

MASS MEDIA & HEALTH PRACTICES

PROJECT IMPLEMENTATION

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Academy for Educational Development, Inc.

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SEMIANNUAL REPORT NO. 2

Project Director

Dr. William A. Smith

April 1 - September 30, 1979

CONTENTS

	<u>PAGE</u>
I. Background	1
II. Principal Objectives for This Period	1
III. Activities Undertaken	1-8
IV. Projected Activities for Period October 1, 1979, to March 31, 1980	8-9
V. Project Implementation Schedule	10-14
VI. Administrative Report	15

APPENDICES

A. Travel Schedule	A1
B. Trip Report	B1-8
C. Honduras Project Agreement	C1-33
D. Workshop Program	D1-4

I. BACKGROUND

On September 30, 1978, the Academy for Educational Development was contracted by the United States Agency for International Development to implement a five-year project designed to develop a methodology for the application of mass communication to the prevention and treatment of acute infant diarrhea in rural areas of developing countries. Simultaneously, Stanford University was contracted to evaluate the project. The project is designed to build upon past experience with communication technology and to utilize radio and fotonovelas in conjunction with local health delivery services to enable two cooperating Ministries of Health to use mass communication regularly and systematically in their health education program. This effort is a joint project of the Office of Education and Office of Health within the AID Development Support Bureau.

II. PRINCIPAL OBJECTIVES FOR THIS PERIOD

- Selection of project sites.
- Formalization of agreement between project site and AID/W.
- Recruitment and contracting of field personnel for one site.
- Organization of a pre-service planning workshop for field personnel.
- Placement of field personnel, coordination with local counterpart institutions and identification and training of local investigative resources.

III. ACTIVITIES UNDERTAKEN

A. Selection of Project Sites

Of the fifteen countries in Latin America and Africa contacted by cable, four (Honduras, Ecuador, Tanzania, and Cameroon) responded favorably to an exploratory site visit by representatives of the Mass Media and Health Practices Project (MM&HP). The remaining eleven countries indicated that, for a variety of reasons, the MM&HP Project was not appropriate for them at this time. A one-week visit was scheduled to each of the four potential sites (see Appendix A).

These visits had two basic purposes. First, to inform the USAID Mission and local cooperating country personnel of the MM&HP Project objectives and second, to collect information on the countries' willingness and ability to support involvement in this project. The principal criteria established for participation included:

1. USAID Mission's permission to conduct the program.
2. Ability of the cooperating government to provide three to five counterparts, office space, and 50 percent of the financing for radio air time required by the project.
3. Presence of a population of between 300,000 and 500,000 rural people with sufficient sociolinguistic homogeneity to permit systematic targeting of media messages.
4. Presence of a viable radio infrastructure, including 60 percent coverage of target population with radio reception and access to broadcast facilities which would reach these people.
5. Presence of a modest health-worker system permitting some personal contact between target population and health worker.
6. Interest and ability of local government and medical community to participate in a diarrheal control program using mass communication.

Each of these criteria was evaluated on the basis of information collected during a five-day visit. Efforts were made to visit at least one rural community in each country, but the bulk of time was spent making contact with Mission personnel, local government officials, and representatives of relevant international agencies, and in discussions with the local medical community. Each visit produced a detailed trip report (see Appendix B). For the reader's convenience, a short description of salient facts from each visit has been included below.

- TANZANIA - It proved impossible during the first visit to make contact with the decision makers of local cooperating agencies. Discussions with middle-level officials indicated Tanzanian enthusiasm for the project, particularly within the Adult Education Institute and the Health

Education Unit of the Ministry Health. Factors conducive to the project included the high incidence of infant diarrhea, the extensive health worker infrastructure, and the governmental commitment to mass communication and community action programs. This visit raised several questions about the desirability of this site, including the lack of input from decision makers, the potential difficulty of regional radio broadcasting because of national policy decisions, and the scarcity of counterparts resulting from large-scale presence of international donor agencies in Tanzania.

- CAMEROON - Despite significant interest on the part of local health officials, it became clear during this visit that the sociolinguistic complexity of the country, coupled with the very poor rural health care structure, would maké realization of the project almost impossible.
- HONDURAS - The local Ministry of Health officials were very receptive. They fully supported a diarrheal control campaign and were initiating a primary health care training program for traditional midwives, health guardians, and village health representatives. The radio structure of the country permitted local broadcasting, and cultural complexity was minimal. Questions were raised about the quality and number of counterparts the Ministry was able to provide. This issue was not resolved during the first visit.
- ECUADOR - Again, official government support for the program was very positive. Ecuador had just begun a national diarrheal control program and was very interested in cooperating with the MM&HP Project. Adequate counterparts seemed available, media infrastructure was appropriate, and a population of sufficient size and homogeneity could be identified. The principal difficulty was that Ecuador was experiencing a change of governments. It was impossible for the team to make contact with the new government officials, and their commitment to existing programs was questionable.

Upon return from both site visits, debriefing sessions were held with DS/ED and DS/H project monitors. After hearing various points of view, DS/ED decided on June 8 that Honduras and Tanzania would be selected as the two sites for final negotiations. Cameroon was excluded because of its complex linguistic characteristics and its limited health infrastructure. Ecuador was excluded because of the need to move ahead quickly and the impossibility of making contact with the new government to determine their commitment to the project. All four countries were informed of these decisions through DS/ED cables, and follow-up visits were requested for Tanzania and Honduras.

It should be noted that the selection group had questions about Tanzania's suitability for this project. These doubts were due in large measure to the lack of contact with decision makers during the first trip. While a firm commitment was made to negotiate a project agreement with Honduras, this commitment was tempered in Tanzania's case by the need to gather additional information during the second visit.

Drs. Meyer and Smith met with the USAID/Cameroon Mission director in Washington to explain the reasons for the exclusion of Cameroon. A briefing was also held with Ms. Barbara Sandoval, LAC/DR, Health and Nutrition Division Chief, to explain the decisions about both Honduras and Ecuador.

Follow-up site visits were organized for Tanzania from August 18 through September 7, during which time Drs. Smith, Foote, Meyer, and Black (an AED medical consultant) met with upper-level Tanzanian representatives of both the Ministry of Health and the Adult Education Institute. (Detailed trip notes are included in Appendix B.)

A number of new facts were uncovered during this visit, including (a) the Tanzanian government's commitment to preventative rather than curative health education and their concern about involvement in a single-disease focus campaign; (b) the practical impossibility of regional radio broadcasting; and (c) the scarcity of national level counterparts for the project. These potentially negative factors were counteracted by an increased awareness that the Tanzanian health infrastructure is truly impressive; by the continued commitment of Tanzanian practitioners in both the Ministry of Health and the Adult Education Institute to the project; and by the continued willingness of Tanzanian decision makers to consider the project.

No resolution was reached during this visit, but the USAID health officer, Dr. Al Henn, agreed to follow up on Tanzanian offers to include the MM&HP Project in their normal project approval process and inform AID project monitors of their decision by late fall.

B. Formalization of Agreement Between Project Site and AID/W

On September 15, Drs. Smith, Foote, and Levine traveled to Honduras to begin negotiating a project agreement. Drs. Meyer and Ferguson joined the team on September 22. Honduran support for the project was evident from the beginning of the trip, and a formal project agreement was signed on September 27 (see Appendices B & C). The most important unexpected event of the trip was the Ministry's request to AID to fund three national counterparts for the first year of the project, permitting the Ministry to include these individuals in their own budgetary cycle for 1981. The Academy agreed to use existing local-hire funds for this purpose with the understanding that DS/ED would seek additional support to cover these unexpected expenses.

It was agreed that project operations would begin in January of 1980 with the possibility of project staff arriving earlier, perhaps in November or early December, to begin their personal and administrative orientation to the country.

C. Recruitment and Contracting of Field Personnel for One Site

Following the selection of Tanzania and Honduras as potential sites, personnel recruitment began in earnest for two AED technicians. After the second Tanzania site visit, it was clear that the most likely first country would be Honduras; thus emphasis was placed upon recruiting communication experts with a background in Latin America. After reviewing resumes on some sixty candidates, AED selected seven finalists, interviewed them personally, and collected professional references on each. Dr. Meyer's advice was sought on the final seven candidates. By the middle of September, the Academy proposed Mr. Reynaldo Pareja and

Ms. Elizabeth Booth as the two best candidates for the Honduras positions of field coordinator and assistant field coordinator, respectively. After Dr. Meyer interviewed both candidates informally, their names were submitted for official AID approval.

D. Organization of a Pre-service Planning Workshop for Field Personnel

As proposed in the previous semiannual report, the Academy and Stanford agreed to conduct a pre-service orientation and planning workshop for the four field personnel (two with AED and two with Stanford) who would be working in Honduras. During this period, plans for that workshop were finalized and a draft program was prepared (see Appendix D).

Part of the preparation for this workshop has included the identification of consultants in four principal technical areas: social marketing, diarrheal control, behavioral analysis, and formative evaluation. A brief description of the consultants who have been identified by AED in each of these areas is listed below. It is expected that some of them will serve as part of the Stanford Advisory Committee but that the Academy will draw upon their expertise at different stages of project development. It is expected that their contributions will be particularly valuable in the development of the first detailed six-month work plan.

MEDICAL ADVISORS

- | | |
|--------------------------|--|
| Dr. Myron Levine - | Director, Center for Vaccine Development
University of Maryland, School of Medicine |
| | Working with PAHO in several Latin American countries, Dr. Levine has made important contributions to understanding the efficacy of glucose/electrolyte and rehydration therapy in infantile diarrhea. |
| Dr. Norbert Hirschhorn - | Project Director, John Snow Public Health Group
Boston, Massachusetts |

Dr. Hirschhorn has published widely on various aspects of diarrheal disease control. He has worked with native Americans and through WHO with the design and evaluation of a field trial of oral glucose/electrolyte therapy in the Philippines.

Dr. Robert Black -

Center for Vaccine Development, University of Maryland, School of Medicine

Dr. Black has recently returned from several years of field work at the cholera lab in Bangladesh. While there, he was involved in field trials of oral therapy using local mothers as distributors of the electrolyte solution. He spent three weeks with the Mass Media and Health Practices Project in Tanzania.

SOCIAL MARKETING CONSULTANT

Mr. William Novelli -

Porter, Novelli, and Associates, Inc.
Washington, D.C.

Mr. Novelli supervises the development and current operation of the Health Message Testing Service for the National Heart, Lung, and Blood Institute and the National Cancer Institute. He has major responsibility for project planning, pretesting of messages and materials, media analysis, and media studies for the National Cancer Institute.

He has been involved in several planning meetings on the Mass Media and Health Practices Project but has yet to be involved in field visits.

APPLIED BEHAVIORAL ANALYSIS

Dr. Paul Touchette -

Adjunct Associate Professor of Psychology
Boston University, Boston, Massachusetts

Dr. Touchette's work with attention measurement, reinforcement, behavioral analysis, and instructional program design and evaluation is expected to be very relevant to (a) the selection of appropriate change behaviors, (b) the training regimen for health workers, and (c) the overall instructional design for this project.

E. Placement of Field Personnel, Coordination With Local Counterpart Institutions and Identification and Training of Local Investigative Resources

Progress on the actual placement of field personnel, the coordination with local counterparts, and the identification of local investigative resources is pending the initiation of the in-country phase of project operations. Some progress was made on each of these areas during the second visit to Honduras, but finalization awaits arrival of the field personnel.

