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September 27, 1985

Mr. Anselmo Bernal
S&T/POP/IT Room 806 SA-18
Office of Population
US Agency for International Development
Washington, D.C. 20523

Re: Cooperative Agreement
DPE-3004-A-2018-00

Dear Al,

Attached is a copy of Scott Wittet's report covering his trip to Nepal from July 16-30, 1985.

Please indicate your approval of this report on the line below and return a copy of this letter to me for our project files. Once we have received your approval, we will distribute copies of the report to the AID Mission in Nepal and to other AID officials, as you request.

Thank you for your assistance.

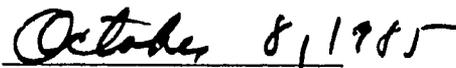
Sincerely,



Cynthia P. Green
Project Director
Population Communication Services

APPROVED:


Signature


Date

Enclosure
CPG/fgb

TRIP REPORT

Nepal Family Planning/Maternal Child Health Project:
Print Materials for Low-Literates--Further Materials' Development,
Training, and Use in the Field

AS-NEP-01

Prepared by:
Scott Wittet
PIACT

Dates of In-Country Work:
July 16-30, 1985

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*Approved by [Signature]
10/9/85*

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I. EXECUTIVE SUMMARY

In April 1984, the IEC Division of the Nepal FP/MCH project began development of four primarily pictorial print materials for low-literate villagers. Three family planning booklets discussing pill use, condom use, and reasons for family planning, and a plastic laminated card with instructions for preparation of ORS have been designed and pretested and have been or will soon be printed. During a January 1985 JHU/PCS follow-up consultancy, training, distribution, and monitoring systems were set up. The objectives of the current consultancy included:

- 1) planning pill and condom booklet evaluation activities;
- 2) assisting the IEC and Training Divisions to train health workers to use the motivational booklet;
- 3) assisting in finalizing the ORS card;
- 4) programming expenditure of excess rupees gained through an increase in the exchange rate and developing a workplan and budget for use of additional funds; and
- 5) exploring ideas for possible future JHU/PCS collaboration with FP/MCH.

All objectives were met during the consultancy.

In discussions with FP/MCH administrative and training staff, it was clear that the materials were perceived as interesting, appropriate, and useful as fieldworker training aids and for client instruction. The limited distribution of pill and condom booklets carried out since January seems to be successful (46,000 copies of the 60,000 booklets printed are in the field); a prime concern now is identifying money for reprinting. Further observation and evaluation of field use will be conducted in September 1985. Extensive collaboration with FP/MCH Training Division

central staff during the current consultancy has increased the potential for continued success. Distribution of the newly printed motivational booklet has begun. The ORS card will be printed during August-September.

FP/MCH reports being very pleased with the results of this project and is anxious to discuss future collaboration with JHU/PCS.

Consultant recommendations to JHU/PCS include:

- 1) Communicate with FP/MCH as soon as possible regarding authorization for printing 30,000 copies of the ORS card in Bangkok. Arrangements for payment in dollars should be made directly with VISCOM, Ltd., the Thai printer.
- 2) Urge the IEC Division to continue to work as closely as possible with the Training Division in all materials development activities, to facilitate distribution and use of the materials.
- 3) Provide technical assistance to the IEC Division for the evaluation of the pill and condom booklets, as requested.
- 4) Discuss possible future collaboration with FP/MCH. A PCS staff person should respond to Dr. Khatri and his staff's suggestions prior to the planned September evaluation consultancy.
- 5) Work to identify possible sources of funding for reprinting the materials, including discussing the problem of low supplies with representatives of UNFPA and USAID. Reprinting should take place after materials have been carefully evaluated so that recommended modifications can be included, but prior to exhaustion of all supplies.

II. ABBREVIATIONS

CRS	Contraceptive Retail Sales Company Pvt., Ltd.
DORC	Development Oriented Research Center
DTCP	Development Training and Communications Planning
FP	Family Planning
FP/MCH	Family Planning/Maternal and Child Health Project
FPO	Family Planning Officer
ICHSDP	Integrated Community Health Services Development Project
IEC	Information, Education, and Communication
INTRAH	Program for International Training in Health
JHU/PCS	Johns Hopkins University, Population Communication Services
JSI	The John Snow Public Health Group, Inc.
MCH	Maternal and Child Health
ORS	Oral Rehydration Solution (or Salts)
PBHW	Panchayat-Based Health Worker
PIACT	Program for the Introduction and Adaptation of Contraceptive Technology
RTO	Regional Training Officer
TO	Training Officer
UNFPA	United Nations Fund for Population Activities
USAID	United States Agency for International Development

III. INTRODUCTION

In April 1984 and January 1985, JHU/PCS consultants Margot Zimmerman and Scott Wittet (PIACT) worked with the IEC Division of the Nepal FP/MCH project to develop a set of primarily pictorial materials for illiterate audiences. The materials include: 1) a booklet explaining condom use, 2) a booklet explaining pill use, 3) a family planning motivational booklet, and 4) a laminated card explaining preparation of ORS using both premixed powder ("Jeevan Jal" packets) and sugar and salt (home remedy or "Medicine Water"). The pill and condom booklets were produced in two regional versions: Terai (southern Nepal) and Hill (central Nepal between the Terai and the Himalayas). During the January consultancy, Zimmerman and Wittet helped design training, distribution, and resupply systems; observed field training and use of the pill and condom booklets; helped finalize the motivational booklet; and reviewed progress on the ORS card. A follow-up visit was planned for May 1985. Due to unavoidable delays, the proposed May consultancy was rescheduled for July.

The objectives of the current consultancy are itemized in the Executive Summary.

IV. PROJECT ACTIVITIES

Pill and Condom Booklets--Training and Distribution

After the consultants' January departure, the IEC Division continued training Training Officers (TOs) to use the booklets, organized "direct trainings" of health workers by IEC Division staff, and introduced all Family Planning Officers (FPOs) to the pill and condom booklets. As of July 30, 1985, all 21 TOs have been trained in booklet use. All FPOs have

been sent copies of the booklets with cover letters. At least 443 health workers have been trained by TOs and the IEC Division (TO reports of training activities for May and June 1985 had not been received as of July 30, 1985 when this consultant left Kathmandu.) Stocks of booklets are in the three Regional Training Centers, in selected district FP offices, and in Kathmandu. Of the 60,000 pill and condom booklets printed (15,000 each of Hill and Terai, pill and condom booklets), 46,000 have been distributed to Training Centers, trainees, and district offices. As all 433 trainees were to be given twenty copies of each of the pill and condom booklets (one version only), at least 17,720 booklets are now with fieldworkers or their clients.

During the consultancy, five new TOs were trained to use the booklets. The training, conducted in collaboration with the Training Division, is described in the motivational booklet section which follows.

In conjunction with a national FP/MCH seminar in Kathmandu attended by all FPOs and TOs, the IEC Division organized and conducted a two-day IEC workshop facilitated by Mr. Navin Pyakuryal, an Information Officer. The "IEC Kit," all three booklets, and the ORS card were discussed. The workshop was very successful; TOs who had questions or comments after having seen or used the pill and condom booklets in the field were able to discuss them with their colleagues and the booklet developers. Comments on the motivational booklet and ORS card were also recorded. The workshop schedule is attached in Appendix E.

The UNFPA-funded "IEC Kit," consisting of two flipcharts covering all FP/MCH topics, posters, cloth charts, and short textual pamphlets, was also available for examination during the workshop. Only 1,500 kits

have been produced (700 for ICHSDP, 700 for FP/MCH, 100 for UNFPA) and are being hoarded in Kathmandu. Only one or two kits will be issued to each of the four training centers at this time (they were designed to be given to each fieldworker). The kits, with all supplies, are very heavy (estimated ten to twelve pounds) and probably will not be used by mobile health workers. The bags alone may be useful for carrying contraceptive supplies and lighter materials such as the posters, cloth charts, and the JHU/PCS-funded booklets and ORS card. However, until more kits are produced and distributed (following an evaluation--perhaps in 1986), this is a moot point.

