MONTHLY REPORT FOR NOVEMBER, 1984
JOHN SNOW PUBLIC HEALTH GROUP
NATIONAL CONTROL OF DIARRHEAL DISEASES PROJECT

I. Activities of the Chief of Party:
   A. Central Administration:
      . Nothing
   B. Coordination and Implementation:
      . Presented paper at and attended 15th congress of the union of
        Middle Eastern and Mediterranean Pediatric Societies (Cairo).
      . Presented paper at and attended American Public Health Conference
        (Los Angeles).
        (Title for both: "From the Bedside to the Country-Side: Implementation
         of Oral Rehydration on A National Scale).
      . Worked on newsletter 3.
      . Conferred at USAID/Washington with technical offices.
   C. Training:
      . Reviewed clinical training film
   D. Mass Media and Marketing:
      . Nothing
   E. Production/Distribution:
      . Nothing
   F. Research/Evaluation:
      . Helped organize hypernatremia surveillance at four participating
        hospitals.
      . Helped design ORS mixing trials for Sohag.
   G. Issues and Constraints:
      I travelled to USA for conference and Thanksgiving Holidays
      between Nov. 10-26. On return, I decided to withdraw my
      resignation and to spend approximately 2/3 time in Egypt until
      suitable replacement is found.
   H. Short-Term Plans:
      This month will be devoted to the newsletter and analyses of
      evaluation survey data. Will return to USA for Xmas.
II. MANAGEMENT ADVISOR

Administration:

1. Completed major revisions of the Project’s Personnel Plan and obtained Dr. Sharawi’s approval and signature for submission to AID when final corrections are made on exact salary levels. The Plan consists of an organizational chart, personnel list with position codes and salary levels, job descriptions, personnel regulations and benefits, employment application forms and personnel rating forms.

2. Spent about five days finalizing the 1985 Project Budget for submission to AID. Worked with the Coordinators and Accounting staff to arrive at the final figures.

3. Prepared analysis, letter and recommendations regarding the Breast Feeding Project proposal, for Dr. Sharawi to send. This Project, which was originally intended for support under AID’s family planning program support, has now been transferred to the Health Office, which has suggested the NCDD Project consider funding. Since it is already a topic in which the Project is involved, this seems to be a logical decision. However, the Project Proposal must be revised and must provide more details of proposed activities.

4. Spent half a day with 3 doctors from Abu Dhabi’s Ministry of Health and with Dr. Ned Wallace, UNICEF’s Regional Advisor in Abu Dhabi. They obtained copies of our T.V. commercials and of other materials, such as the Guidelines for Establishing a Rehydration Center, the Project Catalog of Materials, teaching slides, wall chart, etc.

5. Had two meetings with Dr. Sharawi and a film maker with whom he is in discussion for the possible production of educational films. I told Dr. Sharawi that such a project would have to be carefully developed, AID approval obtained and other companies given opportunity for submitting proposals.

6. Started arrangements for establishing an international telephone service for JSI with the Meridian Hotel. We will each have a credit card so that we can make calls from our homes.

7. Work with Linda and others on the final arrangements for the international tours for Project staff and related personnel.

8. Conducted normal JSI business relating to visiting consultants (Audrey Kipp), monthly accounts, monthly reports, meetings with staff regarding their work (Linda, Farag and Joan) and submission of monthly voucher.

9. Had several routine meetings at AID on Project-related issues: getting signatures, approvals and keeping documents moving.
Production:

1. Observed CID testing of locally produced 4-layer laminated foil for packaging ORS. CID is still conducting stability effects of this foil, but preliminary results on sealing, opening and permeability are very positive. CID does not want to make a final selection decision until the foil company produces a foil using glue for the lamination rather than the polyethylene as they are in the four layer laminate.

2. Met with Drs. Shafika, Mirfat and Shafika to discuss the needs for Super-ORS production, marketing and clinical trials.