F. Additional Activities Undertaken

1. Meetings were held with PAHO representative, Dr. James Rust, and WHO representatives, Drs. Merson and Barua to keep them informed of progress on the project and to try to ensure their continued co-operation with project activities.
2. Similarly, representatives of the Center for Disease Control were contacted and informed of MM&HP Project plans. Dr. Steve Jones, a CDC specialist working with the AID Mission in Honduras, was particularly interested in cooperating with us in information sharing, as he was preparing an analysis of a communicable disease-control system needed in Honduras.
3. Collection of information continues with specific emphasis on diarrheal control programs using mass communication strategies. Few have been uncovered, but relevant experiences in social marketing both in the United States and in the developing world are being sought. A compendium of background readings has been prepared for field staff reference.

IV. PROJECTED ACTIVITIES FOR PERIOD OCTOBER 1, 1979 TO MARCH 31, 1980

A. Final Contracting of Field Personnel for Honduras

Upon receipt of AID approval, personnel contracts will be drawn up for Mr. Reynaldo Pareja and Ms. Elizabeth Booth.

B. Budgetary Analysis

A complete budgetary review and analysis will be conducted during the first quarter of this reporting period. The addition of local MOH salaries, increased understanding of actual costs resulting from the identification

of a country site and the contractual costs resulting from delays in site selection, require a thorough analysis to determine future budgetary implications. This review and related recommendations will be submitted to AID for their consideration.

C. Pre-service Orientation and Planning Workshop

The workshop for Honduras field personnel previously mentioned will be conducted during the week of December 10 to 14, 1979. The specific program for this workshop has been included in Appendix D. A pre-workshop meeting of AED and Stanford representatives with workshop consultants will be conducted on the afternoon of November 20, 1979. This will be the first opportunity for all consultants to be briefed together on project goals and operational strategy. It will also provide an opportunity for consultants to meet each other and prepare their workshop sessions.

D. Participation in Search for Second Site for MM&HP Project (October 1979)

The AED will be prepared to participate as requested by AID in the continuing search for a second country site for the MM&HP Project. This may involve a trip to Tanzania or exploratory visits to other countries if Tanzania is excluded. It is impossible at this time to schedule these activities with any greater clarity.

E. Implementation Activities in Honduras

The following Preliminary Work Plan details the activities to be carried out by the AED in Honduras during the period from January 15 to October 31, 1980.

VI. ADMINISTRATIVE REPORTExpenditures - to September 30, 1979

Salaries and Wages	\$ 47,791.25
Employee Benefits	8,869.55
Consultant Fees	6,187.50
Travel & Transportation	13,746.04
Overseas Allowance	-0-
Other Direct Costs	12,107.13
Equipment	-0-
Overhead at 22%	<u>19,514.34</u>
Total	<u><u>\$108,215.81</u></u>

TRAVEL SCHEDULE

COUNTRY	DATES	PARTICIPANTS
Tanzania	April 5-13, 1979	Drs. Foote, Levine, Meyer, Smith
Cameroon	April 15-21, 1979	Drs. Foote, Levine, Meyer, Smith
Honduras	May 14-18, 1979	Drs. Foote, Levine, Smith
Ecuador	May 21-25, 1979	Drs. Foote, Levine, Smith
Tanzania	August 17 - September 7, 1979 September 3-7, 1979	Drs. Black, Foote, Smith Dr. Meyer
Honduras	September 17-28, 1979 September 17-21, 1979 September 22-28, 1978	Drs. Foote, Smith Dr. Levine Drs. Ferguson, Meyer

September 10, 1979TRIP REPORT

TO: Robert Schmeding, Clifford Block, David Sprague

FROM: Anthony Meyer

BRIEFING PAPER: August-September Site Visit to Tanzania

DRAFTED BY: Anthony Meyer; critiqued and amended by William Smith & Dennis Foote

OBJECTIVE OF VISIT:

Optimum - to obtain letter of agreement between GOT and AID.

Minimum - to judge with benefit of greater detail the suitability of Tanzania as a project site.

OVERALL RESULT:

1. A letter of agreement was drafted jointly by the Director of Health Education Unit, MOH, and contractors with inputs from representatives of Institute of Adult Education (IAE). This was sent for consideration by Director of Preventive Services, MOH, Dr. Mtera in whose jurisdiction the project would be located. Discussions among Dr. Albert Henn (USAID), Dr. Mtera, ourselves, and the Chief of Planning for the Principal Secretary, MOH led to Mr. Dhalla, the Chief of Planning, telling us and Dr. Mtera that the letter of agreement was not the appropriate way to enter the system. The proper way is for Mr. Dhalla to discuss in a joint meeting of those we saw individually (or in clusters) how they see the project; then to proceed to inclusion of the project in the FY 80 program. This decision would be taken by October 15th we are told. Dr. Henn confirms that we are experiencing the usual set of procedures, and that it is the GOT way of insuring that a project is truly theirs. Dr. Henn and Mr. Dhalla have each promised to follow upon this timetable. So, if things go well, we could have GOT approval during October, send an advance logistics representative out in January-February, and officially start project in GOT FY 80, July 1, 1980. On the other hand, things could fall completely apart.



2. At a technical level, major clarification emerged regarding distinction between our project and Man is Health Part II; regarding the regional focus of our project; regarding several content and radio related issues. In spite of various unresolved issues, this keeps us on the track of perceiving Tanzania as an appropriate site.

POSITIVE OUTCOMES:

1. Substantial agreement on focus, regionality, style, and counterparts for intervention with Director of Health Education Unit (Mr. Mbaga); Director of Preventive Services (Dr. Mtera); and IAE staff.
2. Strong support from Curative Services, MOH, and physician community at Muhimbili Hospital. They see this as an opportunity to join in our research.
3. Strong support from Dr. Henn (USAID) and commitment to follow through.
4. Making it to the top-level in MOH and obtaining formal consideration for inclusion in MOH program cycle.
5. Tentative selection of Coastal Region as site; extremely positive visit to District Hospital, a Health Center, and three Dispensaries (approximately 40 miles from Dar es Salaam) and encouragement from personnel at these levels.
6. Suggestion from Dr. Yohani that Muhimbili could and might be site for mixing/packaging Oralyte packages for work in Coastal Region.
7. Reaffirmation of involvement of IAE, perhaps to level of two counterparts, in the evaluation aspects especially.
8. Verification of present availability of sugar/salt in Coastal Region and reports that they are usually available.

PROBLEM OUTCOMES:

1. Change of Director of IAE from Mr. Mbunda to Mr. Yusuf Kassam. Mr. Kassam may be less enthusiastic. He is not strongly supportive of empirical research and worries about GOT association with Honduras for political reasons, but he seemed positively impressed with this project.

15

2. Confirmation that regional broadcasting is not now possible due to a political decision to have no regional broadcasting even though no technical problems appear to exist in using regional boosters as transmission site.

3. As of January 1979, USAID/Dar es Salaam began a policy of minimizing back-up logistic services to contractors. This is a large part due to full-time nature of effort to seek housing. So, a contract amendment seems necessary at some point to provide money for an advance person to be in Tanzania from approximately January 1980 to be taking care of project business for a projected start date of July 1, 1980. The difficulty of logistics plus the cost of gasoline, housing, and shipping will add other costs not anticipated in the original contract.

4. Specific implementation problems:

- Battery shortage and possibility of limited distribution of receivers;
- Fear of more widespread sugar/salt shortages;
- Likelihood of a 90-minute ceiling per week for radio time.

5. While curative medical personnel in Dar es Salaam and in Coastal Region rank diarrhea as among most serious MCH problems (often third after malaria and respiratory diseases), Preventive personnel are not as conscious of it as a problem and have problems dealing with a "simple disease" focus. So far, we have held our course with this.

6. Locus of counterparts (tentatively four from MOH and two from IAE) is unclear. Mr. Mbagha indicates that he expects regional bureaucracy to supply the MOH bodies, yet supply of communication/education types is mainly at the center.

7. Locus of responsibility and decision making process for clinical decisions (i.e., final oral rehydration protocol; mode of involvement of dispensary personnel, etc.) is not yet clarified.

19

8. Mr. Mbagha's style of support is not that of aggressive champion willing to take serious bureaucratic risks for project. He likes the project and believes in it enough to have worked hard on the letter of agreement and to have sent it forward to his superiors.

9. IAE interest in evaluation may be two-edged sword.

- Data collection capability limited;
- Interest strongest in Mr. D.A.P. Mahai whose relation to new director is uncertain.
- Biases stated above of new director;
- On other hand, IAE field network of adult educators is very extensive and would be real asset.

RECOMMENDATIONS:

Given present ambiguities, we suggest an October 30th deadline to get clear signal to proceed, i.e., signed statement from MOH approving this project in some form. We suggest beginning the search for alternative sites in November if positive word has not come from Tanzania by that time. We suggest waiting until Christmas before definitely cancelling interest in Tanzania if nothing has been resolved by that time.

TRIP REPORT
 MASS MEDIA AND HEALTH PRACTICES PROJECT-HONDURAS
 September 17-28, 1979

OBJECTIVE: To reach concensus on a Project Agreement between the Government of Honduras and DS/ED/AID which specified the objectives, operational procedures, and institutional support for the Mass Media and Health Practices Project.

OUTCOME: A Project Agreement was signed between the two parties on September 27th and tentative operational dates established (see Appendix A).

PARTICIPANTS:	Dr. Anthony Meyer, DS/ED	from September 24-28
	Dr. Donald Ferguson, DS/H	from September 24-28
	Dr. William Smith, AED	from September 17-28
	Dr. Dennis Foote, Stanford	from September 17-28
	Dr. Myron Levine	from September 15-23

PRINCIPAL PERSONS CONTACTED IN HONDURAS:

Mr. John Oleson, USAID Mission Director
 Mr. James Stone, Chief of Human Resources USAID
 Mr. Tom Hysop, Health Officer
 Mrs. Anita Siegel

Dr. Suazo, Vice Minister of Health
 Dr. Guzman, Director General, Ministry of Health
 Dr. Corrales, Planning Chief MOH
 Dr. Danilo Valesques, Maternal Child Health
 Dr. Zelaya, Health Education Chief

ACTIVITIES: A draft Project Agreement had been prepared by Dr. Smith based upon a model developed for Tanzania, with modifications made for the special conditions in Honduras. This document had been translated into Spanish and was ready for distribution as a discussion paper upon the team's arrival.

The first series of meetings were with USAID health personnel and with Dr. Guzman, Director General of Health. These meetings demonstrated clearly that the Ministry was prepared to proceed with detailed discussions of a project agreement. Dr. Guzman reiterated the Government's interest in the MM&HP project and advised the visiting team that the Ministry had requested and received permission from the National Budgetary Council to include U.S. \$10,000 in the 1980 MOH budget to support

21

broadcast time for the project. A working committee was established by Dr. Guzman during this first meeting to review in detail the draft agreement and to present a formal document for his consideration as soon as possible. It was later learned that after this meeting Dr. Guzman reported to the Ministry of Health and received permission from him for the Vice Minister of Health to sign an agreement the following week if Dr. Guzman gave the go-ahead.

Meetings with the Review committee were extensive. Each word of the agreement was gone over, and all significant points were discussed in detail. Dr. Smith gave a short review of the project's history, goals, and operational design to the committee before beginning, and this was used as a reference point, answering specific questions raised during the review meetings. Approximately 15 hours of discussion time were focused on the document's text. The Ministry's contribution was substantial and very positive. Most of the changes made in the document increased the cooperative nature of the agreement, stressing equal Ministry responsibility for major project activities.

Two important changes were made in the project agreement. First, the MOH personnel indicated that because 1980 budgetary submissions were closed, it would be impossible for the Ministry to provide three full-time counterparts for the project during 1980. After lengthy discussions it was suggested by the Ministry that the project assume responsibility for these three new positions with the commitment that the Ministry would incorporate them as part of their full-time staff the following year. After consultation with DS/ED and AED, this alternative was accepted. The second change involved the MOH's offer to provide one full-time counterpart to the Evaluation Contractor. This individual would be covered by a new position opening in 1980 in the Nursing Department. This offer was accepted enthusiastically.