Comments on the booklets by FPOs and by TOs during the workshop and other IEC Division trainings have been very positive. Most of the critical comments about the nature of the drawings or text were addressed by quoting pretest results and explaining why decisions were made. Useful suggestions for revisions to be made before reprinting have been recorded by the IEC staff.

Unfortunately, in this project we see a common problem repeated: because only 30,000 copies of each booklet were printed, after introduction of the materials supplies may be cut off. FPOs whose districts were not selected for mass distribution of booklets (due to inadequate supply) were often upset. TOs expressed concern about potential resupply problems in their Training Centers. It is hoped that funding for mass reprinting of the booklets will be made available, perhaps by UNFPA or USAID. The PIACT consultant described the supply problem to representatives of both these organizations (Dr. David Calder, Health and Population Officer, USAID; and Mr. D. B. Lama, Senior Program Officer, UNFPA). Mr. Lama suggested that there might be funding for the reprinting materials when the "IEC Kit" (of which the booklets are a part) is reprinted. This will

not occur until sometime in 1986 at the earliest, after booklet supplies are depleted. The IEC Division estimates that a total of 100,000 copies of each material (pill and condom booklets [50,000 copies each version], motivational booklet, and ORS card) will be needed for nationwide distribution. They estimate the cost of reprinting the remaining 70,000 copies of each material (280,000 units) to be approximately \$65,000.

Pill and Condom Booklets--Evaluation

The consultant and the IEC Division staff planned pill and condom booklet evaluation activities, tentatively scheduled for September 1985. Health workers who have used the booklets and the clients they informed will be interviewed to determine levels of knowledge, method acceptance, and how the booklets are being used. FPOs and TOs will also be interviewed for reactions to the materials, including comments by their staffs and trainees. If a workable quasi-experimental design can be developed, health workers and clients who have used the booklets will be compared with peers who have never seen the materials. A series of draft questionnaires and a research protocol were developed by the consultant and IEC staff for review by PIACT, JHU/PCS and its evaluation experts. Based on their comments, the documents will be revised and sent to the IEC Division for translation prior to the evaluation. The draft documents are attached as Appendix B. FP/MCH has requested that JHU/PCS consultants be sent to assist with evaluation activities. The evaluation will be funded with excess rupees gained through favorable exchange rates, as approved by JHU/PCS.

Motivational Booklet

The finalized motivational booklet artwork, approved by the JHU/PCS consultants in January, was sent to Educational Enterprises, Offset Division, for printing, after obtaining quotations from other Kathmandu printers. Five thousand copies (of a total 30,000) of "The Happy Family" were printed for use during training sessions planned by the IEC Division for the consultancy. The booklet was printed in four colors and is quite attractive (a copy, with translation, is attached as Appendix C). Because the flesh tones used in the pill and condom booklets were considered slightly too dark, the artist and IEC staff decided to use a pure yellow for faces, hands, and feet.

The consultant and staff reviewed the pictures and text and suggested several revisions to be made before printing the remaining 25,000 copies. All changes are minor, including correcting typographical errors, altering color, or improving outlines. In one picture, the "unhappy" (unplanned) family seems to be more prosperous than the "happy" family (they have more corn in their field); this will be changed. The remaining 25,000 copies of the motivational booklet are scheduled for printing in August and September 1985, as noted in the revised workplan (Appendix A).

Though the IEC Division had planned to organize training sessions similar to those conducted during the January consultancy (travel outside of Kathmandu to train TOs, observe TOs training health workers, observe health workers interacting with clients), they revised their plans to take advantage of a training for new TOs taking place in Kathmandu. In this way they had an opportunity to work closely with Training Division central staff and could best foster collaboration between the IEC and

Training Divisions. Furthermore, no health worker training sessions were then being held as all TOs and FPOs were coming to Kathmandu for the national FP/MCH seminar.

The consultant and IEC staff met with Training Division personnel to plan the program. The seven-week TO training was already underway. Two sessions were scheduled on "Use of Visual Aids" and "Motivation of Clients." The training staff was happy to collaborate in planning training curricula; IEC and Training Division staff and the consultant participated in both sessions. Five new RTOs (representing all three regional training centers) and one new FPO were trained.

The IEC Division developed a short training handout for health workers to complement the motivational booklet. The handout is included in Appendix C. A handout entitled "How to Train Health Workers to Use the Client Booklets on Family Planning Methods," prepared during the previous consultancy and attached to that report, was also distributed during the TO training.

Prior to these training sessions, the trainees had a one day discussion of the pill, but it was unclear how thoroughly the pill booklet had been introduced at that time. In conversations with the Training Division, the consultant emphasized the booklets' utility not only for instructing illiterate villagers, but for training purposes as well, and suggested that all the booklets be routinely incorporated in training curricula as appropriate. The IEC and Training staff decided to include an introduction to the pill and condom booklets and handouts during the "Visual Aids" training session.

Trainees' reactions to the materials were very positive. All agreed that the materials would be helpful in reinforcing health worker knowledge and

for client motivation and instruction. They found the booklets attractive and practical. As each Training Center had already been or would soon be supplied with booklets, only sample copies were given to trainees at the end of the sessions.

ORS Card

In January 1985, the National Diarrheal Disease Control Programme Committee standardized instructions for the preparation of ORS. This allowed the IEC Division to complete development of the ORS card. A final version was sent to JHU/PCS in June for review.

The consultant and the IEC Division discussed JHU/PCS comments and reviewed the Nepali text. Minor revisions were made, the text was phototypeset, and the artist prepared camera-ready artwork for the printers. A copy of the proof and translations of the texts are attached as Appendix D.

During the April 1984 consultancy, the IEC Division planned to laminate a printed ORS sheet or to print ORS information directly on a plastic card. This was to ensure that the material was sturdy and washable. Estimates for production costs were requested from printers and laminators in Kathmandu and a firm in Bangkok with whom FP/MCH has worked extensively in the past. It soon became clear that material costs for the laminated sheet would be six to eight times higher in Kathmandu (Kathmandu cost per unit: \$1.33-\$1.74, Bangkok cost including shipping: \$0.22), and the product would probably be of lower quality. The disadvantages of printing in Bangkok involve difficulty in overseeing production and reviewing drafts and the fact that costs would have to be paid in dollars or baht. The former problem is mitigated by the existence of FP/MCH contacts at

Development Training and Communication Planning (DTCP), a UNDP organization in Bangkok, who would facilitate the production process at no charge and who are familiar with the JHU/PCS project (DTCP provided technical assistance on non-JHU/PCS funded elements of the "IEC Kit"). The latter problem, a critical one since FP/MCH had dollar reserves in Baltimore sufficient to print fewer than 10,000 copies, was resolved when JHU/PCS, after discussing the situation with the consultant, agreed to finance printing with additional monies. JHU/PCS will notify FP/MCH as to the number of copies they are willing to produce and will make arrangements with VISCOM, Ltd., the Thai printer, to transfer necessary funds. It is recommended that JHU/PCS allocate funding for 30,000 copies of the ORS card.

The prototype card was introduced during the TO training and the FPO and TO IEC workshop. The consultant and IEC staff developed a handout for health workers, with additional ORS information, and distributed this with the prototype material. The handout is included in Appendix D. Reactions were again very favorable.

NGOs (Save the Children, USA; Nepal Contraceptive Retail Sales [social marketing of Jeevan Jal packets]; World Neighbors; Family Planning Association of Nepal), major donors (USAID, UNFPA, UNICEF) and ICHSDP, the other MOH health care delivery project, were given copies of the prototype. The general manager of CRS immediately requested permission to produce at least 1,000 copies of the card for his retailers, though he was only interested in printing the Jeevan Jal material. As CRS has an account with VISCOM, they will order their copies at the time of printing.

The ORS card information supports materials' preparation instructions included in a UNICEF flipchart currently being developed in Kathmandu.

The flipchart addresses some ORS issues in more depth (reasons for using ORS, how to recognize diarrhea), so the two materials complement one another. The card information also corroborates ORS information supplied in the "IEC Kit" flipchart and poster.

As specified in the revised workplan (Appendix A), the ORS card is to be printed August to September 1985, pending JHU/PCS authorization and coordination with VISCOM.

