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AID/Office of Population
Family Planning Services Division

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TRIP REPORT

LIBERIA

May 19-21, 1981

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Prepared by ICSMP Consultant:

Ralph Susman

Project No. AID/DSPE-CA-0087

TABLE OF CONTENTS

EXECUTIVE SUMMARY	ii
I. Background	1
II. Current Situation	1
III. Preliminary Assessment of the Need for, Commitment to, and Potential Impact of a CSM Project in Liberia	2
IV. Potential Impact of a CSM Project in Liberia	5
V. Organizational Models--The Options	6
VI. Legal and Financial Requirements for the Sponsoring Agency	7
VII. Review of the Existing "Infrastructure" Systems	8
VIII. Legal Concerns Regarding Advertising and Sales of Contraceptives	10
IX. Conclusions and Recommendations	13
APPENDICES	
A. Persons Contacted	16
B. Media Rates in Monrovia	17

EXECUTIVE SUMMARY

ICSMP Consultant Ralph Susman travelled to Liberia on May 19, 1981 for a three-day assessment of the current potential for contraceptive social marketing as part of a larger African continent tour. The visit, initially scheduled in the Autumn of 1980 with consultant Diana Altman, but postponed due to scheduling difficulties, was preceded only a month earlier by a military coup which displaced the Tolbert government in April 1981.

Susman's conclusions regarding the viability of CSM in Liberia are positive, given a limited number of important caveats. The consultant reports that interest was expressed both on the part of the Ministry of Health and the AID Mission in Monrovia for CSM programming. Additionally, adequate distribution and advertising capabilities exist in the country, although packaging may need to be contracted with a third-country organization, possibly in Ghana.

The caveats raised by the consultant are primarily political. The consultant reports that the country is necessarily in a state of flux and formation and thus cautions that assurances given to him at the time of his visit could, for any number of reasons, be recinded as government policy strategies and priorities are further defined. Additionally, the consultant raises concerns of personal security in a society which is undergoing massive transformation under the leadership of a new military government. Finally, the consultant points out that the level of staffing at the USAID Mission does not include a population officer and that the level of input which thus could be expected from the Mission during the development of a program would necessarily be limited.

It is the recommendation of this consultant that further consideration of CSM programming in Liberia be postponed at least temporarily until the political, economic and social policies of the Peoples Redemption Council are formulated.

I. BACKGROUND

Diana L. Altman, a consultant to the American Public Health Association (APHA), studied the feasibility of a contraceptive social marketing program in Liberia in February-March 1980. The consultant was asked to assess the availability of marketing research information and organization; the possible range of methods, present prices, movement and sales; in-country packaging capabilities and probable alternatives to local packaging of bulk supplies; prevailing product distribution and retailing system; major distribution firms; and current product promotion and advertising practices, capabilities of qualified advertising agencies, and possible constraints on a promotional campaign. Her assignment required the identification of possible sponsors, an evaluation of the management structure, and an estimate of the cost of supporting development of a CSM project.

II. CURRENT SITUATION

In April 1980 the government of President W. R. Tolbert, Jr., was brought down by a military coup. Since that time, the country has been ruled by the People's Redemption Council (PRC), a military government headed by Master Sgt. Samuel K. Doe. Due to the inevitable upheaval there has been a certain amount of economic dislocation and government budgetary shortfalls. At present the U.S. government has been providing massive Budget Support Grants to the new Liberian government to enable it to pay for such things as oil and petroleum products and rice importation, as well as support for internal governmental operating expenses. The United States has also brought in army engineers to teach their Liberian counterparts how to build inexpensive block and slab cantonment housing for the military. Due to the substantial technical, financial and commodity support provided by the United States, as well as visible political support for the PRC, the position of the United States in Liberia at the present time can be said to be good.

The PRC government has generally not interfered with the commercial sector. The policy of the government can be said to be one of support of free enterprise with little or no intervention in the private commercial sector.