The final draft Project Agreement was presented officially to Dr. Guzman on Monday, September 24, 1979. Within three days, it had been positively reviewed by Ministry legal authorities and by USAID mission personnel, and it was signed on

Thursday, September 27, 1979 by the Vice Minister of Health and by Dr. Meyer and Dr. Ferguson for AID.

In addition to the administrative and operational details outlined in the Project Agreement, a number of other topics were discussed during the two week visit. These include:

1. Operational Dates for the Project

It was agreed that collaborative, full-time work on the part of Ministry counterparts would begin on January 15, 1980. Expatriate personnel could arrive as soon as November 15 however, and expect to receive part-time support from the Office of Health Education. This period would allow the project advisors to review background information on the Honduras health situation, to make progress on region selection and to identify candidates for the three new MOH counterparts positions.

2. Selection of Project Region

Lengthy discussions were held with MOH and USAID personnel to define the best region for project activity. A number of possibilities seem to exist, but it was agreed that more in-depth investigation of three regions was necessary; they include Choluteca, the North Coast, and the Central Region around Danli. Several region selection criteria were established during these discussions. Population size of about 300,000, existence of regional radio broadcast capacity, limited influence of Slavadorean and Nicaraguan radio transmission, presence of health worker infrastructure, ready access from Tegucigalpa, and prevalence of diarrhea as a problem were all considered important. The region around Danli seems a principle candidate at the moment, but again more in-depth understanding of the region is required before a final decision can be made.

3. Project Planning

It was agreed that within 30 days of project initiation, a formal work plan outlining the investigation phase of project activity would be completed. This document would be the basis for the next six-to-nine months effort.



4. Field Research on Non-packet Preparation of Oral Rehydration Solution

Dr. Levine and Dr. Foote conducted a two-day field visit to Olancho, one of the more rural provinces of Honduras. Accompanied by the head of Health Education, the director of the MOH audiovisual facilities, and Anita Siegal of USAID/Honduras, Drs. Foote and Levine conducted a small but interesting research trial on mixing of sugar and salt solutions using both pinch and scoop, and home-spoon methods. A detailed description of the results of this investigation is included in Appendix B. Results showed clearly that variation in sodium levels among mothers was very high, and that the size of spoons and glasses varies widely in rural areas. This information supported the MOH decision to rely upon pre-packaged oral electrolyte solutions (OES).

5. Distribution Format for OES

MOH personnel is committed to a pre-packaged, full formula, aluminum packaging, and locally produced product. They plan to use the WHO formula and now have sufficient ingredients to produce some 400,000 packets. Actual production will be delayed somewhat by their recent decision to use aluminum rather than plastic packaging. The actual distribution agents and package volume has yet to be determined.

6. Campaign Initiation

The MOH expressed its desire for the campaign to begin as soon as possible. They suggested that some of the field research already conducted by the Ministry could be used to shorten the investigation period. Team representatives left this possibility open, but expressed concern over the investigative phase being shortened and explained again how critical this stage was to the proposed communication methodology.

CONVENIO DE DONACION PARA UN PROYECTO
PROJECT GRANT AGREEMENT

ENTRE
BETWEEN

LA REPUBLICA DE HONDURAS
THE REPUBLIC OF HONDURAS

Y
AND

LOS ESTADOS UNIDOS DE AMERICA
THE UNITED STATES OF AMERICA

PARA
FOR

COMUNICACION MASIVA APLICADA A LA SALUD INFANTIL
MASS MEDIA AND INFANT HEALTH PRACTICES

Agencia para el Desarrollo Internacional
Proyecto A.I.D. No. 931-1018

Agency for International Development
A.I.D. Project No. 931-1018

División de Apoyo al Desarrollo
Oficina de Educación

Development Support Bureau
Office of Education

INDICE
INDEX

CONVENIO DE DONACION PARA PROYECTO
PROJECT GRANT AGREEMENT

ARTICULO	I.	Introducción Introduction
ARTICULO	II.	Descripción del Proyecto Project Description
ARTICULO	III.	Objetivos del Proyecto Project Objectives
ARTICULO	IV.	Ejecución del Proyecto Project Execution
ARTICULO	V.	Actividades del Proyecto Project Activities
ARTICULO	VI.	Responsabilidad de los Signatarios Responsibilities of the Parties
ARTICULO	VII.	Contribución de la Misión de la AID en Honduras USAID Mission Contribution
ANNEX 2		
ANEXO 2		

1

MASS MEDIA AND HEALTH PRACTICES PROJECT
AGREEMENT

I. INTRODUCTION

Pursuant to the General Agreement for Economic, Technical and Related Assistance signed between the Government of Honduras and the Government of the United States of America on April 12, 1961, and in accordance with the Inter-American Program for Economic and Social Development established by the Act of Bogotá and the Conference of Punta del Este, this Project Agreement is entered into by and between the Ministry of Public Health and Social Welfare (MOH) of the Government of Honduras, and the Agency for International Development (A.I.D.), an agency of the United States of America.

It is understood that this agreement concerns a research and development project funded by the Development Support Bureau of AID/ Washington and is distinct from the normal USAID/Honduras program in that the project includes the specific requirement and resources to disseminate information about project activity and results to a broad community of international development professionals.

CONVENIO DE PROYECTO PARA EL PROGRAMA
DE COMUNICACION MASIVA APLICADA A LA SALUD
INFANTIL

I. De conformidad con el Convenio General para Cooperación Económica, Técnica y afines firmado entre el Gobierno de Honduras el de los Estados Unidos de América el 12 abril de 1961 y de acuerdo con el Programa Interamericano para el Desarrollo Económico y Social, establecido por el Acta de Bogotá y la Conferencia de Punta del Este, este Convenio de Proyecto se efectúa entre el Ministerio de Salud Pública y Previsión Social (MDS) del Gobierno de Honduras y la Agencia para el Desarrollo Internacional (A.I.D.), una dependencia del Gobierno de los Estados Unidos de América.

Se entiende que el presente convenio corresponde a un proyecto de investigación y desarrollo originado por la División de Apoyo al Desarrollo de la USAID en Washington, diferenciándose del programa de la USAID/Honduras en cuanto a que este proyecto incluye requisitos y recursos específicos para la divulgación de las actividades y los resultados del proyecto a una comunidad amplia de profesionales mundiales.

II. PROJECT DESCRIPTION

This project will contribute to the overall health objectives of Honduras by:

1. Promoting the adoption of practices among rural people which will alleviate the most serious consequences of infant and which influence infant nutrition. diarrrhea / This implies a strong emphasis on prevention and treatment of infant diarrrhea and includes advocacy of some oral sugar-electrolyte solution.
2. Strengthening the health education system through the in-service training of health educators in the design, execution, and evaluation of mass communication systems.
3. The production of a series of radio programs especially directed at rural people concerning the treatment and prevention of infant diarrrhea. These programs will be supported by graphic materials and specific training for health professionals and community volunteers including midwives, health representatives and primary care health workers.

The purpose of this agreement is to assist the Honduran government develop a system

II. DESCRIPCION DEL PROYECTO

Este proyecto contribuirá al logro de los objetivos generales de salud de Honduras , mediante:

1. La adopción de prácticas entre la población rural que alivian las consecuencias más graves de la diarrea infantil y que influyen en el estado nutricional del niño. Esto implica un énfasis particular en la prevención y el tratamiento de la diarrea infantil incluyendo^{el} uso de una solución glucosada-electrólita administrada en forma oral.
2. El fortalecimiento del sistema de educación para la salud mediante el adiestramiento en servicio a un grupo de educadores de salud, en el diseño, ejecución y evaluación de sistemas de comunicación masiva.
3. La producción de una serie de programas radiales especialmente dirigidos a la población rural sobre la prevención y tratamiento de la diarrea infantil. Tales programas serían apoyados con material gráfico y adiestramiento específico para personal de salud y personal a nivel comunitario. (Parteras, guardianes, y representantes de salud).

Este convenio tiene como fin asistir al Gobierno de Honduras en el desarrollo de un

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and methodology for the application of mass media (especially radio and print media) and face-to-face intervention to obtain the widespread adoption of practices conducive to the treatment and prevention of infant and early childhood diarrhea among rural populations in less developed countries. An important aspect of this program is the adoption and integration of long-term systematic communication planning and design procedures into the health education system of Honduras. To ensure that the project's results are clearly understood and analyzed, a coordinated but separate effort at project evaluation will be conducted during the course of project activities. The methodology for applying mass media and face-to-face interventions is expected to be applicable to other countries and will be disseminated during the final year of project activity through a series of national and international seminars to be conducted in Africa, Asia, and Latin America.

III. PROJECT OBJECTIVES

The objectives of this project are to:

- Conduct a multi-media intervention in

sistema coordinando los medios de comunicación masiva, (especialmente radio y material impreso) y contactos interpersonales para lograr la adopción de actividades que conducen al tratamiento y prevención de la diarrea infantil entre las poblaciones rurales de países en vías de desarrollo. Un aspecto importante de este programa es la adopción e integración de la comunicación masiva con forma sistemática para lograr la educación en salud. A fin de asegurar que los resultados del proyecto sean claramente comprendidos y analizados, se llevará a cabo un esfuerzo coordinado, pero en forma separada, de evaluación del proyecto, durante el desarrollo del mismo. Se pretende que la metodología usada en los medios de comunicación masiva y contactos interpersonales se pueda aplicar en otros países. Esta metodología será difundida durante el último año de ejecución del proyecto, a través de una serie de siminarios nacionales e internacionales ser efectuados en Africa, Asia y America Latina.

III. OBJETIVOS DEL PROYECTO

Los objetivos de este proyecto son:

- Conducir una campaña de comunicación mas

one Region of Honduras aimed at the adoption of salutary health practices and prevention of infant and early childhood diarrhea.

- Develop an educational system and methodology for the use of mass media by developing countries health professionals in health education.
- Evaluate the process and impact of the mass media methodology.
- Produce a documentary film on project activity and results.
- Disseminate the findings of the project to the professional community inside and outside Honduras.

IV. PROJECT EXECUTION

The executing agents for this research and development project funded by AID/Washington will be the Academy for Educational Development as the Implementation Contractor and Stanford University as the Evaluation Contractor. The Academy for Educational Development will hereinafter be referred to as the Academy and Stanford University as Stanford. The Ministry of Health, hereinafter referred to as the Ministry, in

va por medios múltiples en una región rural de Honduras dirigida a la adopción de prácticas para el tratamiento y la prevención de la diarrea infantil.

- Desarrollar un sistema y una metodología educativa utilizando los medios de comunicación masiva para fortalecer la educación en salud.
- Evaluar el proceso e impacto de la metodología de comunicación masiva.
- Producir una película documental sobre actividades y resultados del proyecto.
- Difundir los resultados del proyecto a la comunidad profesional en Honduras y en el exterior.

IV. EJECUCION DEL PROYECTO

Los agentes ejecutores de este proyecto de investigación y desarrollo fundado por la AID de Washington será la Academia para Desarrollo Educativo en su calidad de Contratista Ejecutor y la Universidad de Stanford como Contratista Evaluador. La Academia para el Desarrollo Educativo será en adelante denominada la Academia y la Universidad de Stanford se denominará Stanford. El Ministerio cooperará con este proyecto pro-

cooperating in this project will provide staff and/or other support to the executing agents for carrying out the objectives of this project.

The Academy, Stanford, and the Ministry will carry out the objectives of the project according to the activities shown below. Although the work will be a joint effort, the Academy will bear final responsibility for the successful development of radio programs, print materials, and face-to-face intervention systems. Stanford will bear final responsibility for data collection and analysis (including field data), and reporting. The Ministry will participate collaboratively with the above mentioned activities.

