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TRIP REPORT:
JHU/PCS VISIT TO
LAGOS, ILORIN (KWARA STATE) AND
IBADAN (OYO STATE), NIGERIA

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Dates of In-Country Visits:
November 19 - December 12, 1984
Lagos, Ilorin and Ibadan

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Executive Director

Executive Summary

JHU/PCS Regional Program Coordinator Jose Rimón travelled to Nigeria from November 19 to December 12, 1984.

The major objectives of my trip to Nigeria were:

- 1) To provide technical assistance to the Kwara State Ministry of Health in the development and production of radio/TV spots and newspaper ads for the media campaign;
- 2) To monitor the progress of and provide technical assistance to JHU/PCS projects with PPFN a) Project AF-NGA-02: Printing and Distribution of Family Planning Methods Booklets; and b) Project AF-NGA-03: Family Planning Communication Campaign in Plateau State;
- 3) To discuss the feasibility of developing booklets on female voluntary surgical contraception with the newly-formed Fertility Association of Nigeria (FAN) and/or with the Fertility Research Unit of University College Hospital, Ibadan;
- 4) To explore the possibility of developing other IEC programs and projects in Nigeria; and
- 5) To participate in the recruitment of the Pathfinder/JHU/PCS Program Officer/IEC Specialist.*

Kwara State

After a series of concepts and materials pretesting in Kwara State, the following results were achieved during the seven-day visit:

- 1) Two final radio spots to be refined in "near professional" form for final pretesting.
- 2) Three newspaper ads to be developed in "near professional" format for final pretesting.
- 3) Two TV spots to be developed and refined in video form for final pretesting.

*JHU/PCS will provide 20% and Pathfinder 80% of the costs necessary to maintain the IEC Specialist.

Materials not chosen but proven effective during the final pretests will be kept for future use.

Planned Parenthood Federation of Nigeria (PPFN)

For AF-NGA-02, agreement was reached to proceed with the issuance of bids for the printing of the Ibo, Hausa and Pidgin English versions, although the negatives for Ibo and Pidgin English were not yet available. It was clarified that this could be done and it would speed up the printing process by a month.

Agreement was also reached on alternative ways of ensuring that clinics providing family planning services receive copies of the Yoruba booklets. Among the alternatives identified were: a) use of scheduled meetings or workshops especially by the Health Ministry system to make known the availability of the booklets and distribute copies for participants to bring home; b) hiring of delivery vans to move materials to strategic places and to clinics, whenever feasible; and c) asking Sterling Products to include IEC materials in the delivery of contraceptives.

Even as AF-NGA-03 is still pending approval at AID/Washington, technical assistance was provided in preparing the detailed subcontract bidding specifications for at least five advertising agencies to develop the materials for the Plateau State campaign. The job description for the Program Officer (IEC) to be recruited by PPFN to assist in JHU/PCS-funded projects was also finalized.

Female VSC Booklet

Understanding was reached with officials of the Fertility Research Unit of the University College Hospital (UCH), Ibadan to develop a family planning booklet on female voluntary surgical contraception modeled after the methods booklets project with PPFN. It was however agreed that actual project development will have to be finalized during the next JHU/PCS visit since UCH personnel were still tied up with other urgent matters at the time of the visit.

Other Project Leads

Three other project leads were discussed.

- 1) The idea of holding a national radio/TV workshop along the lines of the URTNA workshop held in Nairobi for Anglophone Africa was well-received in discussions with officials of the Lagos Zone Federal Radio Corporation of Nigeria (FRCN).

Essential elements of the proposed workshop were discussed with PPFN and the Controller of Programmes of Nigerian Television Authority (NTA), Ibadan zone. A draft of the project proposal will be prepared by PPFN by February 1985.

- 2) URTNA participant and NTA-Ibadan official Ms. Ronke Okusanya proposed developing a TV drama/comedy program in Yoruba. It was agreed that she would prepare a project proposal for discussions with AAO/Lagos and JHU/PCS.
- 3) The need to convene a national workshop to discuss and develop a national IEC strategy was agreed between JHU/PCS and AID/Lagos.

LIST OF ABBREVIATIONS

AID	Agency for International Development
FAN	Fertility Association of Nigeria
FMOI	Federal Ministry of Information
FMOH	Federal Ministry of Health
FRCN	Federal Radio Corporation of Nigeria
IEC	Information, Education and Communication
IUCD	Intrauterine Contraceptive Devices
JHU/PCS	Johns Hopkins University/Population Communication Services
NERC	Nigeria Education Research Centre
MCH	Maternal and Child Health
NTA	Nigerian Television Authority
PPFN	Planned Parenthood Federation of Nigeria
PW	Price Waterhouse
UCH	University College Hospital
UNFPA	United Nations Fund for Population Activities
URTNA	Union des Radiodiffusions et Télévisions Nationales D'Afrique (Union of National Radio and Television Organizations of Africa)
VSC	Voluntary Surgical Contraception

NIGERIA VISIT

Meeting with Keys MacManus

I met AID Affairs Officer Keys MacManus on Tuesday afternoon, November 20, and delivered the following:

1. Letter from Dr. Phyllis Piotrow;
2. Copy of Dr. Piotrow's trip report;
3. Copy of the revised AF-NGA-03 project document;
4. Negatives of the Hausa booklets on IUCD, pills and condom;
5. 1,500 copies of posters on IUCD, pill and condom developed from the cover of the Yoruba booklets;and
6. Envelope from Futures Group.