III. PRELIMINARY ASSESSMENT OF THE NEED FOR, COMMITMENT TO, AND POTENTIAL IMPACT OF A CSM PROJECT IN LIBERIA

The need for and potential contribution of a CSM project becomes readily apparent when one considers the following data:

- o Estimated population growth rate 3.3 percent to 3.4 percent
- o Crude birth rate of 50; crude death rate of 20
- o Life expectancy of 48 years
- o High unemployment and underemployment
- o Substantial malnutrition
- o Doctor/patient ratio of 1:9,400 with 135 of 178 physicians (1978 figure) in the Monrovia area
- o 35 pharmacies in the country, of which 33 are in Monrovia
- o 91 medicine shops in the country run by nonpharmacists; all are outside of Monrovia
- o Infant mortality rate of 160 per 1,000
- o Adolescent pregnancies account for 25 percent of all births
- o Estimates indicate 35 to 50 percent of female school dropouts are pregnant
- o Illiteracy estimated at 75 percent and as high as 90 percent in rural areas
- o Estimated 70 to 75 percent of population resides in rural areas
- o Inflation "estimated" at 35 to 40 percent.

A. Family Planning Association of Liberia.

The present contribution of the Family Planning Association of Liberia (FPAL) is rather limited due to two principal factors, both of which are budget related. First, because of a chronic shortage of funds they sponsor almost no information and education activities and thus contribute little to expanding public knowledge and receptivity.

Second, for financial reasons, the FPAL necessarily has limited staff and vehicles, thus reducing their service outreach. The high cost of gasoline—U.S.\$3.00+ per gallon, when it is available, is also a factor.

The FPAL supports the idea of a CRS project, believing that the advertising and marketing activities of such a project would be helpful to them, especially in view of their almost total absence of funds to support information and education activities.

Commercial retail sales of contraceptives through pharmacies and medicine shops is far from impressive and is demonstrative of relatively high costs, the total absence of promotion combined with low awareness about contraception, and limited distribution with point of sales concentrated only in and around Monrovia and several adjacent counties.

Family planning activities by other international agencies/donors such as FPIA and Pathfinder are limited in focus and were not designed to have broad impact on awareness, acceptability or availability of family-planning products.

Thus it is safe to say that from the standpoint of need, Liberia is certainly an eligible candidate for a CRS project. The next point to be addressed, therefore, is concerned with commitment to the development and implementation of such an activity.

B. Ministry of Health

An extensive discussion was held with the Acting Minister of Health, Robert Ellis. It should be noted that Ellis, an intelligent and articulate man, is one of very few senior government officials from the former administration to be kept on in the PRC government. He is pro-American and has many contacts in professional circles in the United States.

For all practical purposes, the Ministry of Health (MOH) does not, at the present time, have any family planning program, although it projects a keen interest in MCH activities, including inoculation programs for infants and children.

Following a presentation to him about the CSM concept and the nature of this consultant's visit, he responded at length on the policy of the PRC with respect to a CSM activity. First, he stated without any qualification that a project accompanied by thoughtful and culturally sensitive advertising and promotion activities was entirely consistent with government policy. Second, government policy, he said, was to concentrate on the qualitative rather than the quantitative aspects of family life. He explained that an important aspect of the revolution was "to give the people freedom of choice—the choice to make their own decisions about their family and its size." Thus, according to the Acting Health Minister, a CRS project which promoted family planning and contributed to an improvement in the quality of family life, through free and informed decisions, would be in line with government policy and receive the approval of the Ministry of Health.

Third, he added his special concern about the number of female school dropouts due to pregnancy and expressed the hope that a CSM project with good promotion and wider availability of contraceptives might positively impact upon this problem. He also expressed enthusiasm for any marketing and distribution which might be undertaken in the rural areas.

Finally, Ellis had no problem at all with the idea of advertising so long as it was (as I assured him) tasteful and sensitive to the norms and values of the community. He expressed a willingness to "informally" review initial advertising copy, if and when a project were to be undertaken.

It might be noted that he expressed support for Afromedia, the advertising agency to be contacted on this trip, as well as the drug distribution company, Clave's Pharmacy, Inc., owned by the well-known Mrs. Clavenda Bright-Parker.

