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TRIP REPORT
HONDURAS COUNTRY PROJECT MONITORING

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EXECUTIVE SUMMARY

The Johns Hopkins University/Population Communication Services (JHU/PCS) Regional Program Coordinator, Patrick L. Coleman, visited Honduras from January 6-11, 1986. The scope of work included: 1) assessing the progress of the current JHU/PCS-sponsored projects with the Honduran Family Planning Association (ASHONPLAFA), the Honduran Social Security Institute (IHSS) and the Ministry of Health (MOH); 2) discussing future project possibilities with ASHONPLAFA and IHSS; and 3) discussing with Agency for International Development/Honduras (AID/Honduras) officials future involvement by JHU/PCS in Honduras.

ASHONPLAFA has completed 85 percent of the activities outlined in the original project proposal. A two-month no-cost extension, through April 1986, was given to ASHONPLAFA so that they may complete a flip-chart, client booklets and the final evaluation. It is anticipated that this project will be one of several successful projects sponsored by JHU/PCS in the region.

The Ministry of Health, after an initial slow start, has developed a complete media package of family planning materials. The Ministry uses radio, television, newspapers and interpersonal communication to disseminate family planning messages. The Ministry's Maternal and Child Health Division needs to be more involved in developing a communication strategy and selecting the messages which will be disseminated.

The Honduran Social Security Institute has accomplished approximately 40 to 50 percent of its project goals. A no-cost extension through June 1986 was given to IHSS. IHSS has undergone another personnel change, but it is anticipated that the most recent change will benefit the project, as the original force behind this project has returned from an academic leave and is attempting to revitalize the project. IHSS still needs to complete family planning and communication training of its service personnel, as well as develop the appropriate IEC materials for its beneficiaries.

Both IHSS and ASHONPLAFA requested that JHU/PCS develop new projects with them as continuations of the on-going projects. These requests were supported by the AID Mission and fit in with JHU/PCS regional strategy of

strengthening institutions and providing needed information, education and communication (IEC) in countries where contraceptive usage is very low.

AID fully supports JHU/PCS involvement in Honduran family planning communication programs. The Mission is willing to provide some funding for in-country activities and to cover some JHU core costs for these future activities.

It is recommended that JHU/PCS:

- 1) develop project proposals with ASHONPLAFA and IHSS/San Pedro Sula for expanding family planning communication activities in Honduras;
- 2) work with AID/Honduras to secure funding for these new projects; and
- 3) continue supporting IHSS through technical assistance so that the current project meets its objectives.

INTRODUCTION

The Johns Hopkins University/Population Communication Services (JHU/PCS) Regional Program Coordinator, Patrick L. Coleman, visited Honduras from January 6-11, 1986. The purpose of the trip was to: 1) monitor the development of projects with the Honduran Family Planning Association (ASHONPLAFA), the Honduran Social Security Institute (IHSS) and the Ministry of Health (MOH); 2) discuss new projects with ASHONPLAFA and IHSS; and 3) review with the Population Officer of the Agency for International Development/Honduras (AID/Honduras), the level of future JHU/PCS involvement in Honduras.

ASHONPLAFA

JHU/PCS has supported, for the last two years, a communication program aimed at strengthening ASHONPLAFA's community-based distribution (CBD) program. In late 1985, ASHONPLAFA was given a two-month no-cost extension to complete the pending activities of the project. During this trip, it was determined that ASHONPLAFA will need an additional two-month no-cost extension, through April 30, 1986, to finish the following items: 1) a flip-chart and manual for its use by the CBD promoters and distributors; 2) a booklet based upon the flip-chart for CBD promoters and distributors; 3) a condom booklet for clients; 4) a pill booklet for clients; and 5) the final evaluation.

Drafts of the flip-chart were approved by me during this visit. From the flip-chart, ASHONPLAFA will make the manual and the booklets. It is anticipated that these will be finished and ready to use by the end of February 1986. The final evaluation of the project is scheduled to commence March 1 and be finished, including write-up, in early April.

Several discussions were held with ASHONPLAFA's Executive Director, Alejandro Flores; Program Coordinator, Ramon Sarmiento; Social Communication Director, Lenin Flores; and Communication Assistant, Anibal Melgar. (The IEC Chief, Juanita Martinez, was on vacation during this visit and only a very brief meeting was held with her). During the meetings we talked about how this project has developed, the relationship between the two institutions and whether ASHONPLAFA's expectations were fulfilled. ASHONPLAFA's staff emphasized

their satisfaction in working with JHU/PCS and felt the project had positive and tangible results. ASHONPLAFA reiterated its desire to continue working with JHU/PCS in family planning communication. Don Alejandro emphasized that ASHONPLAFA would continue to utilize Lenin's talents but felt they could be better directed through an additional communication program supported by JHU/PCS. I stated our interest in continuing to work with them, contingent upon available funds and AID/Honduras approval.

