the program is attached. Participants and TAI and Consortium staff found the sessions most useful preparation for the field work.

Panel Meetings

At the April Panel Meeting considerable attention was focused on the hypotheses related to the marketing component. In response to the Panel's recommendations, the Consortium reformulated these as general "research questions" to be refined and elaborated on the basis of descriptive data emerging

from the ethnography and state of the industry analysis. In December, a subgroup of the panel met to follow-up on this work and to address these concerns further in the context of the findings from the Colombia study contained in a preliminary report which was available for the meeting.

Site Visits and Technical Assistance

Various Consortium staff had the opportunity to visit all four sites during this reporting period. Although none of these trips had marketing issues as their principal objective, the staff involved had the opportunity to review progress in this area, identify existing and potential problems, respond to country questions and concerns, and initiate follow-up activities upon their return to the U.S. However, had the project budget permitted, technical assistance visits solely for the purpose of providing assistance for the marketing component might have helped to minimize delays and difficulty in coordination and implementation of field activities.

Integration with Ethnography

Preliminary analysis of the Phase 1 ethnography findings and Dr. Van Esterik's reports from her site visits have made important substantive contributions to the final design and implementation of the three marketing segments* in all sites. This material is also being incorporated in the Consortium's continuing work on constructing relevant hypotheses specific to the marketing study in each country as well as identifying important questions on which to focus in the cross-national comparison.

* State of the industry analysis, retail audit, and consumer behavior analysis.

Consumer Behavior

In conjunction with the development of the questionnaire for the infant feeding practices survey, the consumer behavior module for each of the four sites was submitted to the Consortium for comment and approval. The country market researchers worked closely with ethnographers in developing the infant food product lists to be included for each site. These products have been uniformly categorized according to the guidelines prepared by Consortium investigators. (See Appendix D)

State of the Industry and Retail Audit

The status and progress of these two components of the marketing study varies from country to country.

Colombia: All phases of data collection for the marketing study in Colombia were completed by December 1981. Adela Morales de Look spent one week at TAI's offices in Connecticut in early December. During this time detailed discussions with TAI, Consortium staff and Prof. James E. Post, the Consortium's marketing consultant, were held concerning the nature and interpretation of the findings and organization of the final report on the state of the industry and retail audit segments. A preliminary draft report was prepared for discussion at the December 21 meeting of panel members and Consortium staff to review the Colombia marketing study and discuss hypothesis development. The Colombian research team and the Consortium will continue to analyze this material and integrate the findings with the ethnographic and survey data.

Kenya: Negotiations with Research Bureau, Limited (RBL—a private market research firm in Nairobi) and the Central Bureau of Statistics (CBS) were completed concerning the division of responsibility for the various components of the marketing study and the subcontracts were signed. CBS completed the interviewing for the government segment of the state of the industry analysis as of mid-December. Interviews with industry executives, importers, distributors, and other key informant groups to be undertaken by RBL, are still in progress. A census of retail outlets has been completed and the sampling plan for the audit was approved by TAI.

Indonesia: TAI negotiated separate subcontracts with In-Search in Jakarta (a private market research firm) and Dr. Sahid of Diponegoro University. In-Search is to prepare an overview of published data on the infant food industry in Indonesia, undertake a small-scale retail outlet survey in Jakarta (similar to Diponegoro's responsibilities in Semarang), prepare an overview of promotional strategies employed by infant formula companies, and conduct interviews with government officials and industry executives. The secondary research is underway, but initiation of the remaining tasks requires coordination and discussion with Dr. Sahid. We are unable to report on Dr. Sahid's progress with the government, manufacturing and health key informant interviews for the state of the industry analysis and the plans for the retail audit because no detailed reports have been submitted. The importance of monitoring these activities has been stressed repeatedly in TAI and Consortium correspondence, and we are hopeful that as a result of Dr. Solimano's site visit in February 1982 we will have an update on the status of marketing research activities. A brief report noting the completion of the census of retail outlets in Semarang was received in early November.

It did not, however, include a breakdown by type of store, or a sampling plan, and this information had been requested prior to approval for the initiation of field work.

Thailand: TAI negotiated separate subcontracts with Deemar (a private market research firm in Bangkok) and Dr. Thonglaw of Mahidol University. Deemar is undertaking the retail audit and industry interviews and Dr. Thonglaw is responsible for secondary research, government and health sector inquiries and overall coordination. In Thailand there also appears to have been some delay in the exchange of information and coordination of activities between Deemar and Mahidol University. Progress reports have indicated, however, that data collection is proceeding. As in Indonesia, Dr. Solimano will be meeting with all the parties involved to obtain detailed information on the status of all market research activities and to establish firm timetables for completion of the remaining work.

Health Service Infrastructure

Interviews with health service providers, administrators, and policy-makers, and observational visits to health facilities are important sources of data for both the marketing component and the exploration of hypotheses regarding the role of the health sector in determining infant feeding practices. As a result, in all four countries, project staff associated with the ethnography, survey, and marketing components have collaborated in developing the design and conducting the research on this topic. This multidisciplinary approach will facilitate an integrated analysis of the findings.