C. USAID Mission

The USAID Mission does not at present support any population initiatives, nor is there a population officer at the Mission. The Mission is in the early discussion and negotiation stages with the government for a Primary Health Care Project to be undertaken in several rural counties. This project, which is strongly advocated by the PRC government, could not possibly begin until some time in 1982. Initial discussions at the Mission in Monrovia indicate the likelihood of a small population component in this primary health care project.

Following several helpful and informative discussions with Mission Health Officer Charles Witten and his staff, a full briefing was held with Mission Director Remo Garufi and his deputy, Ed Anderson. They gave unqualified support to such a project and indicated that a cable indicating support would be sent to the USAID Population Office in Washington.

IV. POTENTIAL IMPACT OF A CSM PROJECT ON LIBERIA

It is difficult at this time to assess the potential impact of CSM in Liberia. It is safe to say, however, that with the paucity of family planning services now available along with a very undeveloped market for retail distribution of contraceptives, the probability of a meaningful impact is high. It is well to note, however, that there are also formidable obstacles which would require patience, persistence and resolution.

Clearly, the CRS promotional and advertising activities could have an impact beyond our own project on FPAL, Ministry of Health and USAID Primary Health Care activities.

Above all, it will be important to take account of the present political and economic situation, the existing state of development, and the fact that things move very slowly in this country.

Potential Organizational Structure/Sponsoring Agency

It is important to note at the outset that government, represented here by the Ministry of Health, is not interested in controlling the project either directly through the Ministry of Health, or indirectly through some external advisory body.

In point of fact, the present policies and commitments announced by the PRC leadership have put the Ministry of Health under substantial pressure. Thus, there is a strong inclination to support activities which contribute to the community service delivery infrastructure without requiring Ministry of Health investment of money or personnel. There is a distinct disinclination to assume control and/or run projects supported by the international donor community.

It is well to consider that Ellis and his staff would wish to be kept informed of the development and progress of a CRS project if one were developed, but Ministry of Health desire for control appears quite unlikely.

V. ORGANIZATIONAL MODELS—THE OPTIONS

It would appear that under the existing circumstances there are two main organizational options to be considered:

A. Direct Contracts for Specific Services and Activities with a Commercial Distribution Company and Advertising Agency.

Such agreements would include the specifics of a marketing plan, scope of distribution, etc., likewise with the advertising agency a contract would contain specific activities, requirements and targets.

In addition, there could well be a CRS consultative group with representation from the community to include representation from FPAL, USAID, Ministry of Health, the CRS distribution and advertising agencies, perhaps the Director of the Youth Federation of Liberia and someone from the education profession.

Decisions concerning the use of funds generated by the project could be put in the hands of a select committee of three, one of which would be a USAID person.

- B. The other organizational model is to establish a separate project entity which, in close collaboration with the USAID Mission, would conclude necessary contracts with a commercial distributor and advertising agency. This corporate entity would be directed by a qualified and suitable Liberian with the necessary commercial and managerial experience. It could be organized with a small board of directors, including representation from USAID. Decisions on the use of project funds would be made either by the board or a select subcommittee of the board, upon which USAID had representation. It is expected that an AID contract for resident management for at least the first year of operations would be considered. It must be noted that for the present, no decision regarding organizational structure is necessary. For various reasons it would be well to keep all options open on this matter until some firm and definitive decisions are taken on a CRS project.

VI. LEGAL AND FINANCIAL REQUIREMENTS FOR THE SPONSORING AGENCY

Should there be a decision to establish a CRS project and create an entity to administer it, there are several options which would need to be explored in detail with a local attorney, as well as perhaps the U.S. Commercial Attache (who was not available during this consultant's visit):

- o Establishment of a for-profit company, registered in Liberia, with limited liability, a board of directors, etc. Such an entity would be subject to taxation on any profits. However, careful and proper management might well obviate the possibility of any taxable "profit." The possibility of obtaining a tax waiver from the government would need to be explored in detail.
- o Establishment of a nonprofit organization, registered in Liberia as a charitable educational organization. The organization would only have to demonstrate that any income received was used to cover costs and

that any additional or surplus amounts were being devoted to carrying out the expressed aims for which the entity received its operating charter.