Both the Academy and Stanford will provide one International Director for the project whose office will be in the United States and whose responsibility will be the overall direction of the implementation and evaluation of the project respectively.

Each of the agencies will also provide 1 Project Coordinators in Honduras and 1 Assistant Project Coordinators in Honduras.

porcionando personal u otro tipo de apoyo a las agencias ejecutoras y evaluadoras para llevar a cabo los objetivos del mismo.

La Academia, Stanford y el Ministerio llevarán a cabo los objetivos del proyecto de acuerdo con las actividades que se describen a continuación. Si bien el trabajo se ejecutará como un esfuerzo común, la Academia será responsable del buen desarrollo de los programas de radio, materiales impresos y sistema de contactos interpersonales. Stanford tendrá la responsabilidad final en la recolección y análisis de datos (incluyendo información obtenida en la comunidad), y la redacción de informes evaluativos. El Ministerio participará conjuntamente en las actividades antes mencionadas.

Tanto la Academia como Stanford proporcionaran un Director Internacional para el proyecto cuya oficina será en los Estados Unidos y cuya responsabilidad será toda la dirección de la ejecución y evaluación de proyecto respectivamente. Cada agencia también proporcionará 1 Coordinadores del Proyecto en Honduras y 1 Asistentes Coordinadores del Proyecto en Honduras.

The Academy and Stanford directors have the authority and responsibility for the final selection and/or termination of their personnel.

The Ministry will provide in cooperating with this project, three full-time counterpart staff to the implementation contractor and one full-time counterpart to the Evaluation Contractor for the duration of the project. Financing for the three implementation counterparts will be provided by AID/Washington for the first year of project activity and assumed by the Ministry thereafter. These three will be strengthened by the addition of other Ministry personnel assigned to specific project tasks. Selection of these counterparts will be the joint responsibility of the Ministry and the Academy.

Both the Ministry and the Academy reserve the right to report inadequacies to the respective authority and to request that corrective measures be taken which will promote the overall success of the project.

The Director General of Health will designate the Division of Health Education as the executing agent and will provide general project coordination and specific technical support for the health related project decisions, the training of health personnel, the formulation of radio programs, and the formative evaluation.

Los directores de la Academia y de Stanford tendrán la autoridad y responsabilidad final para la selección y/o terminación de su personal.

El Ministerio cooperará con este proyecto proporcionando como contraparte 3 personas para el ejecutor y una contraparte para el evaluador a tiempo completo, durante la duración del proyecto. El financiamiento para las tres contrapartes para la Academia será proporcionado por la AID/Washington durante el primer año de actividades y lo asumirá el Ministerio a partir del segundo año de actividades. Estos tres serán apoyados por la incorporación de otras actividades específicas. La selección de este personal de contraparte será efectuada conjuntamente por el Ministerio y la Academia.

Tanto el Ministerio como la Academia se reservan el derecho de dar a conocer las inconsistencias que surjan durante el desarrollo de la actividad y solicitarán la aplicación de medidas correctivas cuando el caso lo amerite.

El Director General de Salud designará como unidad ejecutora a la División de Educación en Salud quien proporcionará la coordinación y el apoyo específico para la buena marcha del proyecto. Esto implica participación activa en la investigación comunitaria, la formulación y producción de programas radiales y material de apoyo, el adiestramiento de personal de planta y la evaluación forma-

The Ministry of Health will provide one-half of the air-time required to meet the broadcast schedule selected by the Academy and the Ministry jointly. It is understood that this schedule will be based upon results of the community research phase and will be designed to reach the target population at those times of day and on those radio stations which will ensure maximum reception.

V. PROJECT ACTIVITIES

A. The following activities will be conducted in coordination between the Academy and Ministry counterparts.

1. Design and execution of ^afield investigation which will focus on community knowledge, beliefs, and actions related to infant diarrhea, and contributory factors; community media habits and preferences, health worker system and training. This investigation will include structured questionnaires, individual and group interviews, and personal observations at both national and community levels. It will be

El Ministerio de Salud proporcionará los recursos necesarios para completar la mitad del tiempo de transmisión requerido a fin de alcanzar el calendario de difusión definido conjuntamente por la Academia y el Ministerio. La otra mitad será responsabilidad de la Academia. Se entiende que este calendario de transmisión estará basado en los resultados de la fase correspondiente a la investigación de la comunidad y estará diseñado para alcanzar a la población deseada a la hora del día y en las estaciones de radio que aseguren una máxima recepción.

V. ACTIVIDADES DEL PROYECTO

A. La Academia y la contraparte del Ministerio llevarán a cabo, en forma coordinada, las siguientes actividades:

1. Diseño y ejecución de investigaciones comunitarias que estarán concentradas en conocimientos, creencias y actitudes de la población rural relacionadas con la diarrea infantil, además de factores contribuyentes como hábitos y preferencias de comunicación de la comunidad, y el sistema de adiestramiento de los trabajadores de salud. Esta investigación incluirá cuestionarios estructurados, entrevistas individuales y de grupo

used to determine basic target population characteristics, environmental situations, radio message and graphic material content, broadcast times and location, health system involvement in the campaign and problem magnitude. This investigation is expected to last for nine months prior to commencement of the program.

2. Determination of health advice to be advocated by the campaign along with a specific plan for acquiring, distributing, and monitoring the resources (pre-packaged electrolyte solution, home-mix ingredients, clinic contact, health worker visits, etc.) needed to make that advice practical.

3. Production of pilot materials (sample radio programs, draft graphic materials, and preliminary training designs) for pilot testing with representative members of the target population.

pos, y observaciones directas a nivel nacional y de la comunidad. Será utilizada para la determinación de las características básicas de la población a ser alcanzada, estado ambiental, contenido de los mensajes transmitidos por radio y en material gráfico, ubicación y duración de las transmisiones, nivel de participación del personal de salud en la campaña y magnitud del problema diarreico. Se estima que esta investigación tendrá una duración mínima de nueve meses previos al inicio de la campaña en sí.

2. Determinación de los consejos sobre la prevención y el tratamiento de la diarrea infantil a ser propuestos por la campaña, además de un plan específico para la adquisición, distribución, y control de los recursos (solución electrolítica preparada en paquetes, ingredientes de preparación casera, contactos clínicos, visitas de personal de salud, etc.) que resultan necesarios para llevar a la práctica esos consejos.

3. Producción de material de prueba (programas piloto de radio, material gráfico de prueba y diseños preliminares de adiestramiento) para efectuar pruebas piloto con miembros representativos de la población.

4. Pilot testing of draft campaign materials with representative members of the target population, using both individual and small group testing situations.

5. Revision of draft materials based upon results of pre-testing and final production of campaign materials.

6. Development of a broadcast and distribution schedule for all campaign elements.

7. Pre-campaign preparation of health personnel including orientation of health workers, distribution of materials to decentralized distribution points, final scheduling of radio broadcasts, and development of a plan to monitor campaign implementation.

8. Implementation of the campaign activities, transmission of radio programs, distribution and placement of graphic materials, contact between health workers and target population, and monitoring of all campaign elements, which will include educational, environmental change and treatment aspects.

4. Pruebas piloto de material gráfico y grabado con miembros representativos de la población, aplicadas en ambientes de prueba tanto a individuos como a pequeños grupos.

5. Mejoramiento de material de prueba en base a los resultados obtenidos.

6. Desarrollo de un calendario de transmisión y distribución de materiales para la campaña.

7. Preparación del personal especializado en salud antes de iniciar la campaña, incluyendo la orientación de personal de salud, distribución de materiales a fin de descentralizar los puntos de distribución, calendario final de las transmisiones de radio, y desarrollo de un plan para el control de la implementación de la campaña.

8. Implementación de las actividades de la campaña, transmisión de programas de radio, distribución y ubicación de materiales gráficos, contacto entre los trabajadores de salud y la población a ser alcanzada, y control de todos los elementos de campaña, los cuales incluirán aspectos educativos de cambio ambiental y de tratamiento.

9. The project will sponsor semiannual review meetings of project activities.

Following the completion of campaign activities, the Academy will develop and publish a training manual detailing the process to develop and execute the mass communication campaign. The Ministry will collaborate with this effort through active participation in the manual's development. The Ministry reserves the rights to use this document without prior authorization from AID/Washington.

During the final year of project activity, the Academy will be responsible for organizing and financing a series of seminars to be conducted for the purpose of disseminating the experience and its results within Honduras and to other nations of the world. The Ministry will be invited to send project counterparts at Academy expense, to participate in these seminars.

9. El proyecto organizará seminarios semianuales sobre el desarrollo del proyecto.

A continuación de la finalización de las actividades de la campaña, la Academia elaborará y publicará un manual de adiestramiento detallando el procedimiento para el desarrollo y ejecución de la campaña de comunicación masiva. El Ministerio colaborará con este esfuerzo a través de su participación activa en la elaboración de este documento. El Ministerio tendrá el derecho de utilizar el documento sin la autorización de la AID/Washington.

Durante el último año de actividad del proyecto, la Academia será responsable de la organización y financiamiento de una serie de seminarios que serán efectuados con el fin de difundir en Honduras y otros países del mundo esta experiencia y sus resultados. Se invitará al Ministerio para que envíe a los seminarios miembros de la contraparte del proyecto, cuyos gastos correrán por cuenta de la Academia.

B. The Evaluation Contractor will be responsible for the following activities:

1. Prepare and test survey and anthropometric data collection instruments for measuring the process and impact of project activities.

2. Prepare a sampling plan to ensure representativeness of collected data from both experimental and control groups.

3. Recruit, train and employ local interviewers, data collectors, data coders and transcribers.

4. Carry out baseline, during project- and after-project data collection using a combination of the following methodologies:

- a) Knowledge, attitude and practice surveys of audience and control members;
- b) In-depth interviews of audience and control group members, local leaders, and government personnel;

B. El Contratista Evaluador será responsable por las siguientes actividades:

1. Preparar y probar los instrumentos antropométricos y socio-culturales, usados para medir el proceso y el impacto de las actividades del proyecto.

2. Preparar un plan de prueba a fin de asegurar la representatividad de la información recolectada, tanto de grupos experimentales como de grupos de control.

3. Reclutar, entrenar y emplear encuestadores, codificadores y programadores hondureños.

4. Llevar a cabo la recolección de información antes, durante y después del proyecto, usando una combinación de las siguientes metodologías:

- a) Encuestas sobre conocimientos, actitudes y prácticas de la población a ser alcanzada y los grupos de control;
- b) Entrevistas exhaustivas a la población a ser alcanzada y a los miembros del grupo de control, líderes locales y personal técnico del gobierno.

- c) Anthropometric measurements of children of audience and control group members; and
- d) Usual and/or ad hoc health services and hospital record keeping.
5. Prepare a 30-minute color film concerning project methodology and results, and supply the government of Honduras with a copy.
6. Analyze and report on project results and findings, including process and impact assessment, methodology development, and post-effectiveness.
7. Participate in project information dissemination activities, both during and after project completion.

VI. RESPONSIBILITIES OF THE PARTIES

A. AID Washington hereby agrees to carry out its responsibilities in support of this project by providing the following through two separate contracts with the Academy and with Stanford.

- 1) Two senior staff members in the United States who will serve as

- c) Medición antropométrica de los niños de la población a ser alcanzada y los miembros del grupo de control; y
- d) Registro de datos regulares y especiales de los servicios de salud y del hospital.
5. Preparar una película a colores, de 30 minutos de duración, referente a la metodología y resultados del proyecto, y suministrar una copia de la misma al Gobierno de Honduras.
6. Analizar e informar sobre los resultados del proyecto, incluyendo el procedimiento y evaluación de su impacto, desarrollo de metodología y costo-efectividad.
7. Participar en las actividades de difusión de información durante y después de finalizado el proyecto.