Future Activities

During the next six months, the following work will be accomplished:

- 1) Data collection for the state of the industry analysis, retail audit, and consumer behavior analysis will be completed in Indonesia, Kenya and Thailand.
- 2) Reports on the state of the industry and retail audit in each country will be prepared.
- 3) A plan for analysis of consumer behavior data will be developed.
- 4) A final set of marketing hypotheses will be formulated.

V. APPENDICES

APPENDIX A

SITE VISITS (See Attachment B for complete reports)

<u>Country</u>	<u>Dates</u>	<u>Purpose</u>	<u>Staff Member(s)</u>
Colombia	7/26-8/1	To review ethnographic progress; to assess needs for additional ethnographic training and design appropriate strategies; to assist with development of a framework for ethnographic data analysis; to develop plans for incorporating ethnographic findings into the survey and marketing study;	Giorgio Solimano
	7/21-8/1		Penny Van Esterik
		To assist with the development of a draft sampling plan and the country-specific adaptation of the Consortiums's core questionnaire	
Thailand	8/24-9/10	To assist with the development of the infant feeding practices survey to ensure that ethnographic findings and core questions are incorporated into the final instruments; to assist with the preparation of a survey procedures manual	Virginia Hight Laukaran
Indonesia	9/23-26		
Indonesia	10/26-27	To provide consultation on sample design and survey procedures	Irving Sivin
Indonesia	10/22-11/2	To review the progress of the ethnography; to advise the team on the development of additional methods or topics of study; to review hypotheses development; to assist with the development of a plan of analysis for the ethnography; to review the integration of ethnographic findings into the survey instrument	Penny Van Esterik
Thailand	11/3-7		
Kenya	11/8-24		

CONTRACT No. AID/DSAN-C-0211
PIO/T No. 3698404

STATEMENT OF EXPENDITURES AT SEPTEMBER 30, 1981

	<u>Budget 9/30/79 12/31/82</u>	<u>Expended To Date 9/30/81</u>	<u>Expended This Period 7/1/81-9/30/81</u>
Salaries	\$ 211,046.00	\$127,282.00	\$ 19,962.43
Fringe Benefits	52,230.00	29,567.05	4,846.64
Travel and Transportation	42,393.00	44,352.82(2)	6,931.89
Allowances	24,820.00	- (2)	-
Other Direct Cost	42,403.00	4,378.64	726.54
Materials and Supplies	4,978.00	1,009.66	279.47
Subcontracts	<u>828,659.00</u>	<u>336,407.08(3)</u>	<u>117,700.57(3)</u>
<u>Sub-Total</u>	<u>1,206,529.00</u>	<u>542,997.25</u>	<u>150,447.54</u>
Indirect Cost: This Period:			
Direct Cost (Excluding Consultant Fees)	\$150,447.54		
Program Management @ 19% =	<u>28,585.03</u>	113,414.00	99,395.52
<u>Sub-Total</u>	<u>179,032.57</u>		28,585.03
Management and Support Services @ 12% =	<u>21,483.91</u>	<u>131,994.00</u>	<u>77,108.16</u>
<u>Total Indirect Cost</u>	<u>245,408.00</u>	<u>176,503.68</u>	<u>50,068.94</u>
<u>Sub-Total</u>	<u>1,451,937.00</u>	<u>719,500.93</u>	<u>200,516.48</u>
Consultants	<u>32,600.00</u>	<u>16,655.00</u>	<u>3,217.00</u>
<u>TOTAL EXPENDITURES</u>	<u>\$1,484,537.00 (1)</u>	<u>\$736,155.93</u>	<u>\$203,733.48</u>

(1) Funds Obligated \$1,402,000.00 at 9/30/81.

(2) Travel expenses (Short term per diem) are included under (Field) Allowances in the cost proposal and contract. To avoid misleading reporting and unnecessary splitting of travel expenses between two budget lines, (Travel and Transportation and Allowances) all Air travel, Transportation and related expenses are included under Travel and Transportation.

Cont'd on next page

The Population CouncilCONTRACT No. AID/DSAN-C-0211PIO/T No. 3698404STATEMENT OF EXPENDITURES AT SEPTEMBER 30, 1981(3) Summary of Commitments and Payments

	Award/Contract		
	Awarded at 9/30/81		Amount Paid At 9/30/81
	Estimated Cost	Amount Obligated	
CI80.16A	\$157,308.00	\$100,356.00	\$ 97,710.51
CI80.17A & CI81.37A	171,351.00	69,892.00	40,462.00
CI80.43A	160,000.00	160,000.00	110,349.38
CI81.4A	85,781.00	61,816.00	46,362.00
CI81.24A	51,854.00	25,927.00	12,985.19
CI81.25A	52,164.00	26,082.00	13,041.00
CI81.28A	34,852.00	27,882.00	10,723.00
CI81.29A	19,094.00	19,094.00	4,774.00
<u>Total</u>	<u>\$732,404.00</u>	<u>\$491,049.00</u>	<u>\$336,407.08</u>

The undersigned hereby certifies: (A) That payment of the sum claimed under the cited contract is proper and due and that appropriate refund to AID will be made promptly upon request in the event of disallowance of costs not reimbursable under the terms of the contract, (B) That information on the fiscal report is correct and such detailed supporting information as AID may reasonably require will be furnished promptly to AID on request at the Contractor's home office or base office as appropriate and (C) That all requirements called for by the contract to the date of this certification have been met.

