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**TECHNICAL ASSISTANCE ASSIGNMENT (IEC)
FOR THE PREPARATION
OF A POPULATION PROJECT PAPER
IN BURKINA FASO**

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Table of Contents

Executive Summary i

Acronyms and Abbreviations ii

Background 1

The Project Paper in Brief 3

Information, Education and Communication 4

Recommendation 5

APPENDICES

- Appendix A: List of Contacts**
- Appendix B: IEC Chapter of Project Paper**

EXECUTIVE SUMMARY

From October 15 to November 15, 1984, a team of consultants was in Burkina Faso to prepare a population project paper. This report is a summary of findings and proposals, with a special emphasis on IEC.

A new census - scheduled for December 1985 - remains Burkina's top priority in the area of population. The National Population Council, created last year to coordinate population policy and activities has, so far, met only at the ministerial level. The people who will be doing the actual groundwork have not yet been assigned. Also, the "Law of 1920" which prohibits the sale and advertising of contraceptives is about to be abrogated. A new law should be presented to the Cabinet soon. Finally, the Cabinet recently shifted responsibility for implementation and policy regarding family planning to the Ministry of Social Welfare. The Ministry of Health is still the main provider of family planning services in the country.

The project paper proposes Phase I of a long-term strategy to introduce family planning services and information nationwide. Efforts will focus on building up delivery capability through training, a family planning curriculum for health students, pilot projects, upgrading of hospital installations, collaboration with the Burkina Midwives Association, and an IEC campaign.

Any extended IEC effort would be handled mostly by two Government organizations. INAFA, a directorate of the Ministry of Education, has been the main provider of family planning-related IEC in the country. Its population education project includes the training of sex education instructors and production of radio shows and social dramas. DESAH, a directorate of the Ministry of Health, organizes communications campaigns for the Ministry's programs. It is also responsible for the IEC training of students in nursing and midwifery.

At the end of the assignment, the team was advised that no bilateral agreement would be signed for the 1984-85 fiscal year. However, projects can be initiated through centrally-funded organizations.

ACRONYMS AND ABBREVIATIONS

CDR	Comité de Défense de la Révolution
CESAO	Centre d'Etudes Sociales et Economique de l'Afrique de l'Ouest
DESAH	Direction pour l'Education en Santé, Assainissement, et Hygiène
FP	Family Planning
FPIA	Family Planning International Assistance
GOBI-FF	Growth monitoring, oral rehydration, breastfeeding, immunizations -- Female literacy, Family planning
GRAAP	Groupe de Recherche pour l'Action et l'Autopromotion Paysanne
IEC	Information, Education and Communication
ENSP	Ecole Nationale de la Santé Publique
INAFIA	Institut National pour l'Alphabétisation et la Formation des Adultes
JHPIEGO	Johns Hopkins Program for International Education in Gynecology and Obstetrics
JHU/PCS	Johns Hopkins University/Population Communication Services
MOE	Ministry of Education
MOH	Ministry of Health
MOSW	Ministry of Social Welfare
PPD	Programme Populaire de Développement
STD	Sexually Transmitted Diseases
UNFPA	United Nations Fund for Population Activities
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development

From October 15 to November 15, 1984, a team of consultants was in Burkina Faso to prepare a project paper on family health and population. Members included: the team leader, Dr. Maria Wawer from the Center for Population and Family Health of Columbia University; Mrs. Solanges Smercka, University of New Mexico (Albuquerque); Mr. Neil Ewen, Centers for Disease Control; and Mr. Philippe Langlois, consultant with Population Communication Services/Johns Hopkins University. Dr. Sarah Clark of the USAID/REDSO office in Abidjan joined the team for one week and handled the demography component of the project. Their work could not have been accomplished without the unstinting help of many members of the USAID Mission in Ouagadougou.

At the end of the assignment, a draft containing most of the elements of the project paper - including budgets, implementation plans and logical frameworks - was left to be finalized by the Mission. This report is a summary of findings and proposals, with a special emphasis on Information, Education and Communication (IEC) aspects.

Background

In the year since a needs assessment team visited the country, there has been a marked--if somewhat discreet--evolution in official attitudes towards family planning, growing from acknowledgement to quiet but still unofficial endorsement. Interest in family planning among health professionals and the population at large continues to be strong. A number of recent developments have also been noted:

- A new census--scheduled for December 1985--remains Burkina's top priority in the area of population. Donor organizations as well as Burkina Government officials have long complained of the absence of relevant data to design realistic development programs. The most recent figures go back to 1975. Most of the funding will come from the UNFPA. USAID is already providing technical assistance and equipment, and may also contribute additional sums of money for tabulation, analysis and publication of results.