VI. RESPONSABILIDADES DE LAS PARTES

A. La oficina de la AID en Washington se compromete, por este medio, llevar a cabo sus responsabilidades en apoyo a este proyecto proporcionando, mediante dos contratos por separado, uno con la Academia y otro con Stanford, lo siguiente:

- 1) Dos miembros de su personal, ubicados en los Estados Unidos, los cuales

International Project Directors;

cumplirán las funciones de Directores Internacionales del proyecto;

- 2) Four full-time advisors in Honduras, two will have responsibilities for evaluation and two will have responsibilities for implementation;
 - 3) Two medical consultants and other communication, evaluation, and education consultants as necessary;
 - 4) On-the-job training in Honduras for a minimum of five counterpart personnel including on-the-job training of additional personnel at the request of the Ministry;
 - 5) Provide funds to support short-term seminars for health personnel in the region of the project.
 - 6.) Provide all costs of radio and graphic materials development, reproduction, and distribution except those provided by the Ministry.
 - 7) Provide cost of one-half of the broadcast time required to reach the selected target population.
- 2) Cuatro asesores a tiempo completo, dos con responsabilidades de evaluación y dos con responsabilidades de ejecución;
 - 3) Consultores médicos y otros consultores en comunicación, evaluación y educación, según sean necesarios.
 - 4) Adiestramiento en servicio, en Honduras, para un mínimo de cinco personas de la contraparte y, si el Ministerio lo requiere, personal adicional;
 - 5) Proveer fondos para apoyar seminarios de corta duración para personal especializado en salud en la región correspondiente al proyecto.
 - 6) Proporcionar los recursos para el desarrollo y producción de todo el material de radio y gráficos, requerida por la campaña.
 - 7) Proveer recursos para completar la mitad del tiempo de transmisión requerido para llegar a la población seleccionada con los programas de radio.

- 8) Provide all materials and supplies as needed for development of project components and project administration;
 - 9) Sub-contract with local institutions for specific production services and material needs as necessary;
 - 10) Provide all necessary office machines beyond those provided by the Ministry;
 - 11) Provide radio receivers, and tape recorders as needed to conduct the developmental investigation and the formative evaluation aspects of the project exclusively;
 - 12) Provide two vehicles for the exclusive use of the project, including insurance, gas/oil, and maintenance during the life of the agreement. One vehicle to be managed by the Academy and one to be managed by Stanford. Ownership of these vehicles and all project equipment and excess materials revert to the Government of Honduras upon termination of the project.
- 8) Proporcionar todos los materiales y suministros necesarios para el desarrollo de los componentes y administración del proyecto;
 - 9) Subcontratar con instituciones locales para la provisión de servicio profesionales y producción de materiales según sea necesario;
 - 10) Suministrar todo el equipo de oficina que no sea proporcionado por el Ministerio;
 - 11) Proporcionar los receptores de radio, y grabadoras necesarias exclusivamente para la conducción de la investigación y el control de las actividades;
 - 12) Proporcionar dos vehículos para uso del proyecto, incluyendo seguro, gasolina/petróleo, y mantenimiento durante el período de duración del acuerdo. Los vehículos estarán a la disposición de la Academia y del proyecto, uno bajo la coordinación de la Academia y otro bajo la coordinación de Stanford. Dichos vehículos y todo el equipo del proyecto pasarán a ser propiedad del Gobierno de Honduras luego de concluido el proyecto.

- 13) Pay for telephone and postage costs.
- 14) Employ local personnel as needed for administration and technical development of the project.

- 13) Cubrir gastos de teléfono y correo.
- 14) Emplear personal adicional a las contratadas en la medida que sea necesario, para la administración y desarrollo técnico del proyecto.

- 15) Cooperate with the Ministry of Health by providing technical assistance for the design of a long-term national production system for oral electrolyte solutions.

- 15) Cooperar con el Ministerio de Salud Pública proporcionando asistencia técnica para el diseño de un sistema de producción nacional de sueros electrolitos a largo plazo.

- 16). Provide travel and per diem for the participation of three Ministry counterparts in both national and international seminars, to disseminate project elements.

- 16) Proporcionar gastos de transporte y viáticos por la participación de tres contrapartes del Ministerio en seminarios nacionales e internacionales para la difusión de las actividades del proyecto.

B. The Ministry hereby agrees to carry out its responsibilities in support of this project by providing the following:

B. El Ministerio por este medio acuerda llevar a cabo sus responsabilidades en apoyo a este proyecto, proporcionando los siguientes:

1. Establishment of this project as a national priority of the Ministry of Health.

1. Establecimiento del proyecto como una prioridad del Ministerio de Salud.

- ~~2. Public support and endorsement of the project and the health objectives being advocated.~~

2. El apoyo y promoción por parte del sector público para el proyecto y los objetivos de salud que se pretenden lograr.

3. Three full-time counterparts through the Health Education Unit. It is expected that these counterparts will include one middle-level person with one-to-two years experience in radio program design and production, one middle-level person with experience in graphic design and poster testing, and one middle-level person with experience in conducting health training seminars. Financing for these 3 will be provided by AID/Washington during the first year of project operation and assumed by the Ministry thereafter. In addition one counterpart will be provided through the Division of Nursing for the Evaluation Contractor. These 4 will be supported by additional Ministry personnel for specific activities during the project. Additionally it is understood that the Ministry will designate the Director General of Health to guarantee over-all Ministry support.

3. Tres personas de contraparte a tiempo completo de la División de Educación de Salud. Se pretende que las contrapartes a tiempo completo sean personas de nivel medio con uno o dos años de experiencia en diseño y producción de programas de radio, una persona de nivel medio con experiencia en diseño gráfico, y pruebas de afiches, una persona de igual nivel con experiencia en la conducción de seminarios de adiestramiento de salud. El financiamiento de las tres personas será proporcionado por la AID/Washington durante el primer año de trabajo y asumido por el Ministerio a partir del segundo año de trabajo. Además la División de Enfermería proporcionará una persona a tiempo completo como contraparte del grupo evaluador. Estas cuatro personas serán apoyadas con la incorporación de otras en actividades específicas. Además, se pretende que el Ministerio de Salud designe al Director General de Salud para garantizar el apoyo general del proyecto.

92

4. Office space, including utilities, furniture, and telephone lines for 15 project staff people in addition to counterpart personnel.
 5. Access to health clinics and health personnel, including sponsorship of meetings and seminars with the national medical community.
 6. Release time necessary for health personnel to participate in training programs.
 7. Cooperate with project personnel in gaining access to rural communities for the purpose of conducting the developmental investigation and the formative and summative evaluation procedures.
 8. Use of Ministry print and audiovisual facilities as necessary.
 9. Duty free clearance in accordance with the general agreement between the two governments for all materials and goods for the project and for the Academy and Stanford personnel.
4. Oficinas, incluyendo servicios, muebles, líneas directas de teléfono para 15 personas empleadas en el proyecto además del personal de contraparte.
 5. Acceso a los servicios y al personal especializado en salud, incluyendo el auspicio de reuniones y seminarios con el comunidad médica nacional.
 6. Autorizar el tiempo necesarios para que el personal en salud pueda participar en programas de adiestramiento.
 7. Cooperar con el personal del proyecto para que pueda llegar a las comunidades rurales a fin de conducir las investigaciones del desarrollo y los procedimientos de evaluación de la constante formación de los participantes y la evaluación final.
 8. Uso de sus facilidades de imprenta y audiovisuales según sea necesario.
 9. Entrada libre de impuestos según el convenio general entre los dos gobiernos para todo el material y bienes proyecto y del personal de la Academia y de Stanford.

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| <p>10. Permission to collect regular systematic data as deemed necessary by the Evaluation Contractor to complete its project responsibilities.</p> | <p>10. Permiso para la recolección sistemática de información según lo estime necesario el Evaluador para lograr completar sus responsabilidades en el proyecto.</p> |
| <p>11. Information on new national activity in the project region which might influence diarrheal disease and/or related measures of health status or behavior during the life of the project.</p> | <p>11. Información sobre nuevas actividades nacionales en la región correspondiente al proyecto, que podría tener influencia en la incidencia de diarrea.</p> |
| <p>12. Permission to use and publish materials and reports developed during the project, including evaluation data, outside Honduras.</p> | <p>12. Permiso para usar y publicar fuera de Honduras, material e informes elaborados durante el proyecto, incluyendo datos sobre evaluación.</p> |
| <p>13. Cooperation of the Evaluation Contractor in the obtaining of clearances and approvals for carrying out the production of a 30-minute, 16 mm documentary film of project activity, including field and office shooting sessions during the life of the project.</p> | <p>13. Cooperará con el Evaluador en la obtención de permisos y autorizaciones para efectuar la producción de una película documental sobre las actividades del proyecto incluyendo la filmación de sesiones en el terreno y en las oficinas durante la duración del proyecto.</p> |
| <p>14. One-half of the air-time required to meet the broadcast schedule recommended after completion of the field investigation.</p> | <p>14. Recursos para proveer la mitad del tiempo de transmisión requerido para completar el calendario de trans-</p> |

This air-time will be provided on stations decided upon by the Academy and the Ministry after completion of the community research to ensure that the target population for the radio programs is maximized.

misión recomendado después de completa da la investigación en el terreno. Este tiempo de transmisión será proporcionado en estaciones de radio elegidas por la Academia y el Ministerio luego de completar la investigación de la comunidad a fin de asegurar que la población alcanzada con los programas de radio sea la máxima posible.

VII. USAID MISSION CONTRIBUTION

The AID Mission will cooperate with the project by providing the project and its staff the services customarily provided to personnel and projects contracted by the Mission.

VII. CONTRIBUCIONES DE LA MISION DE LA AID

La Misión de la AID cooperará con el Proyecto proporcionando al personal del mismo los servicios ofrecidos regularmente al personal y proyectos contratados por la Misión.

VIII. CONCLUDING STATEMENT

IN WITNESS THEREOF, the parties hereto have caused this agreement to be executed by their duly authorized representatives in Tegucigalpa, on this day.

VIII. CONCLUSION

En fé de lo cual, las partes interesadas, actuando por medio de sus representantes autorizados firman este Convenio en Tegucigalpa en el día y fecha.

45

ANEXO 2

Página 1 de 12

ANNEX 2

Page 1 of 12

ANEXO 2 DISPOSICIONES Y TÉRMINOS DE LA DONACIÓN PARA EL PROYECTOPROJECT GRANT STANDARD PROVISIONS ANNEX

Definiciones: En la forma utilizada en este Anexo, el "Convenio" se refiere al Convenio de Donación para el Proyecto al cual acompaña, y del cual forma parte este Anexo. Los términos usados en este Anexo tienen el mismo significado o referencia que los del Convenio.

Definitions: As used in this Annex, the "Agreement" refers to the Project Grant Agreement to which this Annex is attached and of which this Annex forms a part. Terms used in this Annex have the same meaning or reference as in the Agreement.

ARTICULO A

ARTICLE A

Cartas de Ejecución del ProyectoProject Implementation Letters

Para ayudar al Donatario en la ejecución del Proyecto, la A.I.D., emitirá periódicamente Cartas de Ejecución que contendrán informaciones adicionales acerca de los asuntos tratados en este Convenio. Las partes también pueden usar Cartas de Ejecución del Proyecto convenidas conjuntamente para confirmar y registrar acuerdos mutuos sobre aspectos de la ejecución de este Convenio. Las Cartas de Ejecución del Proyecto no podrán ser usadas para enmendar el texto del Convenio, pero podrán ser usadas para registrar revisiones o excepciones que sean permitidas por el Convenio, incluyendo la revisión de los elementos de la descripción ampliada del Proyecto que se presenta en Anexo 1.