Programming Expenditure of Excess Rupees

An estimated total of Rs. 144,837, gained through favorable exchange rates, needed to be allocated to project activities. Prior to the consultancy, Rs. 54,720 had been approved to support pill and condom booklet "direct trainings" and evaluation activities. Pending JHU/PCS approval, the remaining Rs. 90,117 will be used to produce an additional material (a printed card on aseptic procedures for surgical sterilization, IUD insertion, etc.); to revise and pretest the pill and condom booklets following field evaluation; to reprint a limited number of the pill and condom booklets; and to support follow-up visits to the Regional Training Centers by IEC staff. FP/MCH has submitted a proposed budget for the activities; a schedule is included in the revised workplan (Appendix A).

The aseptic procedures card is a necessary support material for clinic and sterilization camp staff to improve the quality of surgical service. It will summarize information from the clinician training curriculum. The card will be printed on a double-sized sheet of paper and enclosed in a clear plastic envelope to protect it from water and tearing. The information on the card will consist of technical text designed for an

educated audience. It is to be posted on walls in areas where aseptic procedures are to be followed. The IEC Division, in collaboration with FP/MCH medical staff, will design the material and print 2,000 copies. JHU/PCS will be asked to review a translation prior to printing.

Following the evaluation of the pill and condom booklets, evaluation data, and FPO, TO, and health worker comments recorded during trainings and workshops will be reviewed and the booklets will be revised as necessary. The new drafts will be tested in four areas (two Hill, two Terai) by IEC staff. Additionally, a one-day seminar involving Training, Evaluation, and IEC Division staff and ICHSDP and other organizations will be organized to review the draft material. FP/MCH will then reprint as many copies of the two booklets as possible (in Kathmandu). Unfortunately, remaining project funds will not produce sufficient quantities for national distribution and additional funding sources must be identified if the materials are to have their intended impact.

Follow-up visits to the three Regional Training Centers (Patalaya, Dharan, Nepalgunj) to check on booklet supplies, distribution, and usage will also be organized prior to the end of the project.

FP/MCH Ideas for Future Collaboration

In discussions with Dr. Khatri and the IEC Division staff, needs were identified and a list of projects of interest to FP/MCH was created. None of the project ideas was further developed during the consultancy as they will be reviewed by JHU/PCS and discussed in more depth in the future.

According to Dr. Khatri, a high priority need of FP/MCH is to improve staff video production capabilities through training and limited procurement

of equipment. A national television station is scheduled to begin broadcasting in spring/summer 1986, first in the Kathmandu Valley and later in other areas. The IEC Division would like to produce a series of programs, perhaps supported by other media, focussing on FP/MCH issues. One project idea involved creating a dramatic series or Nepali soap opera. Print materials (like comic books or strips), radio segments, and other products (t-shirts, playing cards, etc.) could be coordinated with the TV series but would stand on their own in areas without TV impact. The project might focus on targetting a younger audience, including newlyweds and school age children, with information on population issues and emphasizing the importance of child spacing for health and economic well-being. Temporary FP methods have long been neglected in Nepal, to the extent that many Nepalis equate FP with "operations." This perception can have a strong negative impact on acceptance of FP educators and client interest in other FP programs.

Other possible target audiences for projects include neglected groups such as Moslems, Tharus (a conservative Terai tribe), the military, and the police. The Division of Nursing, with INTRAH, is currently planning training for "sudinis," untrained village midwives. They might be interested in collaborating on materials' development activities to support their training.

In discussions with the FP/MCH Training Division, it was learned that supplies of the health worker (PBHW) manual, used in trainings and given to trainees, were exhausted. The last edition of the manual had many weaknesses, and required textual revision and better drawings. While a Training Division staff member had spent some time revising the text, the work had only begun. The IEC Division has developed a chapter for the manual on communication skills and methods but only has funding to print

the chapter. Training has no money for publishing a new edition. If a funding source could be identified, a short workshop involving the IEC and Training Divisions of both FP/MCH and ICHSDP might be organized to review and standardize curricula. New artwork could be produced by the IEC Division and at least 4,000 to 5,000 copies of the manual (with the IEC chapter) printed for distribution to health workers. The Training Division was very interested to learn about the JHU/PCS African Prototype Material Project's health worker's manual and felt that something in that vein, with both FP and MCH material, would be very useful to clinic and field staff.

FP/MCH staff also inquired whether JHU/PCS could help with printing sufficient copies of the pill, condom, and motivational booklets and ORS card for national distribution.

V. CONCLUSIONS

A review of the IEC Division distribution records for the pill and condom booklets shows that the majority of booklet stocks are in regional offices and training centers and that over 17,000 copies are in fieldworker or client hands. Based on the positive reactions of FPOs and TOs to the booklets, successful distribution should continue as long as supplies last. It is difficult to say how the booklets have been used by health workers--whether PBHWS meet with clients as specified in their job descriptions, whether they take contraceptive supplies and booklets with them on their rounds, and whether they find the booklets make their jobs easier and/or more satisfying. The field observations of the January consultancy were quite encouraging on some of these points; the September evaluation will provide more information.

It was disturbing that though the Training Division central staff had seen the two booklets, they did not have stocks in their offices (a different building than that housing the IEC Division), nor had the booklets been adequately presented during the new TO training. This may be due to the fact that no IEC Division trainings of central Training staff had been conducted (these were done in the three regional training centers, where the majority of health workers are trained). The fact that trained health workers no longer study from nor receive the out-of-print PBHW manual emphasizes the need to supply fieldworkers with the materials at hand. During the consultancy, the IEC and Training Divisions collaborated extensively and the trainers seemed ready to incorporate the booklets as standard training curricula. However, this effort may be thwarted if booklet stocks are soon depleted.

FP/MCH's plans for allocating the excess rupees gained through favorable exchange rates (estimated at Rs. 144,837) are reasonable. In addition to supporting training and evaluation activities, the funds will be used to produce a support material on aseptic procedures in clinics and sterilization camps, and revise, test, and reprint the pill and condom booklets. Remaining project funds will not cover the production of sufficient booklets for national distribution, however.

FPO and TO reactions to the motivational booklet and ORS card (prototype) were favorable. A small-scale printing (5,000 copies) of the former has been carried out; the remaining copies will be printed following minor revisions in text and drawings. The laminated ORS card will soon be produced in Bangkok (much cheaper than printing and laminating in Kathmandu) and should be available for autumn and winter trainings.

Dr. Khatri and the IEC Division are very pleased with the outcome of the current project and hope for further collaboration with JHU/PCS in the future. They are anxious to discuss a number of project ideas with a JHU/PCS representative prior to the close of the current project.

VI. RECOMMENDATIONS

The consultant recommends that JHU/PCS:

- 1) Communicate with FP/MCH as soon as possible regarding authorization for printing 30,000 copies of the ORS card in Bangkok. Arrangements for payment in dollars should be made directly with VISCOM, Ltd., the Thai printer.
- 2) Urge the IEC Division to continue to work as closely as possible with the Training Division in all materials' development activities to facilitate distribution and use of the materials.
- 3) Provide technical assistance to the IEC Division for the evaluation of the pill and condom booklets, as requested.
- 4) Discuss possible future collaboration with FP/MCH. If possible, a PCS staff person should respond to Dr. Khatri and his staff's suggestions prior to the planned September evaluation consultancy.
- 5) Work to identify possible sources of funding for reprinting the materials, including discussing the problem of low supplies with representatives of UNFPA and USAID. Reprinting should take place after materials have been carefully evaluated but prior to exhaustion of all supplies.

VII. CONTACT LIST

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APPENDIX A
REVISED PROJECT WORKPLAN

Revised Workplan - AS-NEP-01 July 30, 1985

- PC = Pill/Condom Booklets
- M = Motivational Booklet
- ORS = ORS Instructional Card
- AP = Aseptic Procedures Card

Aug 1

- PC - Continue training and distribution to PBHWS
- M - Continue training and distribution, Print remaining 25,000 copies.
- ORS - Print
- AP - Prepare text and submit to JHU/PCS for approval

Aug. 16 - 31

- PC - Continue and distribution
Prepare for evaluation activities
- M - Print
- ORS - Print
- AP - Print pending JHU/PCS approval

Sept. 1 - 14

- PC - Make final evaluation preparations
(Request JHU/PCS consultancy)
- M - Print
- ORS - Print
- AP - Print

Sept. 15 - 30

- Pc - Evaluate in field and analyse results
Revise booklets, handouts, training and distribution systems as
necessary.
Plan pretesting of revised booklets.
- M - Print
- ORS - Print
- AP Print

.../..