In view of the strong Ministry of Health support and USAID sponsorship, the application for charitable/educational nonprofit status (not unlike FPAL) should not be difficult to achieve.

VII. REVIEW OF THE EXISTING "INFRASTRUCTURE" SYSTEMS

A. Distribution

The findings of this trip do not differ substantially from Diana Altman's trip early in 1980.

The two principal candidates as distributor are first, Clave's Pharmacy, Inc., which operates a chain of drugstores including the only two outside of Monrovia. This is apparently a well run and prosperous company which is both an importer/wholesaler as well as a retail pharmacy operator.

The other company is Atlantic Marketing Company (Atmark), which distributes such diverse items as insecticides, cigarettes and canned foods. This company does not ordinarily distribute to pharmacies.

Both organizations accept that it should be possible to market condoms and the foaming tablet spermicides via such new outlets as supermarkets, marketplace stalls, door-to-door salespersons, up-country markets and general trading stores, as well as at shops in the iron mining and rubber plantation concessions.

Clave's, as well as Atmark, would require some alteration to their regular distribution routine in order to satisfy CSM distribution outlet requirements.

A major marketing and distribution challenge would be activities up-country and away from the counties immediately adjacent to the

Monrovia metropolitan area. Many of the small general stores in the rural areas are run by Lebanese traders who would certainly handle CSM products if proper advertising and promotional support were provided. Several isolated general trading stores in the smaller and more remote rural villages, which were formerly run by the Lebanese have shut down due to problems of personal security following the 1980 revolution.

It should be noted that Clave's Pharmacy, Inc., extends its own distribution service to only two counties outside Monrovia. Both Clave's and Atmark's distribution systems require that merchants (in most cases Lebanese operating beyond the nearby county distribution limits) use their own vehicles to drive to Monrovia for purchase of necessary supplies of stock.

A CSM project would probably need to employ one or two product detail men to assist in marketing efforts outside of Monrovia in the initial product launch phase of a CSM project. However, there appear not to be any major problems with expanding the number and types of distribution outlets. Initial discussions were undertaken with the two distribution companies as to how this might best be done.

B. Advertising

The advertising and promotion side of a CRS project in Liberia would be a critical factor in moving this project ahead. There is no tradition of advertising contraceptives in Liberia although condoms may be seen on open display in pharmacies in Monrovia.

Technical resources are present in Monrovia for producing billboards, bus cards, and point-of-purchase materials, as well as radio and TV commercials. Prices for most advertising materials are somewhat expensive, however (price list attached in Appendix B).

Discussions were held with Afromedia, a subsidiary of Lintas: Ghana, Ltd., the advertising agency for the CSM program in Ghana. Afromedia

is confident that it could work up a suitable and phased advertising campaign for both urban and rural areas that would be sensitive to the concerns of the local community and the government.

C. Packaging

Packaging capabilities in Liberia have not improved since Diane Altman's visit early in 1980. Local capability extends only to the simplest of packaging requirements. The attractive U.S. and Continental packaging to which this market is accustomed is all imported.

The USAID Mission director raised the possibility of AID/Washington supporting the development of local packaging capability for a CSM project. His view is that this would contribute to the local community competence and provide employment. While there is no arguing with the general merit of his idea, it would seem that local private enterprise should invest in the necessary equipment if the market for its use is present. This consultant's recommendation would be to carry out printing/packaging in Accra where a proven competence already exists. The finished products could then be air-freighted to Monrovia.

VIII. LEGAL CONCERNS REGARDING ADVERTISING AND SALES OF CONTRACEPTIVES

A. Registration, Sales Outlets

All drugs in Liberia are classified into one of four categories. The intent of this scheme is to place those drugs thought of as most potent and/or dangerous, including those prepared by pharmacists, in Category "A", with other substances or products falling for various reasons into categories "B," "C" or "D." Category A drugs are by law restricted to sale by pharmacies. A license is required for their importation.

Items classified as B, C or D are sold in medicine stores by non-pharmacist personnel, as well as in supermarkets and even in general trading stores.