ASHONPLAFA developed a tentative pre-project proposal which focused on extending the CBD communication activities currently sponsored by JHU/PCS. ASHONPLAFA would like the new project to start in May of this year so that there are no gaps between the existing project and the new project. ASHONPLAFA has requested approximately \$152,000. for an 18-month project.

During this visit, ASHONPLAFA introduced me to its first Regional Director, Icidoro Enamorado. Icidoro will be the Regional Chief for San Pedro Sula. This is part of the expansion and decentralization of ASHONPLAFA.

MINISTRY OF HEALTH

JHU/PCS is supporting a three-year family planning communication project of the Ministry of Health (MOH). The first year of this project saw almost no movement. During the past year, family planning became institutionalized as training and logistics were improved and family planning communication activities began in mid-October, 1985. The Ministry carries on various communication activities during the course of a year to focus the public's attention on specific health needs, such as oral rehydration, vaccination, water and sanitation, and family planning. The Ministry's strategy has been to sometimes transmit messages on several themes to the public and other times to emphasize one particular theme. I was informed that February 1986, was Family Planning Month for the Ministry of Health. Only family planning messages would be broadcast during this month.

The MOH has developed radio spots, dramas, television spots, posters and newspaper articles to complement its interpersonal communication activities. The Health Education Division, in charge of all media communication activities, works

closely with the Maternal and Child Health Division and the training department of the Ministry to coordinate activities.

The Health Education Division Chief, Dr. Wilfredo Alvarado, was on vacation during this visit; thus, discussions were held with the MOH's radio programmer for family planning, Arturo Diaz. Arturo had worked with the Academy for Educational Development (AED) on its original oral rehydration therapy (ORT) communication program and is well-versed in communication methodology and is, as well, a very talented person. I met him one evening after he had just finished visiting radio and television stations and had acquired substantial discounts for the transmitting of the Ministry's family planning messages. Arturo felt the family planning communication activities were moving forward. He did feel that the Maternal and Child Health Division did not provide enough direction to him on specific themes or priorities and, thus, he was developing the communication strategy on a rather ad hoc basis. On the other hand, this allowed Arturo a great deal of creative leeway, of which he took full advantage in developing media materials.

Arturo requested two activities which would help him in developing family planning IEC materials: 1) an observation visit to Mexico and perhaps JHU to discuss and observe family planning programs; 2) a Central American family planning communication meeting where those who work in the field could also exchange ideas about what has worked and what has not worked in their particular countries. Both of these ideas sound worthwhile. I told Arturo that the observation visit could possibly be financed by JHU/PCS later this year and that the meeting also might be financed by JHU in 1986.

THE HONDURAN SOCIAL SECURITY INSTITUTE

The Honduran Social Security Institute (IHSS) has had a family planning communication project sponsored by JHU/PCS for the last two years. The project attempts to begin the institutionalization process of family planning within IHSS by first informing IHSS staff members, at all levels, about the institution's program. The second stage is to train family planning service delivery personnel and those people who work or interact with potential clients in family planning technology, in interpersonal communication techniques and in the use of audio

visual aids. The project's final stage is to develop IEC materials for use with/by IHSS beneficiaries.

This project has suffered from frequent changes in personnel at all levels. In the two years of the project's existence, there have been four Director Generals, five Medical Service Division Chiefs, and six Project Coordinators. This constant changeover of personnel has added to the chaotic manner in which the project has developed. During this trip, discussions were held with the new Maternal and Child Health Division Chief, who had just returned from a leave of absence to acquire a Masters Degree in Public Health; the head of the Epidemiology Department, where the project is now located; and the new Project Coordinator. From these discussions, it was ascertained that the project could not possibly complete its objectives or planned activities before the end of June. IHSS still has the following activities left to do: 1) complete a baseline study of IHSS beneficiaries; 2) finish communication/family planning workshops for IHSS personnel; 3) develop IEC materials for clients; and 4) conduct a final project evaluation.

In order to complete these activities, several changes were suggested to IHSS. First, the project needs to be extended through June 30, 1986. Next, the Project Coordinator, Victor Rosales, needs to devote a minimum of 50 percent of his time over the next few months to the project or, if possible, 100 percent. The Medical Services Division Chief, Dr. Samuel Dickerman, concurred with these assessments and gave written instruction to the Epidemiology Department Chief, Dr. Elios Sierra, that Victor should be assigned 100 percent to this project and that he be relieved of all other activities, effective immediately (January 10, 1986).