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SUBMIT QUARTERLY REPORTS

Oct. 1 - 15

(Pending JHU/PCS approval of no-cost extension through Nov 30, 1985).

- PC - Conduct pretests of revised booklets.
Plan reprinting.
Submit revised versions to JHU/PCS for approval.
- M - Train and distribute
- ORS - Train and distribute
- AP - Train and distribute

Oct. 16 - 31

- PC - Reprint, (pending JHU/PCS approval)
- M - Distribute
- ORS - Distribute
- AP - Distribute

Nov. 1 - 30

- PC - Reprint and distribute
- M - Distribute
- ORS - Distribute
- AP - Distribute

SUBMIT FINAL REPORT

APPENDIX B
DRAFT RESEARCH PROTOCOL AND EVALUATION QUESTIONNAIRES

Nepal Pill and Condom Booklet Evaluation - Protocol

- A. Four evaluation areas: Hill - booklet use area
 Terai - booklet use area
 Hill - no booklet use (control)
 Terai - no booklet use (control)
- B. In each area, interview: 16 health workers (total 64)
 20 clients (total 80)
 Family Planning Officers and Regional Training
 Officers (booklet use areas only)
- C. Conduct evaluation at beginning of Nepali month (middle of Western
 month) when health workers come to centers for their salaries.

Number of Respondents in Each Evaluation Area by Role (health worker or
 client) and by Whether Asked about Pills or Condoms

		Booklet Used HILL	Booklet Used TERAI	Control HILL	Control TERAI	TOTAL
HEALTH WORKERS	Pill	8	8	8	8	64
	Condom	8	8	8	8	
CLIENTS	Pill	10	10	10	10	80
	Condom	10	10	10	10	
		36	36	36	36	144

D. Tentative schedule of activities:

- Sept. 9 - 13 Evaluator training and preparation for field
 Sept. 14 - 29 Field activities
 Sept. 30 - Oct. 9 Data analysis

23

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR HEALTH WORKERS ABOUT _____ BOOKLET

Note: Write name of booklet (pill or condom) in space above. This questionnaire is for booklet use areas only.

Introduction

We would like to learn more about the working conditions of health workers like you. Please help us by answering the following questions. All of your answers will be kept confidential. Your name will not be attached to this form. Thank you for your help.

1) In the last three months, how many times have you talked to men or women about using condoms (pills)?
_____ times

2) How many of the clients agreed to try using condoms (pills)?
_____ clients

3) When you talk to clients about condoms (pills), do you use anything to help you explain about them?
_____ Yes _____ No (go to 5)

4) What do you use? (check appropriate answers)
_____ condom (pill) packets
_____ condom (pill) booklets
_____ other (write in) _____

5) Have you ever seen this booklet before? (show condom or pill booklet cover)
_____ Yes _____ No (interview different health worker)

6) Where did you first see the booklet? _____

7) Have you ever used this booklet to explain about the condom (pill)?
_____ Yes _____ No (go to 9)

8) How many times have you used the booklet in the last three months?
_____ times

9) Why do you (or don't you) use the booklet? _____

10) Did you give copies of the booklet to the clients?
_____ Yes _____ No (go to 12)

11) How many copies have you given to clients in the last ^{three} months?
_____ copies (go to 13)

12) Why didn't you give copies of the booklet to the clients? _____

13) Were you ever trained to use the booklet?
_____ Yes _____ No

14) Have you ever received any other information that goes with the booklet
(a handout)?
_____ Yes _____ No

15) How many copies of the booklet do you have now (at home or with you)?
_____ copies

16) If you want more copies, how can you get them? _____

17) Have you ever asked for more copies?
_____ Yes _____ No (go to 20)

18) Did you receive them?
_____ Yes _____ No

19) Did you ever receive any forms to fill out in relation to the booklet?
_____ Yes _____ No (go to 23)

23

20) What were the forms for? _____

21) Did you ever use the forms?
_____ Yes _____ No

Now I would like you to explain the booklet to this client, just as you would you were normally doing your job.

22) Note: For each booklet page number listed below, write in any errors the health worker made in explaining the page. The condom booklet only has 15 pages so you will not need to use spaces 16 to 19 when interviewing about condoms.

- Cover (page 1) _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
- 14 _____
- 15 _____
- 16 _____
- 17 _____
- 18 _____
- 19 _____

26

23) After the health worker has used the booklet, check which of the following he or she did correctly.

- explained booklet messages page by page
- held booklet so client could see it clearly
- pointed at pictures, not at words
- asked whether client had any questions
- included additional information from handout

24) Are there any booklet pages which some clients find it hard to understand?
 Yes No (go to 26)

25) Which pages? _____

26) If we print this booklet again, what should we do to make it better?

27) Do you think that we should print more copies of this booklet?
 Yes No

28) Do you think that we should make booklets like this on other topics?
 Yes No (go to 30)

29) Which topics? _____

30) Would you like some more copies of this booklet?
 Yes (give booklets) No

Thank you for your help.

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR CONTROL AREA HEALTH WORKERS ABOUT CONDOMS

Introduction

We would like to learn more about the working conditions of health workers like you. Please help us by answering the following questions. All of your answers will be kept confidential. Your name will not be attached to this form. Thank you for your help.

1) In the last three months, how many times have you talked to men or women about using condoms?
_____ times

2) How many of the clients agreed to try using condoms?
_____ clients

3) When you talk to clients about condoms, do you use anything to help you explain about them?
_____ Yes _____ No (go to 5)

4) What do you use? (check appropriate answers)
_____ condom packets
_____ other (write in) _____

5) Have you ever seen this booklet before? (show condom booklet cover)
_____ Yes (interview different health worker) _____ No

Now I would like you to explain about condoms to this client. Please explain just as you would if you were normally doing your job.

6) Note: Check the messages which the health worker correctly states below. Do not check those which he or she does not correctly state to the client.

- _____ the condom is a family planning method for men
- _____ the condom is a temporary family planning method
- _____ use the condom every time that you have sex
- _____ pinch the end of the condom to create a pocket
- _____ carefully roll the condom onto the erect penis
- _____ after sex, hold the end of the condom so that it does not slip off
- _____ dispose of the used condom where no one will find it (or bury it)
- _____ only use a condom once
- _____ if you stop using a condom, you risk pregnancy
- _____ condoms should not be stored in the sun or in hot places
- _____ condoms are available at health posts, pharmacies, and from health workers
- _____ wait several years after the birth of one child before having another

Note: check below if
_____ health worker asked client whether he/she had any questions

7) (Show booklet cover) This booklet is being used by health workers like you to help explain about condoms in other parts of Nepal. Do you think that having a booklet like this would make your work easier?
_____ Yes _____ No

8) Why (or why not)? _____

9) Would you like a copy of this booklet to take with you?
_____ Yes (give one copy) _____ No

Thank you for your help.

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR CONTROL AREA HEALTH WORKERS ABOUT PILLS

Introduction

We would like to learn more about the working conditions of health workers like you. Please help us by answering the following questions. All of your answers will be kept confidential. Your name will not be attached to this form. Thank you for your help.

1) In the last three months, how many times have you talked to men or women about using pills?

_____ times

2) How many of the clients agreed to try using pills?

_____ clients

3) When you talk to clients about pills, do you use anything to help you explain about them?

_____ Yes _____ No (go to 5)

4) What do you use? (check appropriate answers)

_____ pill packets

_____ other (write in) _____

5) Have you ever seen this booklet before? (show pill booklet cover)

_____ Yes (interview different health worker) _____ No

Now I would like you to explain about pills to this client. Please explain just as you would if you were normally doing your job.