The present system is rather haphazard since there is some confusion and uncertainty among proprietors of pharmacies and medicine shops in some instances as to the classification of certain medicines. For example, tranquilizers, while classified as an A category drug, are uniformly sold in pharmacies without a prescription. On the other hand, stimulants such as amphetamines, and barbiturates require a prescription. This is illustrative of the "policy within a policy" determined by the pharmacists and based upon an agreed to but unwritten standard related more to social acceptability than to pharmacologic research.

Oral contraceptives, which require a prescription, are listed as a Class B substance and, as such, can and are sold in both pharmacies as well as medicine shops. There is still some confusion about the status of spermicides as to whether they are Class B or C.

B. Oral Contraceptives

Despite their Category B status, OCs are widely and easily obtainable. One knowledgeable and experienced local information source reported that schoolgirls, beginning as young as 12 years of age, regularly buy oral contraceptives in pharmacies and via "trial and error" eventually settle on the oral contraceptive which most agrees with them.

It is likely that a CRS project could sell oral contraceptives via pharmacies and medicine shops and that despite the law, local custom would prevail and they would be sold in most cases without a prescription. This situation, however, is not without some potential to cause difficulty if a CRS project were to adapt to "local custom."

Potential problems of marketing OCs are compounded by two significant factors. First, the high rate of illiteracy (estimated at 75 percent in urban areas and as high as 90 percent in rural areas) makes it difficult to provide any written information to oral contraceptive purchasers concerning contra-indications to use, adverse reactions, where to seek clinical advice for any questions and problems, etc.

Second, there are few clinical resources to which people might turn even were they inclined to do so.

These issues are by no means insurmountable, but would require necessary organizational initiatives to minimize these potential problems.

C. Spermicides and Condoms

The Ministry of Health has given assurance that there would be no official obstacle to making spermicides and condoms available in such "new" outlets as supermarkets, marketplace stalls, general trading stores, etc. Clave's Pharmacy, Inc., concurs from the marketing standpoint indicating that with no official objection, the issue of distributing spermicides and condoms outside of the normal pharmacy/medicine shop outlets was really a matter of effective marketing with proper advertising and promotional support.

Certainly from a sales standpoint there are few legal or institutional obstacles to the sale of oral contraceptives and virtually none to the wider distribution and sales of spermicides and condoms.

D. Advertising Restrictions

There is no history of legal restriction on the advertising of contraceptives; however, as a matter of tradition, contraceptives and other drug products have not been advertised.

Acting Minister of Health Robert Ellis gave his assurance that a CRS project could advertise its products without any government interference, if two conditions were satisfied:

- o The project would need to be consonant with the Ministry of Health, PRC government goals of promoting well being and a higher qualitative standard of family life.

- o The advertising would need to be sensitive to existing norms and cultural values in the community.

IX. CONCLUSIONS AND RECOMMENDATIONS

After careful consideration of all relevant information along with on-site discussions with senior government, USAID Mission officials and commercial distribution and advertising companies, the following conclusions can be drawn:

- o There can be no doubt that Liberia is in need of additional population resources.
- o The government policy, as stated by Acting Minister of Health Robert Ellis, is most encouraging and fully supportive of a CRS project.
- o There are no institutional or legal obstacles to organizing and carrying on CRS activities.
- o Present limitations or inadequacies in the marketing distribution system can be surmounted and in some instances turned into an advantage, especially in areas outside of Monrovia.
- o Staffing should not be a major problem, as the commercial distributor would employ his established resources in addition to finding additional detail men for the product launch phase.
- o Aframedia, the advertising agency, should be able to carry out the advertising program requirements for a CRS activity.
- o At the present time the HPN side of the USAID Mission/Liberia is not endowed with a large staff. At present, Charles Witten, the recently arrived Health Officer, is also serving as the focal point for population activities. His office is involved in planning a major primary health care initiative in the rural areas as well as other activities. Though Witten and the mission director support a CRS initiative, it is questionable as to how much staff input could be expected from the USAID Mission at present staff levels.
- o Political considerations are perhaps the largest drawback to further program development at this time. The aftermath of the April 1980 revolution and subsequent military government is resulting in noticeable strains and tensions on an already weakened economic and social fabric.