- The National Population Council which has been in existence for over a year was created to coordinate the activities of all ministries and agencies which have a say in Population/Family Planning matters; it is mandated to develop a population policy but, so far, has met only at the ministerial level. The people who will be doing the actual groundwork have not yet been assigned.
- One stumbling block to a more vigorous endorsement of Family Planning has been the "Law of 1920" which prohibits the sale and advertising of contraceptive products. Although the law is not enforced, its existence is used as an excuse by some health professionals, senior civil servants and opinion leaders to postpone any decision or action on family planning. Apparently, a new law abrogating the old one has already been drafted and should be presented to the Cabinet in the very near future.
- A few months ago, the Cabinet decided to shift responsibility for implementation and policy regarding family planning to the Ministère de l'Essor Familial et de la Solidarité Nationale, which is in fact the old Ministry of Social Welfare (MOSW). To oversee family planning matters, a new directorate was created: la Direction de la Santé de la Mère et de l'Enfant et du Planning Familial - Maternal and Child Health/Family Planning (MCH/FP).
- However, the Ministry of Health (MOH) is still, by far, the main provider of family planning services in the country. It trains and employs all the health personnel and oversees virtually all the potential delivery points. *how many?*
- To add to the dispersion, the greatest part of the family planning IEC effort is handled by the Ministry of Education (MOE) through its adult literacy directorate--l'Institut National pour l'Alphabétisation et la Formation des Adultes (INAFSA).

The Project Paper in Brief

Despite the drawbacks mentioned above, the project paper team members believe that Burkina Faso is ready for an extended population/family planning program.

The proposals of the project paper are designed as Phase I of a long-range strategy to introduce family planning services and information throughout the country. During the three-year life span of the first phase, efforts will focus on building up family planning delivery capability through extensive training in-country and abroad for health professionals. Particular attention would be given to upgrading the skills of teachers and instructors at the schools of midwifery and nursing, and to the design of a family planning curriculum for schools.

The Burkina Midwives' Association - because of the manifest interest of its members in family planning - has been retained as one suitable vehicle for actual delivery of family planning services. By the end of Phase I, over half of the active midwives in the country will also have received comprehensive FP training. In addition, the project paper proposes to contribute to the Association's new high-risk pregnancy clinic which is sponsored by Family Planning International Assistance (FPIA).

The paper also recommends refurbishing operating rooms in the two main hospitals in the country to allow JHPIEGO-trained and other health professionals to practice advanced family planning techniques.

During the second half of Phase I, two pilot projects will be carried out, one in a semi-rural zone and the other in an urban area. This will include service delivery as well as an intensive IEC effort. In fact, IEC constitutes a major chapter of this project paper, and a whole array of activities has been outlined for the duration of the three-year program (see IEC chapter, Appendix B).

Information, Education and Communication

INAFa

Over the years, INAFa has been the main provider of family planning-related information in the country. Its population education project is sponsored by the United Nations Fund for Population Activities (UNFPA) and has a 1984-85 budget of \$130,000. The principal components of the project are:

- a) Training of sex education instructors. There are now approximately 85 graduates of their two-week course which includes such topics as family life, sexually transmitted diseases and contraception. The graduate instructors are regular Government employees who give talks in their work milieu. They are mostly from the MOE, but also include representatives from the MOH and the Ministry of Youth.
- b) Radio. INAFa is a regular contributor to a popular French-language weekly program aimed at women, which often deals with sex education, family planning and related topics. INAFa would eventually like to get involved in national language broadcasts. However, it does not feel it has the linguistic or personnel capability at this point.
- c) Drama. INAFa commissioned three plays on sex-related topics (STDs, sexual responsibility, etc.). The plays--melodramas actually, with catchy titles such as "Victim of Ignorance," "The Ransom of Pleasure," and "The Roots of Adversity"--involve audience participation.

The plays, fully scripted, are first performed in French. Members of the audience are then asked to reenact some of the scenes (in local language) and propose their own solutions to the predicaments of the main characters. An "animateur" invites comments from the spectators and keeps things rolling at a good pace. There is no moralizing or coercion to find the "right" solution. The plays are staged by a local theatre group and are performed outdoors several times a week in urban neighborhoods.

INAFAs population education project appears to be very well run. It is managed by a small coordination team of dedicated professionals. Although they already have a considerable program, the people there believe they can expand the scope of the existing project, and even integrate a few more activities.

DESAH

The MOH has a good capability for the production and distribution of IEC material through its Direction pour l'Education en Santé, Assainissement et Hygiène (DESAH).

DESAH has a number of INAFAs-trained sex education instructors. Also, it is responsible for the IEC training of students in nursing and midwifery. As part of their training, the students learn how to hold conferences, how to use visual aids, design makeshift visual aids, etc.