By: 
George A. Babb

Title: Assistant Treasurer and Comptroller

Date: December 16, 1981

TRAINING SESSIONS--AGENDA

- July 2/3 Introduction to TAI/Overview of Departments--their responsibilities (Background reading: TAI Project Flow Chart. Complete work file of a project--from proposal to final report)
- July 3 Overview of Study Objectives, Presentation/Discussion of Secondary Research Findings, and Review of Proposed Interview
 Morning: Government/Economic Profile
 Afternoon: Industry
- July 7 Overview of Study Objectives, Presentation/Discussion of Secondary Research Findings, and Review of Proposed Interview (continued)
 Morning: Medical Infrastructure
 Project Responsibilities
- July 8 Sampling and Field Control (Explanation/How to: Control/Supervise)
- July 9 Interviewing and Coding
 Morning: Interviewing Session (including quality check)
 Afternoon: Coding Session
- July 10 Tabulations and Analysis
 Morning: Tabulations and Banner Point Analysis
 Afternoon: Qualitative Analysis Practice Session
- July 11 (Tentative "Overflow" Day)
- July 13 Summary of Project Phases/Question and Answer Session

The Population Council

International Programs

One Dag Hammarskjöld Plaza
New York, New York 10017
Cable: Popocouncil, New York
Telephone: (212) 644 1300
Telex: 234722 PCCO UR

M E M O R A N D U M

TO: See Distribution List Below

FROM: Virginia Hight Laukaran *VHL*

DATE: 23 July 1981

SUBJECT: Products to be Included in Marketing Studies

On July 8 a final determination was made of the products to be included in the state of the industry and retail audits. The product categories are as follows:

- (1) All infant formulas
- (2) Dairy products (milk) - canned milks, powdered, whole, skim, etc.
- (3) Weaning foods:
 - a. to be mixed with milk/formula or water (i.e., cereals)
 - b. independent (processed and used alone) foods (i.e., jars or fruit, cans of juice, etc.)
- (4) Foods nutritionally inappropriate for infants but frequently given to them (i.e. glucose solutions, sweetened condensed milk, corn starch, rice flour, plaintain flour, and similar preparations)
- (5) Feeding implements found in (same) stores (i.e., bottles, nipples not spoons, dishes)

If there are any questions on the products to be covered, they can be addressed to the market research staff in each country, to Al Ritchie at Trost Associates or to myself.

Distribution:

M.C. Latham
G. Srlimano
B. Winikoff
J. Spicehandler
E.K. Kellner
P. Van Esterik

Somchai Durongdej
Moeljono Trastotenojo
Belen de Paredes
John Kekovole
Norman Scotney
Terry Elliott

VHL/dlb

The Population Council

MEMORANDUM

TO: Belen Samper de Paredes, Moeljono Trastotenojo,
John Kekovole, and Somchai Durongdej

FROM: Giorgio Solimano^(S) and Beverly Winikoff^(N)

September 9, 1981

RE: Products used to feed infants

We reviewed the product labels submitted to us to develop a list of relevant product classifications for use in the Infant Feeding Study. In order to analyze the nutritional adequacy of the diet offered to infants, we would like to be able to answer questions of the following type:

- A.
- 1) How many babies are being fed formulas?*(
(e.g. S26, NAN, Cow and Gate, SMA, premium Ostermilk)
 - 2) How many babies are being fed milk for children with special medical conditions?
(e.g. al 110 (Nestle), Isomil)
 - 3) How many are receiving cow's milk?

cans or powders	(whole milk? (semi-skim? (skim?	(e.g. KLIM)
fresh liquid milk	(skim (whole	
 - 4) How many receiving modified milk?
e.g. sweetened condensed (LA LECHERA)

B. For each milk product on the list (A1-A4) we also need to know:

- 1) product content-
 - 'protein' content and type (lactalbumin and casein)
 - fat content
 - carbohydrate content and type
 - calories per gram or per 100 gm.

* This category will later be broken down into "humanized" and non-"humanized" products.

- 2 -

TO: Belen Samper de Paredes, Moeljono Trastotenojo,
John Kekovole, and Somchai Durongdej

September 9, 1981

2) any additions-
e.g. sugar, iron, vitamins, soy protein or corn flour, etc.

C. For cereals, weaning food, other infants foods, etc.: (if available)

- calories/100 gm of basic product

- protein/100 gm of basic product

This information will be very valuable for the integration of findings from the four sites, especially as regards the use of locally produced infant feeding products. Thank you for your time and attention to the collecting of these data.

BW/cmd

cc: P. Van Esterik
E.K. Kellner
M.C. Latham
V.H. Laukaran
J.E. Post
J. Spicehandler
J. Trost