It must be recognized that despite the enthusiasm and encouragement of the Acting Health Minister, the policies and priorities of the new government are still evolving and the potential for reversals by the PRC leadership in this time of confusion is apparent. Personal security considerations for any on-site contracting organization are also an issue at least for the present.

It would seem, therefore, that AID/Washington would be well advised to move on the matter of a CSM project in Liberia with great care and deliberation. There are certain positive actions that can be taken which will advance the knowledge base in Liberia and thus put AID in the position of being able to launch a project should that option appear as reasonable. At the same time there would be ample opportunity to observe the local situation and how it is developing in a rather tense and uncertain environment.

It is recommended, therefore, that AID consider initiating prelaunch market research through Afromedia. This could be augmented by such professional resources as available and necessary from the University of Liberia and elsewhere. Such a study should furnish information on such matters as brand awareness, contraceptive purchase behavior, knowledge concerning availability, contraceptive preference, data on media consumption, shopping habits, packaging preference, etc. It is estimated that such a basic marketing study could be completed in three to four months.

It might also be advisable to determine whether any studies have been carried out or if data are available on the optimum and convenient oral contraceptive formulation for Liberian women.

In this connection consideration should be given to studying:

- o Incidence and prevalence of hypertension among women in the 15 to 44 age group
- o Low-dose versus regular dose oral contraceptive acceptability
- o The prevalence of anemia and malnutrition among women in the 15 to 44 age group.

Unless such data are already available, efforts should be undertaken to study these issues through whatever sponsorship is appropriate, including review of clinical data from FPAL, the Kennedy Hospital in Monrovia, and local physicians.

A CSM project could be further considered following the basic market research, with the findings incorporated into the marketing activities as appropriate.

Liberia can properly be classed as a priority target but the determination to invest funds in Liberia and the potential impact of a project must be viewed in the context of other priority countries, possibility of CRS impact and the limited availability of funds.

APPENDIX A
PERSONS CONTACTED

Persons Contacted (Position and Affiliation)

Mr. Robert Ellis, Acting Minister of Health
Mrs. Ruth Smith, Executive Director, Family Planning Association of Liberia
Ms. Lois Neymah, Deputy Executive Director, Family Planning Association of Liberia
Mr. Lawrence Boateng, Client Service Director, Afromedia
Mr. Seth K. Akiti, Sales Manager, Clave's Pharmacy, Inc.
Mr. Charels Witten, Health Officer, USAID Mission
Mr. Remo Garufi, Mission Director, USAID
Mr. Ed. Anderson, Deputy Mission Director, USAID
Ms. Kate Jones, IDI, USAID Mission
Ms. Irene Marshall, Admin. Assistant, Health, USAID Mission
Mr. Joseph A. Oshaia, Purchasing Manager, Atlantic Marketing Company (Atmark)

LIBERIAN BROADCASTING CORPORATION
RADIO RATES EFFECTIVE AUGUST 1, 1979

APPENDIX B

110

SPOT ANNOUNCEMENTS - PREMIUM:		(0600-0900)	(1600-1800)	
		<u>1 - 51 TIMES</u>	<u>52 - 103 TIMES</u>	<u>104 - 155 TIMES</u>
60 secs		\$48.00	\$47.00	\$45.00
45 secs		\$39.00	\$38.00	\$37.00
30 secs		\$32.00	\$31.00	\$30.00
15 secs		\$27.00	\$26.00	\$25.00
		<u>208 - 311 TIMES</u>	<u>312 - 415 TIMES</u>	<u>416 - 519 TIMES</u>
60 secs		\$42.00	\$39.00	\$38.00
45 secs		\$35.00	\$33.00	\$32.00
30 secs		\$27.00	\$26.00	\$25.00
15 secs		\$23.00	\$22.00	\$21.00
				<u>520 - TIMES</u>
				\$35.00
				\$30.00
				\$24.00
				\$20.00