6) Note: Check the messages which the health worker correctly states below. Do not check those which he or she does not correctly state to the client.

- _____ pills are a family planning method for women
- _____ pills are a temporary family planning method
- _____ take one pill each day
- _____ take the first pill on the fifth day of your period
- _____ take all of the pills in the packet, including the brown ones
- _____ when you have finished one packet, begin another packet immediately
- _____ you may experience nausea, headache, or spotting during the first three months of pill use
- _____ you will be able to work even if you experience pill side effects
- _____ pill side effects usually pass within three months
- _____ if you forget to take a pill one day, take it as soon as you remember the next day. Take that day's pill at the normal time.

- _____ if you forget to take pills two or more days in a row, continue taking them as usual, but use another method until your next period.
- _____ take pills even if your husband goes away for a short period
- _____ if you stop using pills, you risk pregnancy
- _____ pills are available at health posts, pharmacies, and from health workers
- _____ wait several years after the birth of one child before having another

Note: check below if

_____ health worker asked client whether he/she had any questions

7) (Show booklet cover) This booklet is being used by health workers like you to help explain about pills in other parts of Nepal. Do you think that having a booklet like this would make your work easier?

_____ Yes _____ No

8) Why (or why not)? _____

9) Would you like a copy of this booklet to take with you?

_____ Yes (give one copy) _____ No

Thank you for your help.

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR CLIENTS ABOUT THE CONDOM BOOKLET

Introduction

We would like to learn more about what people think about condoms. Please help us by answering the following questions. All of your answers will be kept confidential. Your name will not be attached to this form. Thank you for your help.

1) In the last three months, have you talked to a health worker about condoms?
_____ Yes _____ No (go to 3)

2) When you talked to the health worker, did he or she use any of the following to help explain about them? (check appropriate answers)

_____ condom packets

_____ condom booklet

_____ other (write in) _____

3) Have you ever seen this booklet before? (show condom booklet cover)
_____ Yes _____ No (interview different client)

4) Where did you see the booklet? _____

5) Was the booklet explained to you?
_____ Yes _____ No

6) Were you given a copy of the booklet?
_____ Yes _____ No (go to 13)

7) Do you have a copy of the booklet in your home now? Show us your copy, please.
_____ Yes _____ No

8) Have you looked at the booklet since it was given to you?
_____ Yes _____ No (go to 13)

9) Why did you look at it? _____

10) Have you ever shown it to other people?
_____ Yes _____ No (go to 13)

11) How many other people have you shown it to?
_____ people

12) Why have you (haven't you) shown it to other people? _____

13) Have you used condoms within the last month?
_____ Yes _____ No

14) What is the condom used for? _____

15) When should you use the condom? _____

16) How should you use the condom? _____

17) What should you do with the condom after using it? _____

18) How many times should you use a condom? _____

19) If you stop using condoms, what might happen? _____

20) Where should you store condoms? _____

21) Where can you get condoms? _____

22) How long should you wait after the birth of one child before having another?

Note: Give respondent a copy of the condom booklet with the text removed.

Now please look at this booklet. Please explain each page of it to me as you remember it.

23) For each booklet page number listed below, write in any _____ the respondent made in explaining the page.

- Cover (page 1) _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
- 14 _____
- 15 _____

24) Should we continue to use this booklet when we explain about the condom?
_____ Yes _____ No

25) Why (or why not)? _____

26) When we print more of these booklets, what should we change? _____

Thank you for your help.

9/2

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR CONTROL CLIENTS ABOUT THE CONDOMS

Introduction

We would like to learn more about what people think about condoms. Please help us by answering the following questions. All of your answers will be kept confidential. Your name will not be attached to this form. Thank you for your help.

1) In the last three months, have you talked to a health worker about condoms?
_____ Yes _____ No (interview different client)

2) When you talked to the health worker, did he or she use any of the following to help explain about them? (check appropriate answers)

_____ condom packets
_____ other (write in) _____

3) Have you ever seen this booklet before? (show condom booklet cover)
_____ Yes (interview different client) _____ No

4) Have you used condoms within the last month?
_____ Yes _____ No

5) What is the condom used for? _____

6) When should you use the condom? _____

7) How should you use the condom? _____

8) What should you do with the condom after using it? _____

9) How many times should you use a condom? _____

10) If you stop using condoms, what might happen? _____

11) Where should you store condoms? _____

12) Where can you get condoms? _____

13) How long should you wait after the birth of one child before having another?

Thank you for your help.

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR CLIENTS ABOUT THE PILL BOOKLET

Introduction

We would like to learn more about what people think about pills. Please help us by answering the following questions. All of your answers will be kept confidential. Your name will not be attached to this form. Thank you for your help.

1) In the last three months, have you talked to a health worker about pills?
_____ Yes _____ No (go to 3)

2) When you talked to the health worker, did he or she use any of the following to help explain about them? (check appropriate answers)

_____ pill packets

_____ pill booklet

_____ other (write in) _____

3) Have you ever seen this booklet before? (show pill booklet cover)
_____ Yes _____ No (interview different client)

4) Where did you see the booklet? _____

5) Was the booklet explained to you?
_____ Yes _____ No

6) Were you given a copy of the booklet?
_____ Yes _____ No (go to 13)

7) Do you have a copy of the booklet in your home now? Show us your copy, please.
_____ Yes _____ No

8) Have you looked at the booklet since it was given to you?
_____ Yes _____ No (go to 13)

9) Why did you look at it? _____

10) Have you ever shown it to other people?
_____ Yes _____ No (go to 13)

11) How many other people have you shown it to?
_____ people

12) Why have you (haven't you) shown it to other people? _____

13) Have you used pills within the last month?
_____ Yes _____ No

14) What are pills used for? _____

15) How often should you take pills? _____

16) When should you take your first pill? _____

17) Is it important to take the brown pills? _____

18) When you finish a packet of pills, what should you do? _____

19) What side effects do some women experience when they take pills? _____

20) How long do the side effects usually last? _____

21) Are women able to work when they have the side effects?
_____ Yes _____ No

22) What should you do if you forget to take your pill one day? _____

23) What should you do if you forget to take your pill two or more days? _____

24) Is it necessary to continue taking your pills if your husband goes away for a few days?
_____ Yes _____ No

25) If you stop using pills, what might happen? _____

26) Where can you get pills? _____

27) How long should you wait after the birth of one child before having another?

Note: Give respondent a copy of the pill booklet with the text removed.

Now please look at this booklet. Please explain each page of it to me as you remember it.

28) For each booklet page number listed below, write in any errors the respondent made in explaining the page.

Cover (page 1) _____

2 _____

3 _____

4 _____

5 _____

- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
- 14 _____
- 15 _____
- 16 _____
- 17 _____
- 18 _____
- 19 _____

29) Should we continue to use this booklet when we explain about the pill?
_____ Yes _____ No

30) Why (or why not)? _____

31) When we print more of these booklets, what should we change? _____

Thank you for your help.

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR CONTROL CLIENTS ABOUT THE PILL

Introduction

We would like to learn more about what people think about pills. Please help us by answering the following questions. All of your answers will be kept confidential. Your name will not be attached to this form. Thank you for your help.

1) In the last three months, have you talked to a health worker about pills?
_____ Yes _____ No (interview different client)

2) When you talked to the health worker, did he or she use any of the following to help explain about them? (check appropriate answers)

_____ pill packets

_____ other (write in) _____

3) Have you ever seen this booklet before? (show pill booklet cover)
_____ Yes (interview different respondent) _____ No

4) Have you used pills within the last month?
_____ Yes _____ No

5) What are pills used for? _____

6) How often should you take pills? _____

7) When should you take your first pill? _____

8) Is it important to take the brown pills? _____

9) When you finish a packet of pills, what should you do? _____

10) What side effects do some women experience when they take pills? _____

11) How long do the side effects usually last? _____

12) Are women able to work when they have the side effects?
_____ Yes _____ No

13) What should you do if you forget to take your pill one day? _____

14) What should you do if you forget to take your pill two or more days? _____

15) Is it necessary to continue taking your pills if your husband goes away for a few days?
_____ Yes _____ No

16) If you stop using pills, what might happen? _____

17) Where can you get pills? _____

18) How long should you wait after the birth of one child before having another?