It is fully equipped for the in-house design of print material, has some printing capability (silkscreen process) of its own, but usually has things done by an outside printer. More than just a producer of materials, DESAH actually orchestrates entire communications support campaigns for the MOH's many projects (vaccination, etc.).

A good collaboration already exists between what will be the two main coordinating agencies in any extended family planning communications efforts. For instance, INAFAs trains DESAH's sex education instructors, and DESAH lends INAFAs health specialists when some medical content needs explanations during the theater presentations.

Recommendation

At the end of the assignment, the team was advised by Mission and embassy senior officials that the start-up of any comprehensive population project could take some time, since no bilateral agreement would be signed for the 1984-85 fiscal year. However, it will be possible, in the meantime, to initiate projects through centrally-funded organizations. These projects could cover the areas of training, and technical assistance, as well as IEC.

The project paper proposes a whole array of IEC activities. While a time frame has been attached to their implementation, many of the activities could also be carried out independently, at any time, and still contribute effectively to the long-term family planning/population effort.

Should AID ask JHU/PCS to provide IEC technical assistance or funding, it is recommended to go ahead with a certain number of activities through INAFA and/or DESAH, taking into account the availability of their human resources and the possible collaboration of local private organizations. Specific projects would be discussed and agreed upon by all interested parties before any work or transfer of funds was undertaken.

LIST OF CONTACTS

United States Embassy/Burkina
Department of State
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United States Agency for International Development (USAID)/Burkina
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Leslie Curtin, Population IDI
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Ministère du Plan et du Développement Populaire
Ouagadougou, Burkina Faso
M. Hamadou Lougue, Secrétaire Général
M. Lassane Dera, Directeur de l'Institut National de la Statistique et de
la Démographie (INSD)
M. Mathias Dakuyo, Directeur de la Recherche Démographique (INSD)
Mr. Lohe Désiré Lpmate. Chef de Service des Statistiques Sociales (INSD)

Ministère de la Santé
B.P. 7009, Ouagadougou, Burkina Faso
M. Alain Zoubga, Secrétaire Général
Dr. Abdulaye Traore, Directeur, Direction pour l'Education en Santé,
Assainissement et Hygiène
Mme Brigitte Thiombiano, Association des Sages-Femmes Burkinabe
Mme Suzanne Soma, Ecole des Sages-Femmes

Ministère de l'Essor Familial et de la Solidarité Nationale
B.P. 515, Ouagadougou, Burkina Faso
Mme Opportune Nikiema, Secrétaire Général

Ministère de l'Education
Ouagadougou, Burkina Faso
M. Daba Adrien Sanou, Secrétaire Général
Mme Yvette Kompaore, Institut National pour l'Alphabétisation et la
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M. Marc Zongo, INAFA

Ministère de l'Information et de la Culture

Ouagadougou, Burkina Faso

M. David Barry, Directeur - Formation et Recherche

M. Serge Théophile Balima, Directeur - Télévision

M. Seydou Azad Sawadogo, Directeur - Publicité

M. Paulin Babou, Directeur - Presse écrite

M. Emmanuel Yameogo, Etudes et Equipment

M. Simon Ilbudo, Agence d'Information Burkinabe

United Nations Fund for Population Activities (UNFPA)

Ouagadougou, Burkina Faso

Dr. Sabwa A. Matenda, Coordonateur

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Ouagadougou, Burkina Faso

M. Stanislas Adotevi, Représentant Résident

Ms. Nicole Lafrance, Stratégie GOBI - FFF

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Ouagadougou, Burkina Faso

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Information/Education/Communication (IEC)

It is still possible, in the absence of a population policy or of full family planning service delivery, to lay some solid IEC groundwork by teaching sex education, promoting sexual responsibility, creating an awareness of potential population problems, and even broaching the subject of contraception. This would certainly do no harm to any eventual national FP program, and would allow local IEC practitioners to gain more experience in the process.

The preparation and distribution of family planning information in Burkina Faso is not the exclusive domain of any single ministry or organization. The program of IEC activities that is proposed in this paper involves three ministries: Education, Health, and Information and Culture. All three are represented on the National Population Council.

1. Education (MOE)

Over the years, this ministry -- through its Direction de l'Institut National d'Alphabétisation et de Formation des Adultes (INAF) -- has been the main provider of FP-related information in the country. INAF has a population education project which is sponsored by the UNFPA. The 1984-85 budget is approximately \$130,000. The principal components of the project are:

- A. Training of instructors in sex education. There are now approximately 85 graduates of their two-week course which includes family life, sexually transmitted diseases, contraception, etc. The graduate instructors are regular government employees who are called to give talks in their work environment: schools, maisons des jeunes, etc.
- B. Radio: INAF is a regular contributor (topics, guests, coordination, etc.) to a popular French-language weekly program aimed at women. It is broadcast nationwide, and often deals with sex education, FP and related topics. INAF would eventually like to get involved in national language broadcasts. However, it does not feel it has the linguistic or personnel capability at this point.