To assist Grantee in the implementation of the Project, A.I.D., from time to time, will issue Project Implementation Letters that will furnish additional information about matters stated in this Agreement. The parties may also use jointly agreed-upon Project Implementation Letters to confirm and record their mutual understanding on aspects of the implementation of this Agreement. Project Implementation Letters will not be used to amend the text of the Agreement, but can be used to record revisions or exceptions which are permitted by the Agreement, including the revision of elements of the amplified description of the Project in Annex 1.

ARTICULO B

ARTICLE B

Disposiciones GeneralesGeneral Covenants

SECCION B.1. Consultas. Las Partes cooperarán para asegurar que el propósito de este Convenio sea realizado. A este efecto, las Partes, a solicitud de cualquiera de las Partes, cambiarán puntos de vista con respecto al progreso del Proyecto, el cumplimiento de las obligaciones bajo este Convenio, el cumplimiento por parte de cualquier consultor, contratista,

SECTION B.1. Consultation. The Parties will cooperate to assure that the purpose of this Agreement will be accomplished. To this end, the Parties, at the request of either, will exchange views on the progress of the Project, the performance of obligations under this Agreement, the performance of any consultants, contractors, or suppliers engaged on the Project,

ANEXO 2
Página 2 de 12

ANNEX 2
Page 2 of 1

o proveedores que participan en el Proyecto, y otros asuntos relacionados con el Proyecto.

and other matters relating to the Project

SECCION B.2. Ejecución del Proyecto. El Donatario deberá:

SECTION B.2. Execution of Project. The Grantee will:

(a) llevar a cabo o hacer que se lleve a cabo el Proyecto con la debida diligencia y eficacia, de conformidad con prácticas técnicas, financieras y administrativas aceptables, y de conformidad con los documentos, planos, especificaciones, contratos, cronogramas u otros documentos y sus modificaciones, si los hubieren, aprobados por la A.I.D. de acuerdo a este Convenio; y

(a) carry out the Project or cause it be carried out with due diligence and efficiency, in conformity with sound technical, financial, and management practices, and in conformity with those documents, plans, specifications, contracts, schedules or other arrangements, and with any modifications therein, approved by A.I.D. pursuant to this Agreement; and

(b) contar con una administración calificada y experimentada tanto para adiestrar al personal que se considere necesario, como para el mantenimiento y operación del Proyecto, y cuando sea aplicable para la continuación de actividades, deberá hacer que el Proyecto sea operado y mantenido de una manera que se asegure la realización continua y satisfactoria de los propósitos del Proyecto.

(b) provide qualified and experienced management for; and train such staff as may be appropriate for the maintenance and operation of the Project, and, as applicable for continuing activities, cause the Project to be operated and maintained in such manner as to assure the continuing and successful achievement of the purposes of the Project.

SECCION B.3. Utilización de Bienes y Servicios.

SECTION B.3. Utilization of Goods and Services.

(a) Cualquier recurso financiado bajo la Donación deberá, a menos que la A.I.D. acuerde lo contrario por escrito, ser usado para el Proyecto hasta la terminación del mismo, y posteriormente podrá ser usado para apoyar los objetivos buscados en la realización del Proyecto.

(a) Any resources financed under the Grant will, unless otherwise agreed in writing by A.I.D., be devoted to the Project until the completion of the Project and thereafter will be used so as to further the objectives sought in carrying out the Project.

(b) Los bienes y servicios financiados bajo la Donación, a menos que la A.I.D. acuerde lo contrario por escrito, no serán usados para promover o asistir cualquier otro proyecto de ayuda extranjera o actividad asociada con o financiada por un país no incluido en el Código 935 del Libro de Código Geográfico de la A.I.D. en vigencia al momento de tal utilización.

(b) Goods or services financed under Grant, except as A.I.D. may otherwise agree in writing, will not be used to promote or assist a foreign aid project activity associated with or financed by a country not included in Code 935 of the A.I.D. Geographic Code Book as in effect at the time of such use.

ANEXO 2
Página 3 de 12

ANNEX 2
Page 3 of 12

SECCION B.4. Cargas Impositivas.

(a) Este Convenio y la Donación estarán exentos de cualquier impuesto o gravamen establecido por las leyes en vigencia en el territorio del Donatario.

(b) Con excepción del Impuesto Sobre la Renta de ciudadanos hondureños y de residentes permanentes en Honduras, cuando (1) cualquier contratista, incluyendo cualquier firma consultora, cualquier miembro del personal de tal contratista financiado bajo la Donación, y cualquier propiedad o transacciones relacionadas con tales contratos y (2) cualquier transacción sobre adquisiciones de bienes financiados bajo la Donación no estén exentos de impuestos identificables, tarifas, derechos aduaneros y otros recargos impuestos bajo las leyes vigentes en el país del Donatario, el Donatario deberá, de acuerdo a lo prescrito, y de conformidad con las Cartas de Ejecución del Proyecto, pagar o reembolsar dichos recargos con fondos distintos a los provistos bajo la Donación.

SECCION B.5. Informes, Registros, Inspecciones, Auditoría. El Donatario deberá:

(a) proveer a la A.I.D. tales informaciones e informes relacionados con el Proyecto y con este Convenio que la A.I.D. pueda razonablemente solicitar;

(b) mantener o hacer mantener, de acuerdo a los principios y prácticas de contabilidad reconocidos y aplicados generalmente, los libros y registros relacionados con el Proyecto y con este Convenio, que sean adecuados para mostrar, sin restricciones, el recibo y utilización de los bienes y servicios adquiridos bajo la Donación. Dichos libros y registros serán auditados regularmente, de acuerdo a principios de auditoría generalmente

SECTION B.4. Taxation.

(a) This Agreement and the Grant will be free from any taxation or fees imposed under laws in effect in the territory of the Grantee:

(b) With the exception of income taxation of citizens of Honduras and permanent residents of Honduras, to the extent that (1) any contractor, including any consulting firm, any personnel of such contractor financed under the Grant, and any property or transaction relating to such contracts and (2) any commodity procurement transaction financed under the Grant, are not exempt from identifiable taxes, tariffs, duties or other levies imposed under laws in effect in the territory of the Grantee, Grantee will, and to the extent provided in and pursuant to Project Implementation Letters, pay or reimburse the same with funds other than those provided under the Grant.

SECTION B.5. Reports, Records, Inspections, Audit. The Grantee will:

(a) furnish A.I.D. such information and reports relating to the Project and to this Agreement as A.I.D. may reasonably request;

(b) maintain or cause to be maintained, in accordance with generally accepted accounting principles and practices consistently applied, books and records relating to the Project and to this Agreement, adequate to show, without limitation, the receipt and use of goods and services acquired under the Grant. Such books and records will be audited regularly, in accordance with generally accepted auditing standards, and main-

48

ANEXO 2
Página 4 de 12

ANNEX 2
Page 4 of 12

aceptables, y serán mantenidos por tres años después de la fecha del último desembolso de la A.I.D.; tales libros y registros deberán ser también adecuados para mostrar la naturaleza y el alcance de las solicitudes de posibles proveedores de bienes y servicios adquiridos, la base de adjudicación de contratos y órdenes, y el progreso del proyecto, en general, hacia la terminación; y

(c) permitir a los representantes autorizados de una de las Partes la oportunidad, en todo momento que sea razonable, de inspeccionar el Proyecto, la utilización de los bienes y servicios financiados por dicha Parte, y los libros y registros y otros documentos relacionados con el Proyecto y con la Donación.

SECCION B.6. Suficiencia de la Información. El Donatario confirma:

(a) que los hechos y circunstancias sobre los cuales ha informado a la A.I.D., o ha hecho informar a la A.I.D., durante las negociaciones con la A.I.D. sobre la Donación, son exactas y completas, e incluyen todos los hechos y circunstancias que podrían afectar substancialmente al Proyecto y al cumplimiento de las responsabilidades bajo este Convenio;

(b) que informará a la A.I.D., en forma oportuna, sobre cualquier hecho y circunstancia que surja posteriormente y que pueda afectar substancialmente, o que razonablemente se crea que pueda afectar al Proyecto o al cumplimiento de las responsabilidades bajo este Convenio.

SECCION B.7. Otros Pagos. El Donatario afirma que ningún pago ha sido o será recibido por ningún funcionario del Donatario en relación con la adquisición de bienes y servicios financiados bajo la Donación con excepción de honorarios, impuestos o pagos similares legalmente

tained for three years after the date of last disbursement by A.I.D.; such books and records will also be adequate to show the nature and extent of solicitations of prospective suppliers of goods and services acquired, the basis of award of contracts and orders, and the overall progress of the Project toward completion; and

(c) afford authorized representatives of a Party the opportunity at all reasonable times to inspect the Project, the utilization of goods and services financed by such Party, and books, records, and other documents relating to the Project and the Grant.

SECTION B.6. Completeness of Information. The Grantee confirms:

(a) that the facts and circumstances of which it has informed A.I.D., or caused A.I.D. to be informed, in the course of reaching agreement with A.I.D. on the Grant, are accurate and complete, and include all facts and circumstances that might materially affect the Project and the discharge of responsibilities under this Agreement;

(b) that it will inform A.I.D., in timely fashion of any subsequent facts and circumstances that might materially affect, or that it is reasonable to believe might so affect, the Project or the discharge of responsibilities under this Agreement.

SECTION B.7. Other Payments. Grantee affirms that no payments have been or will be received by any official of the Grantee in connection with the procurement of goods or services financed under the Grant, except fees, taxes, or similar payments legally established in the

establecidos en el país del Donatario.

country of the Grantee.

SECCION B.8. Información y Marcas. El Donatario dará publicidad adecuada a la Donación y al Proyecto como un programa al cual los Estados Unidos ha contribuido, identificará el lugar del Proyecto, y marcará los bienes financiados por la A.I.D., de acuerdo a lo descrito en las Cartas de Ejecución del Proyecto.

SECTION B.8. Information and Marking. The Grantee will give appropriate publicity to the Grant and the Project as a program to which the United States has contributed, identify the Project site, and mark goods financed by A.I.D., as described in Project Implementation Letters.

ARTICULO C

ARTICLE C

Disposiciones para Adquisiciones

Procurement Provisions

SECCION C.1. Normas Especiales.

SECTION C.1. Special Rules.

(a) El país de registro de los buques oceánicos o aeronaves, en el momento del embarque, será considerado como la fuente y origen de transporte oceánico y aéreo.

(a) The source and origin of ocean and air shipping will be deemed to be the ocean vessel's or aircraft's country of registry at the time of shipment.

(b) Las primas por seguro marítimo contratado en el territorio del Donatario serán consideradas como un Costo en Moneda Extranjera, elegible, si fuera elegible de otra forma bajo la Sección C.7.(a).

(b) Premiums for marine insurance placed in the territory of the Grantee will be deemed an eligible Foreign Exchange Cost, if otherwise eligible under Section C.7.(a)

(c) Cualquier vehículo automotor financiado bajo la Donación será de manufactura Estadounidense, salvo que la A.I.D. manifieste lo contrario por escrito.

(c) Any motor vehicles financed under the Grant will be of United States manufacture, except as A.I.D. may otherwise agree in writing.

(d) El transporte por aire, financiado por la Donación, de bienes o personas, deberá efectuarse en aviones que tengan la certificación de los Estados Unidos, toda vez que los servicios de dichos aviones sean posibles. Los detalles referentes a este requisito serán descritos en una Carta de Ejecución del Proyecto.

(d) Transportation by air, financed under the Grant, of property or persons, will be on carriers holding United States certification, to the extent service by such carriers is available. Details on this requirement will be described in a Project Implementation Letter.