Thank you for your help.

Resp. # _____ Area _____ Interviewer _____

QUESTIONNAIRE FOR FAMILY PLANNING OFFICERS AND REGIONAL TRAINING OFFICERS ABOUT
PILL AND CONDOM BOOKLETS

Introduction

We are interested in learning whether these booklets have helped your health workers in their jobs. You probably have many useful ideas on this and we would like your help in evaluating the booklets. Please take a few minutes to answer the following questions.

1) Have you ever seen or heard about these booklets before?
_____ Yes _____ No (interview different respondent)

2) Do you have any in your storeroom now?
_____ Yes _____ No

3) Have you ever heard your health workers or trainers make any comments, positive or negative, about the booklets?
_____ Yes _____ No (go to 5)

4) Please tell me what they said about each booklet. _____

5) In your opinion, are the booklets useful to your health workers?
_____ Yes _____ No

6) How are they useful (or not useful)? _____

7) Should we print more of the booklets?

_____ Yes _____ No

8) How could we improve the booklets? _____

9) Do the health workers give copies of the booklets to clients?

_____ Yes _____ No (go to 11)

10) Why or why not? _____

11) Have your health workers been trained to use the booklets?

_____ Yes _____ No

12) If you need more copies of the booklets, where can you get them? _____

13) Have you ever ordered more copies?

_____ Yes _____ No (go to 15)

14) Did you receive them?

_____ Yes _____ No

15) Has someone been keeping records of how many booklets have been distributed from this office and to whom?

_____ Yes _____ No

(if yes) Please let us see the records. (Copy information for IEC Division files.)

Thank you for your help.

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APPENDIX C

MOTIVATIONAL BOOKLET AND TRANSLATION

TRAINING HANDOUT: HOW TO USE "THE HAPPY FAMILY" BOOKLET

Translation of "The Happy Family" Booklet

Cover: "The Happy Family"

Page 1: Ram and Shyam both got married in the month of Phagun.

2: One year later, Ram's wife, Suntaali, and Shyam's wife, Maaina, both had babies.

3: One day a family planning worker came to the village. Ram was interested in what he had to say. But Shyam argued with him and sent him away.

4: Following the family planning worker's advice, Ram and Suntaali waited three years before having another baby. But Shyam and Maaina had babies every year and have a big family. There is no peace in Shyam's house.

5: Because she only has two children, Suntaali always finishes her work and has free time. But since Maaina has many children, she is continually working.

6: Ram's children go to school every day but Shyam's children play in the dirt all day.

7: Because they have few children, there is enough space to sleep in Ram's house. There isn't enough space in Shyam's house.

8: Ram only has one son so he will inherit all of Ram's fields. Shyam must divide his fields among his four sons.

9: Ram's son has large fields to farm. Shyam's sons have smaller fields to work.

10: Seeing Ram's happy life, Shyam and Maaina come to him for advice. Ram explains the problems that result from overpopulation.

11: If there are many people in the village, the forest disappears and landslides result.

12: If there are too many people, there will not be enough water or food.

13: The village will be dirty and many people will become ill. It will be difficult to get medical care.

14: Showing Shyam the family planning logo, Ram suggests he go to the FP office for help in planning his family.

15: If you never want any more children, you can have an operation (permanent method). If you wish to wait a few years before having another child, there are temporary methods for both men and women (condoms, pills, depo, and loop) which are available.

16: Temporary methods are available in health posts and shops. A family planning worker will also come to your home to deliver these methods.

17: In Nepal, many people use different family planning methods.

How to Use "The Happy Family" Booklet

Important Information for Health Workers

"The Happy Family" booklet tells the story of Ram and his wife Suntaali, and Shyam and his wife Maaina. Ram uses family planning and his family is happy and healthy. Because Shyam and Maaina have a baby every year, they have many problems.

1. Why was this booklet prepared?

When you talk with your clients, this booklet will help you explain why many Nepalis use family planning methods. Sometimes people do not understand what we mean when we say "family planning." Many people think that family planning only means using permanent family planning methods or "operations." But this is not true. It is very important that you explain to clients about the advantages of child spacing using temporary family planning methods like condoms and pills.

2. When should I use the booklet?

This booklet is for you to use every time you teach people about family planning. After you use the booklet to explain what family planning means and why people do it, you can go on to teach about the different temporary and permanent methods which are available.

3. How can use of the booklet help me?

Use of the booklet can make your job easier. Showing the pictures while you tell the story of Ram and Shyam will help your client to understand.

When using the booklet, GO THROUGH EACH PAGE, ONE BY ONE, WITH THE CLIENT.

You can discuss any messages that are unclear in greater detail.

When you explain a message, POINT TO THE PICTURE AS YOU TALK. Do not point to the words at the bottom of the page. The client will remember what the pictures mean, even if they cannot read the words.

After you have finished explaining the booklet, GIVE THE BOOKLET TO YOUR CLIENT TO TAKE HOME. In this way the client can show the booklet to other people and help them understand family planning too.

ASK WHETHER THE CLIENT HAS ANY QUESTIONS. While you are explaining the booklet, watch your client carefully. If he or she looks confused or worried, find out what the client is thinking. In this way you can be sure that your teaching is effective and that your client understands all of the material.

4. What other important information should I give my client?

Many clients do not understand the importance of child spacing in helping mothers and babies to be more healthy. If a woman has a baby every year, she becomes weak. Because she is weak, her baby will be weak too. If a baby is born less than two years after the last baby, it is ten times more likely that the new baby will die within one year!

EXPLAIN HOW CHILD SPACING (WAITING TWO OR THREE YEARS BETWEEN PREGNANCIES) WILL HELP BABIES AND THEIR MOTHERS TO BE STRONGER AND HEALTHIER.

5. What should I do before leaving the client?

- Explain what child spacing means and tell the client about temporary family planning methods (condom, pill, IUD, Depo-Provera) and permanent family planning methods (vasectomy, mini-lap).
- Ask if the client has any questions.
- Give the client a copy of the booklet to take home.
- Suggest that the booklet be shared with friends.

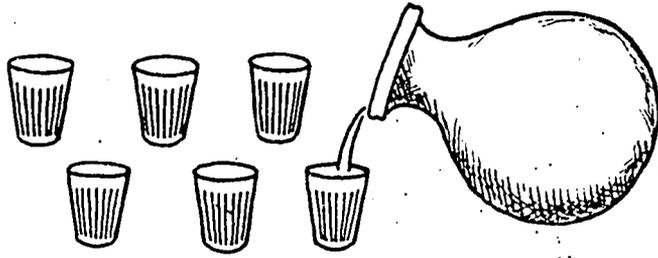
APPENDIX D

ORS CARD FINAL ARTWORK AND TRANSLATION

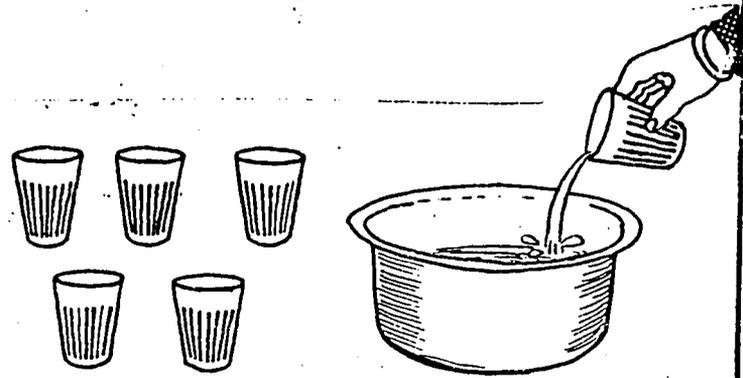
TRAINING HANDOUT: HOW TO USE THE JEEVAN JAL/AUSHAADI PAANI CARD

लागेको बच्चालाई मृत्युबाट जोगाउन प्रशस्त पानी र विशेष गरी जीवन जल खाउनुहोस्। जीवन जलले बच्चालाई केही घण्टामै स्वस्थ बनाउँछ र उसको भोक पनि जगाउँछ।