- C. Drama: INAFA has commissioned three plays on sex-related topics (sexually transmitted diseases (STDs), sexual responsibility, etc.) The plays which involve audience participation were created by a local theatre group and are performed several times a week in urban neighborhoods. INAFA's population education project appears to be very well run. It is managed by a small coordination team of dedicated professionals. Although it already has a considerable program, INAFA believes it is capable of expanding the scope of its existing project and even to integrate a few new activities.

2. Health (MOH)

The Ministry of Health has a good capability for the production and distribution of IEC material through its Direction pour l'Education en Santé, Assainissement et Hygiène (DESAH).

They are fully equipped for the in-house design of print material, have some printing capability (especially for posters), and act as the coordinators and conduits for other types of IEC material for the Ministry of Health. Indeed, they are capable of orchestrating entire campaigns, although as mentioned in the needs assessment report, they are perhaps weak from a conceptual point of view and in the pretesting area. However, with the proper technical assistance -- perhaps from the U.S. based Program for the Introduction of Applied Contraceptive Technology (PIACT) -- it would be possible to upgrade the skills of DESAH's personnel in the design of family planning IEC material.

It is encouraging to note that there already exists a good collaboration between what will be the main coordinating agencies in the field of IEC activities -- INAFA and DESAH. For instance, INAFA trains DESAH's sex education instructors, and DESAH lends INAFA its health specialists when there is some medical content that needs explanation during its theatre presentations.

3. Information and Culture (MOIC)

The MOIC has argued somewhat convincingly, that it should be considered an equal partner in any family planning/population IEC effort, and not simply a vehicle or support system for messages that would be designed by other ministries. The Ministry of Information people believe they should be included from the start in the development of messages and strategies. It is a fact that much of the mass media expertise in this country -- in radio, television, print, film and advertising -- rests with their ministry.

In order to do their job well, they say, the MOIC should also receive some training and funding from this project. As a precedent to this proposal, they cite the example of UNICEF's GOBI-FF strategy which could give the MOIC some monies to purchase basic supplies and pieces of equipment to upgrade its technical capability, if the Ministry came up with a plan of action or at least some valid suggestion for collaboration.

The Ministry of Information presents a valid case, and its request is taken in account in the series of proposed IEC activities outlines in this section.

For the time being, it is not expected that the MOSW will have a direct involvement in the production of IEC material. However, its input will be sought, and when the Family Planning section has clearly defined its scope of action and gained a good "cruising speed", it will be capable of initiating and sponsoring worthwhile IEC activities of its own.

4. IEC Program

The IEC program has been kept down to a manageable number of products and activities. This is necessary in order not to strain the current IEC capability of INAFA and DESAH, and to allow them to benefit as much as possible from the technical assistance, and to expand at a reasonable rate. It should be remembered that preparation of IEC material -- especially in the early stages of a FP project -- is a time consuming affair with its many production, pretesting, approval and distribution steps.

Some of the activities/products are designed for national distribution while others will be aimed at specific audiences for the pilot projects in the targeted area.

The main components of the program are IEC products, technical assistance, and training including the design of appropriate IEC curricula for health personnel.

Also, by trying out a complete range of communication channels and tools, it will be possible at the end of the project to evaluate the efficiency and relevance of each before going on the Phase II.

Although there is a time frame attached to the start-up and completion of the different "deliverables", it should not be considered immovable. The order of delivery can be altered; indeed certain segments could even be started earlier through a centrally-funded agreement, rather than through the bilateral project. Preproject initiatives would be useful to take advantage of the current enthusiasm for FP which is quite evident in many areas.

5. Market Research

In this paper, the outreach and service delivery sector has scheduled its first K-A-P survey somewhere near the middle of Phase I of the project. While this is perfectly logical in the context of the requirements for the pilot projects, it does not serve the needs of the IEC campaign which are much more immediate.

Market Research -- either a mini-survey or a series of focus group discussion -- would be required at the very beginning to get at least some idea of the prevailing climate regarding FP in Burkina. The results of this research would be essential background material for participants in a seminar to determine IEC strategy and messages.

With the census keeping its staff fully busy, there is no question of asking the INSD to take on this survey. Rather it should be proposed to the privately-owned (by Burkinans) Société Africaine d'Etudes pour le Développement (SAED). They are said to have a good reputation, and have handled contracts for local and foreign clients. While their capability would need to be investigated more closely, they appear to be a good bet at the moment.