Mass Media:

1. Prepared page of selected findings from the MEAG Mass Media impact evaluation. Key findings were that 90% of total population have heard about ORS; 94% know it is for either dehydration or diarrhea treatment; 64% heard about it from TV; 57% have used it for their own children. These figures contrast dramatically with the 1983 Alexandria findings wherein 1.5% had ever heard about ORS and only one percent had used it for their children. Even compared with the May 1984 WHO National EPI survey in which it was found that 70 percent had heard of it and 40 percent had used it, it is a dramatic result and shows the impact of both the TV campaign and of the distribution of ORS through private pharmacies.

2. Met with Fatag to discuss the need for a preliminary schedule for his 1985 mass media campaign. He agreed to have something in writing by the end of the first week in December. He accepted the suggestion that the initial contracting procedure, whether by amending a current contract, or by issuing an RFP, should be started in early January, even before the final results of the evaluations are in.

Research:

1. Worked with Dr. Shafika to develop a research protocol for the hypernatremia study among the four university teaching hospitals in Cairo. Had meetings with Dr. Fayyad, Dr. Hougi's representative, Dr. Zeinab and Dr. Sharawi, as well as with representatives from the Calcilab. They seem to have reached an agreement on how to proceed.

2. Reviewed the Al Azar University proposal for an extended rural study of diarrheal disease. Prepared an analysis of the proposal and budget, and prepared a letter for Dr. Sharawi to send asking for additional information and revisions.

Issues and Constraints:

1. There continues to be a lack of frequent communication within the technical staff. The weekly technical staff meetings seem to have been discontinued, the last one having occurred on October 14th.
2. Although the personnel situation is much better, there is still a need for several key persons. This cannot be changed until AID receives and approves the Project personnel Plan.

3. Project procurement is still a problem area. Requests for bids are issued prior to obtaining approval from AID; quantities of items for procurement are sometimes changed after AID approval; relatively small items may take 3 to 6 months to obtain (stabilizers for word processor and typewriter took over 2 months; binding spines for binding machine have been pending for over six months); and no one person appears to coordinate or be responsible for procurement. Frequently the contracting officer is consulted for major procurements which require contracts only after most decisions have been made.

4. The 1985 contract for ORS production and production of the packaging foil cannot be made until the 1985 budget is approved by AID. CID production of ORS will end the end of the first week in December and, because of lead times in ordering the foil, it is likely that the entire month of December will be lost (at least 5 million ORS packets short of our needs).

Plans for December:
1. Make final corrections in Project Personnel Plan and send to AID for approval.
2. When AID approves the Personnel Plan, have it translated and given to all staff. Start implementation of all approved policies, particularly the personnel review system.
3. Work with Farag to identify possibilities for moving quickly on new or amended contracts for the 1985 season.
4. Obtain approval from AID for purchase of foil and issuance of contract amendment for CID.
5. Prepare, with Huoni, an analysis of the 1984 ORS distribution situation, including the UNICEF packets.
EVALUATION OF MASS MEDIA CAMPAIGN
RESPONSES TO SELECTED QUESTIONS IN MEAG'S OCTOBER, 1984 NATIONAL SURVEY

Q24. Have you ever heard about DRS?
   98% of Urban Population (176 of 179) Yes
   84% of Rural Population (188 of 225) Yes
   90% of Total Population (364 of 404) Yes

Q25. What is DRS used for?
   32% "to cure dehydration"
   62% "to cure diarrhea"
   6% other or "don't know"

Q26. Where did you get your information?
   64% T.V.
   22% Physician
   14% Other

Q27. Have you ever used DRS for your children?
   57% Yes
   43% No

Q28. Who advised you to use it?
   78% Physician
   11% T.V.
   11% Other

Q29. Have you ever seen anything on T.V. about dehydration and diarrhea?
   85% Yes
   15% No

Q30. Did any of your children have watery diarrhea during the last month?
   32% Yes
   68% No

Q31. How did you manage it?
   32% Consulted a physician
   29% Gave DRS
   8% Gave fluids
   31% Others (2% consulted physician)

Q32. Did any of your children have watery diarrhea last summer?
   39% Yes
   61% No

Q33. How did you manage it?
   46% Consulted physician
   24% Gave DRS
   9% Gave fluids
   21% Others