This project has been a pilot endeavor to begin IHSS involvement with family planning. IHSS currently offers limited services and is attempting to improve them through grants provided by external donors, including AID and its cooperating agencies. Dr. Dickerman informed me that family planning is a priority within the institution. The new Director General, expected in mid-February 1986, will meet with the Board of Directors and Division Chiefs to set up institutional priorities. Family planning would be one of them.

Dr. Dickerman (with AID's concurrence) suggested that I visit the IHSS office in San Pedro Sula to determine whether a future project could be developed using San Pedro Sula as the central focus area. San Pedro Sula is considered a more dynamic region of the country, especially within the IHSS organization.

During a visit to IHSS/San Pedro Sula, I spoke with the Hospital Director, Dr. Guillerma Ocano; the Chief of the Gynecology and Obstetrics Department, Dr. Cesar Aboud; Chief of the Obstetrics Department, Dr. Marco Antonio Sosa; the Chief of the Gynecology Department, Dr. Mario Peraza; and an IEC worker, Nurse Doris Milla Rios. They all emphasized their desire to do more work in family planning and felt the current IHSS-JHU/PCS project was not addressing their needs. Interestingly enough, the things they discussed with me as possible activities were very similar to activities which should be covered under the current project sponsored by JHU/PCS with IHSS. They are: 1) interpersonal communication training; 2) contraceptive technology training; 3) preparation and use of audio-visual aids; and 4) IEC materials for beneficiaries. However, all of the IHSS/San Pedro Sula staff emphasized the need to institutionalize and formalize the family planning program within IHSS. No communication activity should be started in isolation, but rather in conjunction with other activities, such as logistics and establishing the infrastructure for treating clients. I concur with this assessment and estimate that between \$75,000 and \$100,000 over a two-year period would be needed to carry out the aforementioned communication activities.

AGENCY FOR INTERNATIONAL DEVELOPMENT

Several meetings were held with the Agency for International Development (AID) Health, Population and Nutrition staff. I was initially briefed by AID/Honduras on its interpretation of the family planning program, its progress and advances, and its perspective on the communication activities sponsored by JHU/PCS. The Health, Population and Nutrition Officer, Tom Park, emphasized that JHU/PCS support for family planning IEC in Honduras had been beneficial in improving the quantity of materials and messages for the different target audiences. Tom emphasized his desire for continued involvement by JHU/PCS in Honduras. He was pleased by the manner in which JHU/PCS has maintained a

constant and professional presence through frequent visits to Honduras, and felt the feedback we had provided both the Mission and the institutions we work with was beneficial.

I expressed our desire to continue working in Honduras, but explained to Tom that any future programs in Honduras would need to be covered by Mission funds. Tom stated that the Mission understood the direction being given by the Office of Population to all centrally-funded contractors, such as JHU/PCS, and that higher priority was being given to non-bilateral countries, such as Brazil, Mexico and Colombia. He stated that a buy-in could be arranged but not with the current fiscal year funds. AID would also be willing to cover some JHU core costs and not just in-country costs. I informed AID that approximately \$250,000 over a two-year period would be needed for in-country costs and at least another \$50,000 over the same period would cover some JHU/PCS core costs. AID did not seem to feel that this amount was unreasonable, and they requested fiscal information on our cooperative agreement so that preparations could be made for a future buy-in.

CONCLUSIONS AND RECOMMENDATIONS

The three different projects supported by JHU/PCS in Honduras are at different stages of development. The project with ASHONPLAFA is reaching its final stages. Early data seems to indicate success. Since the project started, the number of users in ASHONPLAFA's CBD program has increased after having been at a plateau for more than two years.

The project with the Ministry of Health, after an initial slow start, has begun in earnest as the Ministry has committed substantial resources, both personnel and financial, to support its family planning program. Family planning communication activities for the Ministry began last October and are continuing at the present time.

The IHSS project has been the least successful of the three. IHSS has managed to provide some basic communication and family planning training to approximately half of its personnel and is currently in the process of conducting a baseline survey from which the data will be analyzed to determine the most appropriate messages and media for IHSS beneficiaries.

AID and the previously mentioned institutions would welcome additional JHU/PCS support of Honduras' family planning communication programs. JHU/PCS is also willing to continue its involvement in Honduras if funding can be provided through the Mission. The AID Mission is willing to pick up some of the funding for these activities in Honduras, but probably under its 1987 fiscal budget.

It is recommended that JHU/PCS:

- 1) develop project proposals with ASHONPLAFA and IHSS/San Pedro Sula for expanding family planning communication activities in Honduras;
- 2) work with AID/Honduras to secure funding for these new projects; and
- 3) continue supporting IHSS through technical assistance so that the current project meets its objectives.

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