6. Workshop for Development of Strategy and Message Content

The design of IEC materials and activities for this project will be carried out by three ministries, with the potential participation of several others. In order to ensure a minimum of continuity and cohesiveness, a three-day workshop will be held to draft an agreed upon IEC strategy, to determine contents, themes and slogans, and to identify target audiences. It is important that participants be selected well ahead of the workshop, so that they can be provided with background material and a full description of the work that will be required. This will allow them to show up well prepared for the work sessions.

The workshop -- to be held in-country at the very beginning of the project -- will bring together representatives of the various ministries; a USAID representative, local consultants, and perhaps an outside IEC consultant. There should not be more than 10 participants.

The workshop would include briefings on the current status of the different components of the overall population/FP, talks on various topics (communication techniques, attitudes of various target audiences, socio-economic data, experience of other organizations in producing IEC materials, etc.), and of course discussions between the participants on how to reach the target audiences.

The manager of the Population/FP project would be responsible for organizing the workshop, and the report of the findings and the conclusions would be written by one of the consultants.

7. Training, Seminars, Workshops

- A. Development of an IEC curriculum as part of the training of new health professionals.

At the moment, IEC training is virtually nonexistent at the Ecole Nationale de Santé Publique; nurses and midwives receive only two hours of very basic communication background during their three-year training course. A group of "monitrices" at the school of midwifery admit themselves that their people are a little rough and lacking in communication skills when dealing with clients and patients.

The IEC curriculum would first be developed for the nursing and midwifery schools. It would include general theories of communications, using visual aids, how to motivate people, and the acquisition of skills in counselling and small-group discussions. This last part would involve a good amount of role-playing. During the course, students would also receive some basics in mass media communications.

A tentative IEC curriculum will be developed by an out-of-country consultant who would then come to Burkina to instruct selected members of the teaching staff of the different departments of the Ecole Nationale de la Santé Publique. The IEC training workshop would last one week. If possible, a representative of INAFA and a radio specialist from the MOI also will be invited to participate in the teaching at some point.

By the end of the seminar, a good number of the school staff should be suitably trained so that they can teach the IEC course by themselves. It is suggested that 30 hours be allocated to IEC during the third year of the course as part of the training of nurses and midwives.

The teaching seminar also would allow the consultant and the participants to make appropriate modifications to the curriculum and tailor it to specific Burkina needs. A final draft of the course content would then be written by the consultant, sent to Burkina for final approval and printed as a 20-25 page handbook which every student will receive.

Eventually, IEC will be integrated into the training of other health workers (infirmières brevetées, agents de première ligne). However, it is suggested to wait until Phase II before proceeding in order to evaluate the efficiency of the course at the nurse and midwife level.

During a conversation some time after the drafting of this chapter, another source at the MOH stated that there is already quite extensive IEC training for ENSP students -- through the services of the DESAH. An officer of the Directorate said that practical courses in dealing with

patients, addressing small groups, using and making teaching aids were offered to students.

The discrepancy between the two sources of information at the MOH will have to be investigated before money is spent or plans are put into action. For the time being, the implementation plan and time frame have been prepared as if a new IEC program were needed. In any event, if it were agreeable to the Ministry, there would still be a benefit in revamping an already acceptable curriculum by including new elements pertinent to FP IEC, such as counselling, demonstration of FP methods, etc.

- B. IEC component in the MCH/FP training course for health workers in the pilot project areas.

In the course of the 5-10 day training sessions for health workers and social agents from the MOSW in the pilot project areas, one day will be allocated to the honing of their communication skills. The IEC curriculum will cover essentially interpersonal communications. The exact content will be determined by the IEC-trained staff at the ENSP who also could handle the teaching components.

- C. Briefing Seminars on Population/FP Matters for Burkina Faso Media.

As mentioned earlier, the Ministry of Information wishes to be directly involved in any population/FP project. In order to ensure the help of knowledgeable collaborators, a yearly information seminar will be held in-country for a select group of media people (journalists, producers, advertising people, etc.).

The content of the seminar will include briefings on population/demographic problems, updates on the current census situation, presentations by local experts on health and family planning topics, special problems in FP communications (i.e., sex vocabulary appropriate for the airwaves), talks by representatives of USAID and other agencies. Participants would be provided with a press kit of

background material as well as samples of FP methods available in the country.

Length of seminars: two days, with one seminar every year of the project. The seminar could be funded through the Ministry of Planning which would be in charge of its organization. The agenda would be determined in collaboration with the manager of the Population/FP project.

8. Reference Libraries at INAFA and the ENSP

A. INAFA

As the organization mandated to train sex education instructors, and one of the main sources of information for other ministries and agencies on questions of sex education, INAFA could use a small reference library which would allow it to update and improve its present curriculum; the library -- a reading room actually -- also could be used by their staff, students, health professionals and any interested person.