१. सबभन्दा पहिले एक लिटर अथवा दुई माना अथवा चिया खाने गिलासको ६ गिलासभरी सफा खानेपानी नाप्नुस्।

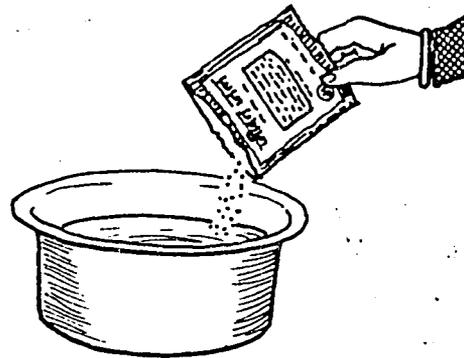


२. एउटा सफा भाँडोमा नापेको सबै पानी हाल्नुहोस्।

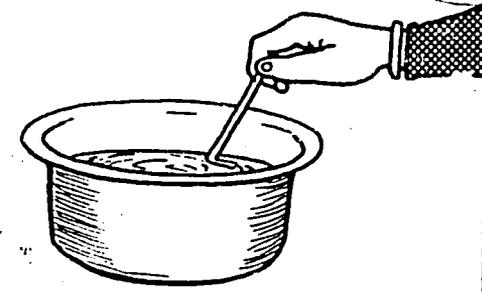


३. जीवन जलको पुरियालाई केँची वा चक्कले काटेर खोल्नुहोस्। जीवन जल कुनै पनि स्वास्थ्य चौकी वा पसलमा पाइन्छ।

४. त्यसपछि पानीमा त्यो जीवन जलको पुरियामा भएको सबै औषधी खन्याउनुहोस्।



५. त्यो पानीलाई औषधी नबिलाउन्जेलसम्म चम्चाले चलाउनुहोस्। औषधी हालिसकेपछि पानीलाई तताउनु हुँदैन।



६. अब पखाला लागेको बच्चालाई अलि अलि गरेर सफा गिलास वा चम्चाले जीवन जल खाइरहनुहोस्। यदि उसले खान मानेन वा बान्ता गन्यो भने एक छिन आराम गर्न दिएर फेरि विस्तारै खाउनुहोस्।

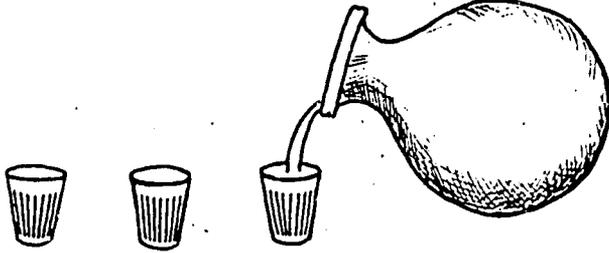


७. बच्चालाई जीवन जलका साथै दूध र अरू नरम खाने कुराहरू पनि खाउँदै गर्नुहोस्। जीवन जलको एउटा पुरिया घरमा सधैं राख्नुहोस्। जसले गर्दा बच्चालाई जुनसुकै बेला पखाला लागे पनि तपाईंलाई अफठघारो पर्नेछैन।

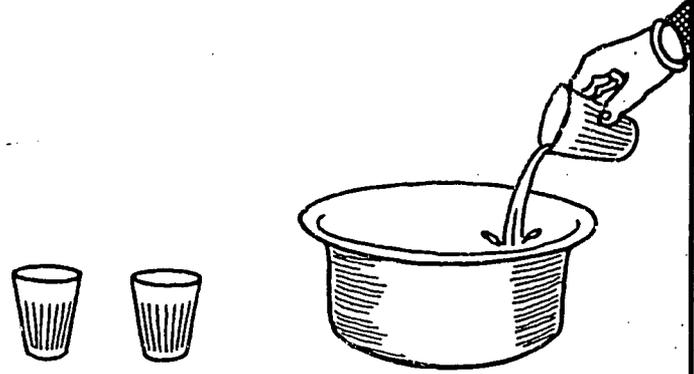


बच्चाहरूलाई पखाला लाग्दा तिनीहरूको शरीरबाट धेरै पानी निस्कन्छ जसले गर्दा तिनीहरू कमजोर हुन्छन् र नन पान सक्दछन्। पखाला लागेको बच्चालाई मृत्युबाट जोगाउन प्रशस्त पानी र विशेष गरी जीवन जल अथवा त्यो नपाएमा औषधि पानी खाउनुहोस्। जीवन जल जस्तै औषधि पानीले पनि बच्चालाई केही घण्टामै स्वस्थ बनाउँछ र उसको भोक पनि जगाउँछ। औषधि पानी घरमै बनाउन सकिन्छ।

१. सबभन्दा पहिले आधा लिटर अथवा एक माना अथवा चिया खाने गिलासको तीन गिलासभरी सफा खाने पानी नानुस।



२. एउटा सफा भाँडोमा नापेको सबै पानी हाल्नुहोस्।



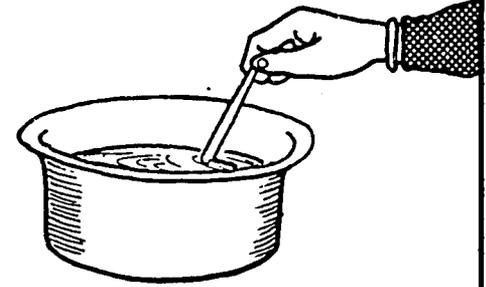
३. पानीमा आधा पसार (एकमुठी) चिनी वा सखर हाल्नुहोस्।



४. पानीमा एक चिम्टी (तीन औंलाको) नून हाल्नुहोस्।



५. त्यो पानीलाई चिनी र नून नबिलाउन्जेलसम्म चम्चाले चलाउनुहोस्। चिनी र नून हाली सकेपछि पानीलाई तताउनु हुँदैन।



६. अब पखाला लागेको बच्चालाई अलि अलि गरेर सफा गिलास वा चम्चाले औषधि पानी खाउनुहोस्। यदि उसले खान मानेन वा बान्ता गन्यो भने एक छिन आराम गर्न दिएर फेरि विस्तारै खाउनुहोस्।



७. बच्चालाई औषधि पानीका साथै दूध र अरू नरम खानेकुराहरू पनि खाउँदै गर्नुहोस्। जुनसुकै बेला बच्चालाई पखाला लागे पनि औषधि पानी बनाएर खाउनुहोस्।



Translation of ORS Packet (Jeevan Jal) Instructions

How to Prepare Jeevan Jal

Top Panel: When babies have diarrhea, they lose a lot of water from their bodies. Because of this they become weak and can die. To prevent these babies from dying, they should be given a lot of water, especially Jeevan Jal. Jeevan Jal will make baby feel better and s/he will have an improved appetite.

2nd Panel: 1. First fill two manas or one liter or six tea glasses with clean drinking water.

3rd Panel: 2. Pour the water into a clean container.

4th Panel: 3. Open the Jeevan Jal packet with scissors or a knife. You can get Jeevan Jal at a health center or store.

5th Panel: 4. Pour all of the powder from the packet into the water.

6th Panel: 5. Stir the mixture until all of the powder is dissolved. Do not cook the mixture.

7th Panel: 6. Feed the mixture to the child with a clean glass or spoon. If s/he will not take it or vomits, let her/him rest a moment and begin feeding again slowly.

8th Panel: 7. Give baby Jeevan Jal and give milk and other foods baby normally eats. Whenever s/he gets diarrhea, give baby Jeevan Jal. Always keep an extra Jeevan Jal packet at home. Then it will not be difficult for you when baby gets diarrhea.

Translation of ORS Home Remedy Instructions

How to Prepare "Medicine Water"

Top Panel: If no Jeevan Jal is available, babies with diarrhea should be given Medicine Water. When babies have diarrhea, they lose a lot of water. Because of this they become weak and can die. These babies should be given a lot of water, especially Medicine Water. Like Jeevan Jal, Medicine Water will help make babies with diarrhea feel better and improve their appetite. You can make Medicine Water in your house.