SPOT ANNOUNCEMENTS - AAA:		(0500-0600)	(0900-1100)	(1400-1600)	(1800-2100)	(1400-1600)
		<u>1 - 51 TIMES</u>	<u>52 - 103 TIMES</u>	<u>104 - 155 TIMES</u>	<u>156 - 207 TIMES</u>	
60 secs		\$42.00	\$39.00	\$36.00	\$35.00	
45 secs		\$35.00	\$33.00	\$31.00	\$30.00	
30 secs		\$27.00	\$26.00	\$24.00	\$23.00	
15 secs		\$23.00	\$22.00	\$21.00	\$20.00	
		<u>208 - 311 TIMES</u>	<u>312 - 415 TIMES</u>	<u>416 - 519 TIMES</u>	<u>520 - TIMES</u>	
60 secs		\$34.00	\$33.00	\$32.00	\$29.00	
45 secs		\$29.00	\$27.00	\$26.00	\$24.00	
30 secs		\$22.00	\$21.00	\$20.00	\$19.00	
15 secs		\$19.00	\$18.00	\$17.00	\$16.00	

SPOT ANNOUNCEMENTS - AA:		(1100-1400)	(2100-2400)	
		<u>1 - 51 TIMES</u>	<u>52 - 103 TIMES</u>	<u>104 - 155 TIMES</u>
60 secs		\$27.00	\$26.00	\$24.00
45 secs		\$24.00	\$23.00	\$21.00
30 secs		\$20.00	\$19.00	\$18.00
15 secs		\$18.00	\$17.00	\$16.00
		<u>208 - 311 TIMES</u>	<u>312 - 415 TIMES</u>	<u>416 - 519 TIMES</u>
60 secs		\$22.00	\$21.00	\$20.00
45 secs		\$19.00	\$18.00	\$17.00
30 secs		\$16.00	\$15.00	\$14.00
15 secs		\$13.00	\$12.00	\$10.00
				<u>520 - TIMES</u>
				\$19.00
				\$16.00
				\$13.00
				\$ 9.50

A Day - or Two notice - Punct. F. B. C.

LIBERIAN BROADCASTING CORPORATION
TELEVISION RATES EFFECTIVE AUGUST 1, 1979

ANNOUNCEMENTS - PREMIUM

(1945-2215)

	<u>1 - 25 TIMES</u>	<u>26 - 51 TIMES</u>	<u>52 - 103 TIMES</u>	<u>104 - 155 TIMES</u>	<u>156 - 259 TIMES</u>	<u>260 TIMES</u>
60 secs	\$72.00	\$69.00	\$66.00	\$62.00	\$57.00	\$54.00
45 secs	\$59.00	\$57.00	\$51.00	\$50.00	\$45.00	\$44.00
30 secs	\$44.00	\$41.00	\$39.00	\$36.00	\$35.00	\$32.00
20 secs	\$30.00	\$27.00	\$26.00	\$24.00	\$21.00	\$18.00
15 secs	\$27.00	\$26.00	\$24.00	\$21.00	\$18.00	\$17.00

ANNOUNCEMENTS - STANDARD

(Open - 1945)

(2215-2300)

	<u>1 - 25 TIMES</u>	<u>26 - 51 TIMES</u>	<u>52 - 103 TIMES</u>	<u>104 - 155 TIMES</u>	<u>156 - 259 TIMES</u>	<u>260 TIMES</u>
60 secs	\$59.00	\$57.00	\$51.00	\$50.00	\$45.00	\$44.00
45 secs	\$47.00	\$45.00	\$44.00	\$41.00	\$36.00	\$35.00
30 secs	\$36.00	\$35.00	\$32.00	\$30.00	\$27.00	\$26.00
20 secs	\$26.00	\$24.00	\$21.00	\$18.00	\$17.00	\$14.00
15 secs	\$24.00	\$21.00	\$18.00	\$17.00	\$14.00	\$12.00

18

AFROMEDIA (LIBERIA) INC.