INAFA is quite serious about this idea and has already compiled a comprehensive bibliography of French-language books. With their list and a few other purchases (subscriptions to appropriate publications) it would be possible to constitute a solid initial base for their library.

The library budget item could also be used for the purchase of much needed visual aids (flip charts, anatomical models, films) handbooks, samples of FP methods and basic audio-visual equipment. INAFA could then distribute some of this material to appropriate ministries and directorates who also have a pressing need for these kinds of things.

The budget also should include funds for benches, tables, shelves and the refurbishing of an existing locale.

B. Ecole National de Santé Publique (ENSP)

Reference books (based on the list compiled by INAFA) and subscriptions to appropriate publications will be provided to the school.

9. Print Materials

The development of all print material -- at least in its initial and pretesting stages -- should be carried out with the outside technical assistance of a specialist from the program for the Introduction of Applied Contraceptive Technology (PIACT).

A. Design of a Burkina Faso Family Planning Logo

Because the responsibility for services and activities is shared by several ministries and each will be responsible for its own output, there is a need to develop an original FP (or child spacing) logo so that the public at large will perceive family planning in Burkina as a unified and coherent effort.

The logo would identify service delivery points and be used as a signature for FP publications (leaflets, booklets, posters, film commercials). The logo would make service points readily recognizable to the non-reading public. In person-to-person communications as well as in radio advertisements, potential clients would be invited to go to "the sign of the red triangle" (or whatever the sign is).

The development process for an appropriate logo should be handled by the DESAH of the MOH. That directorate would be responsible for inviting a number of design proposals from local graphic artists including their own staff, organizing a jury -- all interested ministries should be invited -- to select the most suitable design, pretesting it, and producing all the necessary logo-based material.

This effort should be initiated at the very beginning of the project.

B. Contraception/Sexual Responsibility Billboards Aimed at Men in Urban Centers.

Since it can be safely said that the majority of viewers of the billboards have no reading ability, the message should be self-explanatory with little or no text.

The message content will be developed by the DESAH and the execution of the billboard artwork will be handled by the Direction de la Publicité of the MOIC which oversees and regulates all advertising in the country. The billboards should be set up in choice locations in Ouagadougou and Bobo-Dioulasso.

C. Family Planning/Contraception Posters

It is proposed that the production of two family planning/contraception posters be supervised by the DESAH. As with the other print materials, they would be prepared with the technical assistance of PIACT, and would go through the normal design-pretesting-printing process.

The following posters are suggested but the final decision as to message content and target audiences will rest with the participants of the strategy and message workshop:

- ° Poster 1 could contain a general family planning message aimed at clients in health facilities (clinics, dispensaries, hospitals).
- ° Poster 2 could emphasize sexual responsibility and be directed specifically towards men. It could be posted in workplaces, bars and buvettes, and public buildings. For this poster, it could perhaps be necessary to develop a distribution mechanism involving the Chamber of Commerce or the CDRs.

The DESAH has strong technical capability to do printing work though the silk-screen process. However, should the message require a photo approach, there would be a call for bids, and the printing contract would be awarded to a local outfit (either private or governmental).

D. FP Methods Booklets

In a number of countries, (in Africa, Asia, and Latin America), PIACT has helped local health organizations develop "methods booklets" which are given to semiliterate or nonreading acceptors of FP methods; the booklets explain the advantages of their method, how to use it, the possible side effects. While the medical content and production process are virtually always the same, each set of booklets is designed specifically for one country taking into account such differentiating factors as dress code, household environment, and local customs. The booklets -- usually 12-16 pages -- use either photographs or line drawings.

While the process from design to print is a long and expensive one -- and requires a lot of a health educator's time since the booklet must first be explained to clients, either individually or in small groups -- many observers believe it is a valid approach since it creates motivated and faithful acceptors.

It is recommended that two such booklets be produced for Burkina Faso: the "Pill" and the "Condom" since it appears they will be the two most popular methods here. The few lines of text could be in three languages (French, More, Djula). The booklets will be produced by the DESAH. Their availability should coincide with the start-up of the pilot projects.

E. General Purpose Illustrated FP Motivation Leaflet

Health professionals (either in clinic situations or during house visits) and speakers on FP topics often complain that, after meeting potential acceptors, there is nothing to give them as a "visiting card" or a reminder of family planning.

A simple illustrated leaflet in French and at least two national language versions, while not the perfect solution, would at least help alleviate part of the problem. The leaflet would contain the FP logo,

say where services are available, scenes of "ideal" family life, arguments in favor of child spacing, perhaps a brief overview of methods.

Production would be handled through the DESAH. The leaflet will be designed specifically for the targeted areas but, if suitable, it will be made available nationwide.