SECCION C.2. Fecha de Elegibilidad. Salvo que las Partes manifiesten lo contrario por escrito, los bienes o servicios que sean adquiridos mediante pedidos hechos o contratos concertados con anterior-

SECTION C.2. Eligibility Date. No goods or services may be financed under the Grant which are procured pursuant to orders or contracts firmly placed or entered into prior to the date of this

ridad a la fecha de este Convenio, no podrán financiarse con la Donación.

SECCION C.3. Planos, Especificaciones y Contratos. A los efectos de que haya mutuo acuerdo sobre los siguientes puntos y salvo que las Partes manifiesten lo contrario por escrito:

(a) El Donatario proveerá a la A.I.D., tan pronto como estén preparados:

(1) todos los planos, especificaciones, planes de adquisición y construcción, contratos, u otros documentos relacionados con bienes o servicios a ser financiados por la Donación, incluyendo documentos relacionados con la precalificación y selección de contratistas y con las solicitudes de licitaciones y propuestas. Las modificaciones sustanciales en tales documentos serán también proporcionadas a la A.I.D. tan pronto estén preparadas;

(2) los documentos relacionados con bienes o servicios que, a pesar de no estar financiados bajo la Donación son considerados de vital importancia por la A.I.D. para el Proyecto, deberán también ser proporcionados a la A.I.D. tan pronto estén preparados. Los aspectos del Proyecto relacionados con asuntos de esta subsección (a) (2) serán identificados en Cartas de Ejecución del Proyecto;

(b) Los documentos relacionados con la precalificación de contratistas, y con las solicitudes de licitaciones o propuestas para bienes y servicios financiados bajo la Donación serán aprobados por la A.I.D., por escrito, antes de su emisión y sus términos incluirán normas y medidas de los Estados Unidos;

(c) Los contratos y contratistas financiados por la Donación para servicios de ingeniería y otros servicios profesionales, para servicios de construcción, y

Agreement, except as the Parties may otherwise agree in writing.

SECTION C.3. Plans, Specifications, and Contracts. In order for there to be mutual agreement on the following matters, and except as the Parties may otherwise agree in writing:

(a) The Grantee will furnish to A.I.D. upon preparation:

(1) any plans, specifications, procurement or construction schedules, contracts, or other documentation relating to goods or services to be financed under the Grant, including documentation relating to the prequalification and selection of contractors and to the solicitation of bids and proposals. Material modifications in such documentation will likewise be furnished A.I.D. on preparation;

(2) such documentation will also be furnished to A.I.D., upon preparation, relating to any goods or services, which, though not financed under the Grant, are deemed by A.I.D. to be of major importance to the Project. Aspects of the Project involving matters under this subsection (a) (2) will be identified in Project Implementation Letters;

(b) Documents related to the prequalification of contractors, and to the solicitation of bids or proposals for goods and services financed under the Grant will be approved by A.I.D. in writing prior to their issuance, and their terms will include United States standards and measurements;

(c) Contracts and contractors financed under the Grant for engineering and other professional services, for construction services, and for such other services,

ANEXO 2
Página 7 de 12

ANNEX 2
Page 7 of 12

para cualquier otro servicio, equipo, o materiales que se especifiquen en las Cartas de Ejecución del Proyecto, serán aprobados por la A.I.D. por escrito antes de la ejecución del contrato. Las modificaciones sustanciales en tales contratos también serán aprobadas por escrito por la A.I.D. antes de su ejecución; y

(d) Las firmas consultoras usadas por el Donatario para el Proyecto pero no financiadas con la Donación, el alcance de sus servicios y su personal asignado al Proyecto que la A.I.D. indique, y los contratistas para construcción utilizados por el Donatario para el Proyecto pero no financiados con la Donación deberán ser aceptables a la A.I.D.

SECCION C.4. Precio Razonable. No se pagará más de un precio razonable por cualquiera de los bienes y servicios financiados, en su totalidad o en parte, por la Donación. Tales artículos serán adquiridos sobre una base justa, y hasta donde sea posible, sobre una base competitiva.

SECCION C.5. Notificación a Proveedores Potenciales. A fin de permitir que todas las firmas Estadounidenses tengan la oportunidad de participar en la provisión de bienes y servicios a ser financiados con la Donación, el Donatario proveerá a la A.I.D. la información que corresponda, y en el momento en que la A.I.D. la solicite en las Cartas de Ejecución del Proyecto.

SECCION C.6. Embarques.

(a) Los bienes que son transportados al territorio del Donatario no podrán ser financiados bajo la Donación si son transportados en la siguiente forma: (1) en buques o aeronaves con pabellón de un país que no está incluido en el Código 935 del Libro de Código Geográfico de la A.I.D. en vigencia al momento del embarque;

equipment or materials as may be specified in Project Implementation Letters, will be approved by A.I.D. in writing prior to execution of the contract. Material modifications in such contracts will also be approved in writing by A.I.D. prior to execution; and

(d) Consulting firms used by the Grantee for the Project but not financed under the Grant, the scope of their services and such of their personnel assigned to the Project as A.I.D. may specify, and construction contractors used by the Grantee for the Project but not financed under the Grant, shall be acceptable to A.I.D.

SECTION C.4. Reasonable Price. No more than reasonable prices will be paid for any goods or services financed, in whole or in part, under the Grant. Such items will be procured on a fair and, to the maximum extent practicable, on a competitive basis.

SECTION C.5. Notification to Potential Suppliers. To permit all United States firms to have the opportunity to participate in furnishing goods and services to be financed under the Grant, the Grantee will furnish A.I.D. such information with regard thereto, and at such times, as A.I.D. may request in Project Implementation Letters.

SECTION C.6. Shipping.

(a) Goods which are to be transported to the territory of the Grantee may not be financed under the Grant if transported either: (1) on an ocean vessel or aircraft under the flag of a country which is not included in A.I.D. Geographic Code 935 as in effect at the time of shipment, or (2) on an ocean vessel which

o (2) en buque que la A.I.D., por notificación escrita al Donatario, ha designado como no elegible; o (3) en una aeronave o buque fletado que no haya recibido la aprobación por anticipado de la A.I.D.

(b) Los costos de transporte marítimo o aéreo (de bienes o personas) y los servicios de entrega correspondientes no podrán ser financiados con la Donación, si tales bienes o personas son transportados como sigue: (1) en un buque de pabellón de un país no identificado, en el momento del embarque, bajo el párrafo del Convenio titulado "Fuente de Adquisición; Costos en Moneda Extranjera", sin el previo consentimiento por escrito de la A.I.D.; o (2) en un buque que la A.I.D., mediante notificación escrita al Donatario, ha designado como no elegible; o (3) en una aeronave o buque fletado que no haya recibido la aprobación por anticipado de la A.I.D.

(c) Salvo que la A.I.D. determine que buques comerciales de pabellón Estadounidense no están disponibles a tarifas razonables y justas para tales buques, (1) por lo menos el cincuenta por ciento (50%) del tonelaje bruto de todos los bienes (computados separadamente para cargueros, buque de carga en general y buques tanque) financiados por la A.I.D. que puedan ser transportados en buques serán transportados en buques comerciales de pabellón Estadounidense, y (2) por lo menos el cincuenta por ciento (50%) de los ingresos brutos generados por todos los embarques financiados por la A.I.D. y transportados al territorio del Donatario en buques de carga serán pagados a, o en beneficio de los buques comerciales de pabellón Estadounidense. Los requisitos establecidos en (1) y (2) de esta subsección deben ser cumplidos con respecto a cualquier carga transportada desde puertos Estadounidenses y no Estadounidenses, computada separadamente.

A.I.D., by written notice to the Grantee has designated as ineligible; or (3) under an ocean or air charter which has not received prior A.I.D. approval.

(b) Costs of ocean or air transportation (of goods or persons) and related delivery services may not be financed under the Grant, if such goods or persons are carried: (1) on an ocean vessel under the flag of a country not, at the time of shipment, identified under the paragraph of the Agreement entitled "Procurement Source: Foreign Exchange Costs", without prior written A.I.D. approval; or (2) on an ocean vessel which A.I.D., by written notice to the Grantee, has designated as ineligible; or (3) under an ocean vessel or air charter which has not received prior A.I.D. approval.

(c) Unless A.I.D. determines that privately owned United States-flag commercial ocean vessels are not available at fair and reasonable rates for such vessels, (1) at least fifty percent (50%) of the gross tonnage of all goods (computed separately for dry bulk carrier dry cargo liners and tankers) financed by A.I.D. which may be transported on ocean vessels will be transported on privately owned United States-flag commercial vessels, and (2) at least fifty percent (50%) of the gross freight revenue generated by all shipments financed by A.I.D. and transported to the territory of the Grantee on dry cargo liners shall be paid to or for the benefit of privately owned United States-flag commercial vessels. Compliance with the requirements of (1) and (2) of this subsection must be achieved with respect to both any cargo transported from U.S. ports and any cargo transported from non-U.S. ports, computed separately.

SECCION C.7. Seguro.

(a) El seguro marítimo de bienes financiados por la A.I.D. que deben ser transportados al territorio del Donatario podrá ser financiado como un Costo en Moneda Extranjera bajo este Convenio, toda vez que, (1) tal seguro se contrate en base a la tarifa competitiva más baja, y (2) los reclamos bajo este seguro sean pagaderos en la moneda en que tales bienes fueron financiados o en cualquier moneda libremente convertible. Si el Donatario (o gobierno del Donatario), por estatuto, decreto, normas, reglamentaciones, o prácticas, discrimina con respecto a adquisiciones financiadas por la A.I.D., contra cualquier compañía de seguro marítimo autorizada a realizar negocios en cualquier Estado de los Estados Unidos, los bienes transportados al territorio del Donatario financiados por la A.I.D. con la Donación serán asegurados contra riesgos marítimos y tal seguro será contratado en los Estados Unidos con una compañía o compañías autorizadas a realizar negocios de seguro marítimo en un Estado de los Estados Unidos.

(b) Salvo que la A.I.D. acuerde lo contrario por escrito, el Donatario asegurará o hará asegurar todos los bienes, financiados con la Donación, importados para el Proyecto, contra riesgos inherentes a su traslado hasta el lugar de su utilización en el Proyecto; tal seguro se formulará en base a términos y condiciones concordes con sólidas prácticas comerciales y asegurará la totalidad del valor de los bienes. Cualquier indemnización recibida por el Donatario por tal seguro será usada para sustituir o reparar cualquier daño importante o cualquier pérdida de los bienes asegurados o será utilizada para reembolsar al Donatario por la sustitución o reparación de tales bienes. Cualquiera de tales sustituciones tendrá su fuente y origen en países incluidos en el Código

SECTION C.7. Insurance.

(a) Marine insurance on goods financed by A.I.D. which are to be transported to the territory of the Grantee may be financed as a Foreign Exchange Cost under this Agreement provided (1) such insurance is placed at the lowest available competitive rate, and (2) claims thereunder are payable in the currency in which such goods were financed or in any freely convertible currency. If the Grantee (or government of Grantee), by statute, decree, rule, regulation, or practice discriminates with respect to A.I.D.-financed procurement against any marine insurance company authorized to do business in any State of the United States, then all goods shipped to the territory of the Grantee financed by A.I.D. hereunder will be insured against marine risks and such insurance will be placed in the United States with a company or companies authorized to do a marine insurance business in a State of the United States.

(b) Except as A.I.D. may otherwise agree in writing, the Grantee will insure, or cause to be insured, goods financed under the Grant imported for the Project against risks incident to their transit to the point of their use in the Project; such insurance will be issued on terms and conditions consistent with sound commercial practice and will insure the full value of the goods. Any indemnification received by the Grantee under such insurance will be used to replace or repair any material damage or any loss of the goods insured or will be used to reimburse the Grantee for the replacement or repair of such goods. Any such replacement will be of source and origin of countries listed in A.I.D. Geographic Code 935 as in effect at the

ANEXO 2
Página 10 de 12

ANNEX 2
Page 10 of 12

935 del Libro de Código Geográfico de la A.I.D. en vigencia en el momento de la sustitución, y, salvo que las Partes acuerden lo contrario por escrito, estarán sujetas a las disposiciones de este Convenio.

time of replacement, and, except as the Parties may agree in writing, will be otherwise subject to the provisions of the Agreement.