2nd Panel: 1. First fill one-half liter or one mana or three full tea glasses with clean drinking water.

3rd Panel: 2. Pour the water into a clean container.

4th Panel: 3. Add one-half pasar (one muti) of sugar or molasses to the water.

5th Panel: 4. Add a pinch (three-finger pinch) of salt to the water.

6th Panel: 5. Stir the mixture until all of the sugar and salt are dissolved. Do not cook the mixture.

7th Panel: 6. Feed the Medicine Water to the child with a clean glass or spoon. If s/he will not take it or vomits, let her/him rest a moment and begin feeding again slowly.

8th Panel: Give baby Medicine Water and give milk and other foods baby normally eats. Whenever s/he gets diarrhea, give baby Medicine Water.

How to Use the Jeevan Jal/Aushaadi Paani Card
Important Information for Health Workers

1. Why was this card prepared?

When you teach your clients how to make Jeevan Jal or Aushaadi Paani, this card will help you. It can make your job easier because it will be easier for your client to understand and remember the information.

2. When and how should I use the card?

Use the card every time you teach people about Jeevan Jal and Aushaadi Paani.

When using the card, DISCUSS EVERY PICTURE WITH THE CLIENT AND POINT AT THE PICTURE AS YOU TALK ABOUT IT. Because the card has only one page of information, many important ideas are not included. EXPLAIN THE ADDITIONAL INFORMATION INCLUDED ON THIS HANDOUT CAREFULLY.

After you have finished explaining the card, GIVE THE CARD TO YOUR CLIENT TO TAKE HOME. In this way clients can display the card in their homes, use it for reference, and explain it to other people too.

ASK WHETHER THE CLIENT HAS ANY QUESTIONS. While you are explaining the card, watch your client carefully. If he or she looks confused or worried, find out what the client is thinking. In this way you can be sure that your teaching is effective and that your client understands all of the material.

3. What other important information should I give my client?

The card only explains how to mix Jeevan Jal and Aushaadi Paani. It does not tell why mothers should give them to sick babies. It is important for

you to explain this and other information.

Why should parents use Jeevan Jal or Aushaadi Paani?

When babies have diarrhea or vomit, they lose much water from their bodies. In the water they also lose important chemicals called "salts." Jeevan Jal and Aushaadi Paani contain water and salts. Jeevan Jal and Aushaadi Paani are also called "ORS" (Oral Rehydration Solution).

If a plant does not get water, it dries up and dies. This is also true of people, especially babies. Many mothers believe that when their babies have diarrhea, that it is best to withhold water. BUT THIS IS NOT TRUE! If the baby does not get water and salts, it becomes weaker and weaker, and often dies. Every year thousands of babies die this way in Nepal.

How will giving ORS help?

When mothers give their babies ORS (Jeevan Jal or Aushaadi Paani), the babies become stronger. Their bodies are able to fight disease better. They do not die from drying out (dehydration). ORS helps save babies' lives. Soon after giving ORS, babies who were not eating become hungry again. This shows mothers that the ORS is helping.

ORS will not stop diarrhea, however. In fact, giving ORS sometimes makes diarrhea increase. This does not hurt the baby. But not giving ORS can kill the baby.

What is the difference between Jeevan Jal and Aushaadi Paani?

They are very similar. Jeevan Jal is easier to use because the mother only has to measure water, not salt and sugar. Jeevan Jal also has some extra ingredients to help baby. But both Jeevan Jal and Aushaadi Paani can

help save a sick baby's life.

When a mother mixes Jeevan Jal, she makes one liter (six full tea glasses). When she mixes Aushaadi Paani, she makes only one-half liter (three full tea glasses). Be sure mothers understand this difference. If all of the Jeevan Jal or Aushaadi Paani is not used within 24 hours after mixing, the mother should throw the old mixture out and make fresh ORS.

How often should mothers give ORS to sick babies?

Mothers should give their babies as much ORS as the baby will take. Sometimes when babies are very sick and almost dried out, it is hard for them to drink. They should be fed slowly from a spoon or a glass. If they vomit, the mother should wait a little while and try again.

Every time baby has a watery stool or vomits, the mother should give ORS. If the baby is less than one year old, she should give one-half of a tea glass each time. If the baby is older, she should give a full tea glass.

What else should mothers do to help their babies with diarrhea?

If the baby normally breastfeeds, the mother should alternate giving ORS with breastfeeding. If the baby eats other foods, the mother should give them along with the ORS.

APPENDIX E
TRAINING AND ORIENTATION SCHEDULES
TO TRAINING
FPO AND TO IEC WORKSHOP

TO Training Schedule--24 July, 1985

Training Division--Teku, Kathmandu

A.M. How to use visual aids--Navin Pyakuryal, Yadav Bhetwal, Gyanu Shrestha,
M. N. Pyakuryal

1. Why are visual aids important?
 - Can be used with illiterate groups
 - Will increase interest
 - Make it easier to understand and remember

2. How can visual aids make the health worker's job easier?
 - They give credibility
 - It is easier to explain things

3. How should visual aids be used?
 - With groups or individuals
 - Point at pictures, not at words
 - Explain each message carefully
 - Watch to see if clients appear confused or worried; find out what questions they have

4. Briefly demonstrate use of booklet.

5. Condom and Pill Booklets
 - Explain condom booklet and handout
 - Explain pill booklet and handout
 - Practice using booklets in small groups
 - Distribute booklets and handouts

P.M. Motivation of Clients--Navin Pyakuryal

1. How to motivate clients
2. Demonstrate use of motivational booklet and handout
3. Distribute motivational booklet and handout
4. Demonstrate use of ORS card and handout
5. Distribute ORS card and handout
6. Trainee role-play "motivating clients"

KATHMANDU

DATE & DURATION : 04/2/20-21 (2 days)
VENUE : Training Division, Teku, Kathmandu
PARTICIPANTS : Training Officers

OBJECTIVE:

To improve the knowledge & skills of Trainers in conducting training on effective utilization of IEC Kit for Health Workers. At the end of the seminar the participants will be able to:-

- be familiar with all the message of the materials
- effectively train the Health Workers on the use of the materials
- develop a curriculum for the Health Workers' training.

SCHEDULE

FIRST DAY : 04/2 SHRAWAN 20 SUNDAY

<u>TIME:</u>	<u>ACTIVITY</u>
10.30 - 11.00	<ul style="list-style-type: none">- Name Registration- Introduction- Objective of the Seminar
11.00 - 12.00	<ul style="list-style-type: none">- Need & importance of visual materials- Material development programs in IEC- The process of material development- Objective, users and audience- Importance of Training Officers for the effective utilization of the materials.
12.00 - 12.30	<ul style="list-style-type: none">- RTOs' experience regarding the training & use of the pictorial materials.
12.30 - 13.00	<p><u>How to use the materials:-</u></p> <ul style="list-style-type: none">- The Kit bag- Posters (4 types)- Flip Charts (2 types)- Cloth Charts (3 types)

13.00 - 13.45

- Stickers

- Review all the messages of Flip Charts,
Posters & Cloth Charts.

13.45 - 14.30

TEA BREAK

14.30 - 15.15

Role play by the IEC staff on the use of FP-
flipcharts and related posters/clothcharts
booklets

15.15 - 16.30

Role play on the use of materials by the
participants in sub groups of five members,
switching roles.

16.15 - 16.45

Review

SECOND DAY: 042 SHRAWAN 21 MONDAY

<u>TIME</u>	<u>ACTIVITY</u>
10.30 - 11.00	- Discussion on Pill & Condom booklets
11.00 - 11.30	- Review the messages of the ' Happy Family ' booklet and the ORS laminated card
11.30 - 12.00	Role play by the IEC staff on the use of the booklet and card
12.45 - 13.30	- Reporting and Recording - Monitoring & resupply
13.30 - 14.15	<u>TEA BREAK</u>
14.15 - 15.00	- Review & discuss on the curriculum for the Health Workers.
15.00 - 15.30	Develop and finalize the curriculum
15.30 - 16.00	Participants' suggestions for future programs
16.00 - 16.30	Review & closing.