F. Self-Learning Leaflet for High-School Level Students

This illustrated 4-page leaflet is intended to stimulate discussion about the population problems of Burkina among students. The content will be based on the messages of this country's RAPID presentation. There also will be suggestions of topics for classroom discussions and essays. The leaflet could be used in the context of geography or social sciences courses. If the MOE agrees to distribute the leaflet, the production would be handled by INAFA.

G. Drama

As part of its Population education project funded by UNFPA, INAFA commissioned three plays on sex-related topics (STDs, sexual responsibility, etc.). The plays were written by a theatre group "Les Amateurs du Théâtre Burkinabe", and are performed outdoors several times a week in urban neighborhoods. This is participatory theatre. After the performance of a play, members of the audience are asked to take on some of the roles, restage certain scenes, and propose their own solutions to the predicaments of the main characters. An "Animateur" invites comments from the spectators and keeps things rolling at a good pace. There is no moralizing or coercion to find the "right" solution on his part.

INAFA would be willing to commission a play with a family planning theme. It is recommended that adequate funds for the preparation of script and subsequent staging of the play be allocated to INAFA who would then subcontract the assignment to the theatre group.

The funding of this particular item also should include sums for the following:

- Basic accessories for the theatre group: a portable stage, spot lights, speakers, etc.
- The printing and binding of all the plays, since it is planned that one day other theatre groups in the country will be performing the plays.

10. Radio

At present, radio is the only mass media which can claim to have any kind of penetration into rural areas. And yet, there are still large parts of the country which are out of reach of the national radio stations. The two rapid centers in the country, in Ouagadougou and Bobo-Dioulasso, are both capable of producing national programming as well as broadcasts specific to their area.

As part of its Programme Populaire de Développement (PPD) the government intends to build six new radio stations, which would broaden considerably their coverage of the countryside. At this point however, only one operation seems past the planning stage, a station in Gaoua which the MOIC hopes to have in operation by next year.

There is no current radio program specifically devoted to family planning. However, a number of scheduled programs broach the topic from time to time. Also, INAFA contributes human sexuality materials to a popular French-language broadcast "A Propos des Femmes".

A. Radio Spots

For the time being, radio efforts should be concentrated on the production and broadcast of 30-60 seconds information/motivation radio spots. The messages' content and the overall supervision would be handled by INAFA while the MOIC -- through its Direction de la Radio

and Direction de la Publicité -- would provide the necessary personnel support (script writers, producers, etc.) and production capability.

It is proposed that four radio spots in three languages -- French, More, Djula -- be produced during each year of the program (4 spots x 3 languages x 3 years). This is a realistic target that would not strain the capability of INAFA since the availability of members of their staff would only be required for short periods from time to time.

Should Bobo-Dioulasso be targeted as a pilot project area, commercials also could be produced for the campaign.

The MOIC will be provided with an adequate budget and supplies for the production of the spots, but it also should be agreed that free air time for a minimum number of broadcasts of the spots will be made available.

B. Human Sexuality/Contraception Vocabulary in National Languages

As mentioned in the Needs Assessment Paper, family planning/contraception are delicate subjects when discussed in local languages; INAFA says this is one of the main reasons why no local language radio programming on the topic yet exists.

As part of its medium range objectives, INAFA is interested in developing a suitable vocabulary to do programs that will reach potential family planning clients who do not speak French -- the majority of the population.

INAFA should be encouraged in this endeavour. The help should be in the form of technical assistance. INFA management believes that -- for the supervision of the field work at least -- local consultants would be preferable to outsiders since much of the task involves gaining the confidence and cooperation of rural people who are sometimes suspicious of strangers. If suitable local consultants are available, this project segment should be funded. In the first phase, the two principle languages should be studied.

11. Television

A few years ago, a Swiss Regional assistance team estimated the number of television sets in Burkina Faso to be 30-40,000. However, it can be safely said that, on the average, there are numerous viewers for each set. Currently only Ouagadougou and Bobo-Dioulasso get television programming. The PPD has an optimistic plan to install seven regional broadcast centers by the end of 1985.

Informal surveys have shown that people in Burkina Faso -- as do most African television viewers -- have a tremendous interest for programs produced in their own country. Currently, most of the very limited local programming budget must be allocated to the news and current affairs.

It is recommended, at some point in the project, to fund the videotaping and broadcast of a family planning play that will be developed by the Amateurs du Théâtre Burkinabe group. By the time the play is taped, the potential television audience will have increased; the TV program will be a good way to sensitize viewers in urban centers.

Also, it is proposed that the program be offered to a not-negligible secondary audience: the entire francophone Africa television-viewing public. Copies of the television play will be made available to all national television networks -- free of charge -- and through the services of the Union des Radios et Télévisions Nationales d'Afrique (URTNA).