SECCION C.8. Bienes Excedentes de Propiedad del Gobierno de los Estados Unidos de América. El Donatario acuerda que, cuando sea factible, se utilizarán bienes excedentes de propiedad del Gobierno de los Estados Unidos, en lugar de artículos nuevos financiados con la Donación. Los fondos de la Donación pueden ser utilizados para financiar los costos para obtener tales bienes para el Proyecto.

SECTION C.8: U.S. Government-Owned Excess Property. The Grantee agrees that wherever practicable, United States Government-owned excess personal property, in lieu of new items financed under the Grant, should be utilized. Funds under the Grant may be used to finance the costs of obtaining such property for the Project.

ARTICULO D

ARTICLE D

Cancelación; Recursos

Termination; Remedies

SECCION D.1. Cancelación. Cualquiera de las Partes puede cancelar este Convenio, mediante notificación por escrito de la otra Parte con 30 días de anticipación. La cancelación de este Convenio terminará cualquier obligación de las Partes para proveer recursos financieros o de otra naturaleza para el Proyecto de conformidad con este Convenio, con excepción de los pagos que las Partes están comprometidas a efectuar de acuerdo a compromisos no cancelables celebrados con terceras partes antes de la cancelación del Convenio. Además, a la cancelación de tal Convenio, la A.I.D. podrá, con cargo a la A.I.D., hacer que el título de los bienes financiados con la Donación sea transferido a la A.I.D. si los bienes proceden de una fuente fuera del país del Donatario, están en condiciones de entrega y no han sido descargados en puertos de entrada del país del Donatario.

SECTION D.1. Termination. Either Party may terminate this Agreement by giving the other Party 30 days written notice. Termination of this Agreement will terminate any obligations of the Parties to provide financial or other resources to the Project pursuant to this Agreement, except for payments which they are committed to make pursuant to noncancellable commitments entered into with third parties prior to the termination of this Agreement. In addition, upon such termination A.I.D. may, at A.I.D.'s expense, direct that title to goods financed under the Grant be transferred to A.I.D. if the goods are from a source outside Grantee's country, are in a deliverable state and have not been offloaded in ports of entry of Grantee's country.

SECCION D.2. Reembolsos.

SECTION D.2. Refunds.

(a) En el caso de cualquier desembolso no respaldado por documentación válida de acuerdo con este Convenio, o que no es

(a) In the case of any disbursement which is not supported by valid documentation in accordance with this Agreement, or which

ANEXO 2
Página 11 de 12

ANNEX 2
Page 11 of 12

efectuado o utilizado de acuerdo a este Convenio, o que se efectuó para bienes o servicios no utilizados de acuerdo con este Convenio, la A.I.D., no obstante la disponibilidad o ejercicio de cualquiera de los otros recursos dispuestos bajo este Convenio, podrá requerir al Donatario el reembolso a la A.I.D. de dicho monto en Dólares Estadounidenses dentro de los sesenta (60) días a partir del recibo del aviso correspondiente.

(b) Si el incumplimiento por el Donatario de cualquiera de sus obligaciones bajo este Convenio da como resultado que los bienes y servicios financiados con la Donación no se utilicen efectivamente de acuerdo con este Convenio, la A.I.D. podrá requerir al Donatario el reembolso a la A.I.D. de todos o de cualquier porción del monto de los desembolsos efectuados bajo este Convenio para tales bienes o servicios en Dólares Estadounidenses, dentro de los sesenta (60) días a partir del recibo del aviso correspondiente.

(c) El derecho establecido en la subsección (a) o (b) para exigir un reembolso continuará, a pesar de cualquier otra disposición de este Convenio, por tres (3) años a partir de la fecha del último desembolso bajo este Convenio.

(d) (1) Cualquier reembolso bajo la subsección (a) o (b), o (2) cualquier reembolso a la A.I.D. de un contratista, proveedor, banco o de otra tercera parte con respecto a bienes o servicios financiados bajo la Donación, y cuando tal reembolso corresponde a un precio no razonable o a una factura errónea por bienes o servicios, o por bienes que no coincidan con las especificaciones, o por servicios que resultaran inadecuados, se aplicará (A) primeramente para el costo de bienes y servicios requeridos para el Proyecto, hasta un límite justificado, y (B) el saldo, si lo hubiere, para reducir el monto

is not made or used in accordance with this Agreement, or which was for goods or services not used in accordance with this Agreement, A.I.D., notwithstanding the availability or exercise of any other remedies under this Agreement, may require the Grantee to refund the amount of such disbursement in U.S. Dollars to A.I.D. within sixty (60) days after receipt of a request thereof.

(b) If the failure of Grantee to comply with any of its obligations under this Agreement has the result that goods or services financed under the Grant are not used effectively in accordance with this Agreement, A.I.D. may require the Grantee to refund all or any part of the amount of the disbursements under this Agreement for such goods or services in U.S. Dollars to A.I.D. within sixty days after receipt of a request thereof.

(c) The right under subsection (a) or (b) to require a refund of a disbursement will continue, notwithstanding any other provision of this Agreement, for three years from the date of the last disbursement under this Agreement.

(d) (1) Any refund under subsection (a) or (b), or (2) any refund to A.I.D. from a contractor, supplier, bank or other third party with respect to goods or services financed under the Grant, which refund relates to an unreasonable price for or erroneous invoicing of goods or services, or to goods that did not conform to specifications, or to services that were inadequate, will (A) be made available first for the cost of goods and services required for the Project, to the extent justified, and (B) the remainder, if any, will be applied to reduce the amount of the

ANEXO 2
Página 12 de 12

ANNEX 2
Page 12 of 12

de la Donación.

(e) Cualquier interés u otras utilidades sobre los fondos de la Donación desembolsados por la A.I.D. al Donatario bajo este Convenio antes de la utilización autorizada de tales fondos para el Proyecto, serán devueltos a la A.I.D. por el Donatario, en Dólares Estadounidenses.

SECCION D.3. No Renunciamiento de Recursos. Cualquier demora en el ejercicio de cualquier derecho o recurso otorgado a una Parte en relación con el financiamiento bajo este Convenio, no será considerado como un renunciamiento a tal derecho o recurso.

SECCION D.4. Cesión de Derechos. El Donatario conviene que, a solicitud de la A.I.D., cederá a la A.I.D. los derechos sobre cualquier causa o acción que pueda corresponder al Donatario en relación con, o como resultado del cumplimiento o no cumplimiento de contrato por una de las partes a un contrato directo en Dólares Estadounidenses financiado por la A.I.D., en su totalidad o en parte, con fondos donados por la A.I.D. bajo este Convenio.

Grant.

(e) Any interest or other earnings on Grant funds disbursed by A.I.D. to the Grantee under this Agreement prior to the authorized use of such funds for the Project will be returned to A.I.D. in U.S. Dollars by the Grantee.

SECTION D.3. Nonwaiver of Remedies. No delay in exercising any right or remedy accruing to a Party in connection with its financing under this Agreement will be construed as a waiver of such right or remedy.

SECTION D.3. Assignment. The Grantee agrees, upon request, to execute an assignment to A.I.D. of any cause of action which may accrue to the Grantee in connection with or arising out of the contractual performance or breach of performance by a party to a direct U.S. Dollar contract with A.I.D. financed in whole or in part out of funds granted by A.I.D. under this Agreement.

ORIENTATION SEMINAR FOR MASS MEDIA AND HEALTH PRACTICES PROJECT FIELD PERSONNEL

- I. PLACE: Washington, D.C. Academy Offices
- II. DATE: Before the team's arrival in Honduras. Hopefully this could be scheduled for December.
- III. DURATION: Minimum of five work days may need to be expanded if actual project planning activity is included.
- IV. PARTICIPANTS: Core Personnel include: Dennis Foote, Barbara Searle, William Smith, two field people, and at least one Stanford field person.

Others: Anthony Meyer, Clifford Block, William Novelli, Robert Hornik, Paul Touchette, Myron Levine, Robert Black, Bert Hirschhorn, Steve Moseley, and Cheryll Greenwood (These individuals would be scheduled for specific times and not expected to be at all sessions).
- V. OBJECTIVES:
 - A. To develop a common vocabulary. This will mean that terms such as BVE, Radio Math, Oral Rehydration, Behavioral Modification, Social Marketing, Development Communication, and a host of other concepts, institutions, and fields related to this project will be discussed and at least a common understanding of how they relate to this project will be acquired.
 - B. To explore individual experiences and prejudices related to the application of communications to development,
 - C. To define an administrative structure which will promote a positive working relationship between Stanford and Academy staffs.
 - D. To define the relationship between field and home-office personnel for both Stanford and AED staffs.
 - E. To determine the most critical issues facing the project for the next six months period and develop approaches for resolving them.
 - F. To develop a preliminary work plan for the first six months of project activity.

VI. WORKSHOP SCHEDULEDAY 1

<u>PRESENTERS</u>	<u>TIME</u>	<u>ACTIVITIES</u>
Core	9:00 am	Short presentation by each individual of his/her background
Core	9:30 am	Focused Value Clarification/Sharing 1. Individual critical incidents 2. Group discussion (see attached)
	12:00	Lunch
Smith	1:00 pm	Implementation Project Description (Objectives, structure, components, setting)
Foote/Searle	2:30 pm	Evaluation Project Description (Objectives, structure, components, setting)
Meyer	4:00 pm	AID expectations for project
	5:00 pm	Wrap-up: Relate morning discussions to afternoon presentations.

DAY 2

Levine, Hirschhorn, Black	9:00 am Presentation	Diarrheal Control: The medical experience Relationships with other institutions, WHO, CDC, and other AID projects
	10:30 am Discussion	The Medical Issues: Presentation and discussion
	12:00	Lunch
Hornik & others	1:00 pm Presentation	Development Communication: What do we know? Review of major landmarks - BVE, Radio Math, Manoff, Egypt, Colombia, etc.
Novelli	2:30 pm Presentation	Social Marketing: The basic principles
	3:00 pm Discussion	
Touchette	4:00 pm Presentation	Behavioral Modification: Possible contributions

SA

DAY 3

Total Group

9:00 am

Discussion of Critical Issues

A list of critical issues will be suggested to the group. They may add to that list based upon their concerns and interests. Each issue will then be discussed by the entire group, bringing a variety of experience to bear on each.

At this stage, purely administrative issues such as "How will reports get written?" should be avoided in favor of topics such as "What behaviors should the evaluation focused on?", "How much emphasis should be placed on health worker training?", and "How can baseline and developmental investigation data collection be mutually supportive?"

Three to five questions, not necessarily these, are probably all that the group will be able to address. They should be general enough to utilize the expertise of the advisors.

DAY 4 and 5

Core Group

9:00 am

Develop Six-Month Work Plan

1. Define tasks
2. Prioritize tasks
3. Analyze activities required to meet each task
4. Scheduling activities

These two days should result in a tentative work-plan for the first six-months activity bearing in mind that dates and activities will have to be rescheduled in light of local realities.

DAY 6Core Group and
Moseley and Greenwood

9:00 am

Long-Distance Administration: How to accomplish it.

The focus should change here to nitty-gritty issues: office space, report writing, receipt of goods, sharing of administrative resources, how checks will be forwarded, lines of authority, relationship with local Mission, etc.

Some of this we may want to do separately, as both institutions will have slightly different styles, but many of the issues can be worked out together.