LIBERIA: MEDIA SCENE, 1980

BACKGROUND

Liberia is located on the western bulge of Africa with a total of 43,000sq. miles. It is bounded on the west by Sierra Leone, on the north by Guinea, on the south by the Atlantic, and on the east by the Ivory-Coast.

Nearly 71% of the estimated 1.68 million population (1974 census) live in small villages dispersed throughout the rural area. The remainder live in townships of over 2000 inhabitants. Population density is highest along the coastal belt and along a narrow strip following the main highway into the hinter land.

Population growth in Liberia has occurred at an average annual rate of approximately 3.3% between 1974 and 1977. Accordingly Liberia is characterised by a relatively young population structure. The 1974 census estimate that over 41% of the population is under 15 years of age. Simultaneously, there has also been a continuous shift of population towards the cities and the larger towns. In 1978 it was estimated that MONROVIA, the capital, had a population of 250,000 and the population growth rate of capital was growing at 7.8% per annum. Monrovia is the centre of administration and trades the chief port and the departure point of the chief roads. The other bigger towns are Buchanan, Robertsport, Voinjama, Gbanga, Sanriquelle, Zwedru, Greenville and Harper.

English is the official language. The most widely spoken local languages are KPELLE and BASSA.

MEDIA

There has not been any major media survey in Liberia in recent times and available media information are based on reliable sources from media Owners and the major Advertising Agency, Afromedia.



(a) RADIO

Radio is the major medium in this country. It has the widest coverage both in Urban and Rural areas.

There are 3 different Radio Stations and these are (1) SHORT WAVE, (2) MEDIUM WAVE, (3) F.M. STEREO. The set count for the S.W and A.M stations combined is estimated at 60,000 with listenership average figure of 6 per set. This listenership figure is double at peak time. All of the radio commercials are transmitted on the A.M station. The S.W is used mainly for local language programme and announcements. Transmission time starts from 5am - 12 mid-night.

The F.M Stereo station was introduced in July, 1979 and operates on the 89.9 meter band. It is a musical based station with 80% musical programmes and 20% for discussions. Set count is around 17,000 and listenership is 4 per set. 90% of the listenership is based in Monrovia. Programmes which are transmitted at the same time as the A.M station are all in English.

(b) TELEVISION

T.V is a growing medium mainly in the Monrovia area. Programmes are telecast both in colour and black and white. It is estimated that there are 23,000 black and white and 7,000 colour sets. Viewership is about 9 set and programmes are telecast mainly in English. 95% of the programmes are of foreign production. Transmission time is from 6.15p.m. - 11.30p.m. each day.

(c) OUTDOOR

The outdoor medium has been growing very fast over the past two years. The quality of production is very high and there is increasing competition for premium sites in Monrovia.

Most of the signs are hand-painted but facilities also exist locally for silkscreen-printed posters. Most of the signs are in Monrovia but currently, there is a gradual spread out into the major towns outside Monrovia.

20

March 24, 1981

AFROMEDIA: ESTIMATED COSTS FOR VARIOUS
ADVERTISING MATERIALS

(1) 'T' Shirts

Unit Cost = \$5.00 (based on quantity of 500 plus.
{This includes cost of purchasing
{ 'T' Shirts and printing.

(2) PVC: Bumper Stickers

Production will be on to PVC self-adhesive material in
colours as per approved design.

Size: 2" x 12"

Unit Cost = 42¢ (based on quantities of 2000 plus.

(3) Badges

Production on to any kind of cloth in various colours
Unit Cost = \$1.50 (based on quantities of 100 plus.

(4) Billboards

Costings attached. Using scotchlite will depend on
number of words but usually the extra costs will be
around \$200 plus.

(5) Illuminated Sign

Fascia alone i.e. perspex sheeting and printing will cost
\$300.00. Production of Box and Electrical fittings will
cost additional \$900 plus.

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(6) Plastic Bar Canopy

Production will be on to PVC Plastic Sheeting in various colours.

Size is 30" wide x 10" deep.

Unit cost = \$4.00 based on quantity of 1000 plus.

(7) Giant PVC Sticker

Size 30" x 10" will cost \$11.00 per unit.

Lawrence Boateng
LAWRENCE BOATENG