Funding which would come through INAFA will include sufficient sums for sets, costumes, outside collaborators if necessary, overtime travel allowances for TV and theatre people, ample supply of cassettes. etc. A prerequisite for the implementation of this activity would be an agreement by the Direction de la Télévision for free air time for two or three broadcasts of the program.

12. Film

In urban areas, movie-going is a popular pastime, especially among the young. In the theatres, there is a continuous turnover of films and, as in Europe,

there is advertising in the cinemas.

It is suggested to produce two sexual responsibility film commercials aimed at young people. The message content and the overall coordination would be provided by the DESAH which has good experience in film work. It is currently overseeing the production of a series of six films on health-related topics (funded by USAID). The film work itself would be assigned to the Direction de la Publicité of the MOIC. The film production would be fully funded from concept to copies of the final print, but here also, the MOIC would have to guarantee a minimum period of showings in the theatres.

It will be decided later what language versions of the spots will be required. The Ministry of Health also may eventually want to offer the film spots to the television network.

13. Expansion of the Sex Education Instructor Network

INAFSA currently trains sex education instructors who give conferences and talks mainly in schools and maisons des jeunes. There are currently 85 trained instructors.

It is recommended that INAFSA be encouraged to add another dimension to this activity by inviting candidates to their course who could give talks to men in such workplaces as factories, offices, mines, army barracks, etc. Priority for this component will first be geared towards the pilot project areas.

To ensure the success of this effort, it will be necessary to get the cooperation of the Burkina Chamber of Commerce which speaks for the private business sector. The chamber has an up-to-date list of members, and says that there are about 50 businesses which employ 20 people or more in the targeted Bobo-Dioulasso area. Reaching this core group, together with visits to army barracks and government offices means that a sizeable number of men could be informed about FP. According to a chamber spokesman, employers -- while finding this idea somewhat unusual -- would probably accept having sex education instructors speak at their workplace.

The main funding requirement would be the organization of a mini-seminar (one-half day to one day at the most) for private employers, high ranking civil servants and military officers in the Bobo area, to explain the project and its importance, and to convince them to invite speakers to talk to their people. This is important because sex education instructors visit only "on request". Allocations for additional expenses by the speakers -- gas, travel allowances -- would be included in this budget item. The seminar would be funded through INAFA.

14. Briefing of Top Political and Government Personalities in Designated Target Areas

DESAH management insists that any health campaign -- even for noncontroversial activities such as vaccinations -- starts with meetings, briefings or information sessions for top political appointees in the designated area; these people include commissaires, sous-commissaires, préfets and perhaps the local CDRs. This advice was reiterated by a number of representatives of other agencies. Furthermore, methods for getting the collaboration of the CDRs should be carefully investigated.

Mechanisms and contents for this effort -- either a group meeting, individual briefing sessions, etc. -- should be handled by the DESAH. A contingency fund is included in the IEC budget for this item.

15. Mass Media Support for Family Planning Project

In order to help increase and improve overall coverage of the population/family planning situation in the country, it is recommended that funds be allocated to purchase specific supplies and pieces of production equipment for the MOIC directorates of Print, Radio and Television. The Ministry has already prepared a dossier in that sense.

It is not possible to meet all requests in the dossier. The MOIC will have to establish a list of priorities. Prior to agreement on this budget item, it would be preferable if the MOIC also prepared a plan of action with a range of suggested media activities to reach target audiences. A mechanism to measure the output of this item (Ex: number of articles, "appearances" on radio or television) would also have to be developed.

16. Research and Development

The question of IEC (and service delivery) outreach into rural areas has been addressed only on a very limited scale in this paper; there is a rural component in the paper but it is basically an experimental effort in a small designated area. It is quite obvious that during subsequent phases, the hinterland and the people called upon to deliver the FP message to those remote areas will take on a much greater importance.

It will be vital to send into the field qualified and well equipped people. In anticipation of this need, it is proposed that two Bobo-Dioulasso-based private organizations be commissioned to design a short-term FP IEC training seminar and an FP kit for field workers.

The two organizations are the Centre d'Etudes Sociales et Economique de l'Afrique de l'Ouest (CESAO) and the Groups de Recherche pour l'Action et l'Autopromotion Paysanne (GRAAP). Both have extensive experience in designing communication material for local and international clients such as UNICEF. Their mandate would be essentially one of research and development since anything they produce will not be used at least until Phase II. In the case of the IEC kit, they would be asked to create a prototype which would meet a field worker's requirements: portable, resistant, easy to use, light, etc.

The specificity of both organizations will have to be investigated before funds are allocated. Perhaps one will be more suitable than the other, or perhaps both should be asked to collaborate in this effort.