I reviewed with Keys MacManus the purpose of my visit and my schedule for the duration of my stay. After reviewing the negatives of the Hausa materials, Keys suggested that an additional line should be added to page 10 of the condom booklet ("The condom should be used only once") based on feedback from the field. I agreed to check out with a printing agency the technical feasibility of inserting the phrase without unduly delaying the printing.

A check with the National Education Research Council (NERC), which maintains a printing shop, indicated that it was not advisable. The alternative of inserting the phrase in the camera-ready boards and developing another negative in Baltimore would only delay the printing for another month. Hence it was agreed with Keys to proceed without the additional sentence, considering that the existing text "The man throws away the condom he has used into the toilet," already suggests the same idea.

It was also noted that the red blot on page 5 of the Hausa IUCD booklet has been removed in response to some negative feedback previously conveyed by the AAO. Removal of the red blot would reduce printing costs.

Discussions and Activities in Ilorin (Kwara)

I arrived in Ilorin on Thursday, November 22, and met the Project Staff headed by Dr. David Olubaniyi, Chief Medical Officer of the Kwara Ministry of Health. I delivered letters from Dr. Piotrow and about 100 copies of the pill, IUCD and condom posters. I also handed over a letter from Keys to Dr. Fakeye of the Ilorin Maternity Teaching Hospital.

I was briefed by Dr. Olubaniyi and the staff about the status of the project. He said that the project has the political support of high Ministry officials. He explained that the planned media campaign was delayed because of a contraceptive supply shortage. There would be little sense in doing a media campaign when the supplies were not in place. Since sufficient contraceptive stocks were now available and 14 health clinics were providing family planning services, the campaign could now be launched and the services reasonably provided. This reasoning does not, however, adequately explain why media materials were not developed while waiting for the contraceptive supplies.

I reviewed with the staff the purpose of my visit which was principally to assist them in developing the materials for the media campaign. We agreed on a complete schedule for the duration of my stay which included, among others, meetings with radio/TV officials and artists, and ensuring availability of people, equipment and facilities for the pretests. Dr. Olubaniyi was going to be on official vacation starting Monday, and the Project Coordinator, Ms. Florence Tolushe, was leaving Saturday for another State to attend a conference. Hence planning from the development of materials had to take into consideration the fact that the Project Supervisor (Ms. Adesayo) and the Assistant Project Supervisor (Ms. Shoyoola) have little experience in IEC.

During a visit to the District Health Center in Ilorin, I was informed by the staff that the center used to service a total of about 1,000 MCH clients until the Ministry issued instructions that fees should be charged. Since then, there has been a drop of about 50% among the clients. This has also a proportional effect among family planning clients, since most of recruitment is done through the maternal and child health approach. Once the total number of people serviced dropped, the pool from which family planning users were recruited also

shrank. The clinic is now averaging four family planning clients a day, two new and two old. Most of the staff expressed preference for a return to free services.

Except for the Yoruba booklets on family planning methods brought by Dr. Piotrow in her earlier visit, no other IEC support materials were available. In the receiving area of the clinic, however, an eye-catching display of traditional methods serves as an effective reminder to acceptors and potential acceptors that family planning is not an alien practice among Nigerians.

Two meetings were conducted with the Nigerian Television Authority (NTA), Ilorin to discuss possible free air time, production costs and programming of TV spots. Together with the project staff, discussions were conducted with Mr. L.O. Osanika, Acting Controller of Commercials; S.I. Ifarinde, Head of Traffics; Mr. Gordon Ogunyabi, Head of Administration and Mr. Joseph Olupidi, Head of Programmes.

It was clear from the discussions that, because of the recent government policy to encourage government agencies to raise their own funds, it would be difficult for the Project to secure free air time. It is my feeling, however, that if negotiations were conducted at higher levels, substantial discounts, if not free time, could be secured.

The TV station reaches most of Kwara State and about 50% of the people have access to a set. Prime time is between 7-10 p.m., although a weekly Yoruba drama between 4-5:00 p.m. is said to be popular. A regular weekly program called "Family Menu" designed to cater to housewives was identified as a possible program to sponsor or to have family planning experts invited to talk.

In separate discussions with the Head of Programmes, he showed willingness to develop the TV spots provided agreement is reached with the Health Ministry on production costs.

For radio, meetings were held with Alhaji Yusuf and J.A. Bello, Kwara State Radio general manager and commercial/sales manager, respectively. Samples of commercial jingles prepared by the station were of acceptable quality. The commercial manager quoted a price of 400 naira for every spot/jingle produced and was resistant to the idea of pretesting. He feared that the creative efforts put into the development of the radio spot or jingle might be stolen or adapted by others. After a long discussion, and after negotiations with the general manager, it was agreed that, given the public service nature of the project, the production cost for the development of the spots, including all the pretest versions, should be pegged at a price normally charged for developing one radio spot. Although the general manager did not commit himself to free air time, he showed flexibility in pricing and may be amenable to discounts if further high-level negotiations are conducted.

On materials development, the project staff developed draft scripts for radio and TV spots as well as for newspaper ads. The drafts, however, while providing useful information as to the "feel" of the staff on what the message should be, needed to be substantially modified or changed into media language.

Given the time limitation of the visit and the absence of agreement with professional groups to develop the materials, the best that could be done under the circumstances was to have the project and clinic staff "walk through" the actual process of materials development and pretesting.

For radio, five scripts were developed on the basis of discussions with the staff and some research findings. A focus group discussion on the scripts resulted in one script being dropped (too sophisticated). The other four scripts were then developed in rough form in a cassette recorder in one of the rooms at the health center with the project and clinic staff providing talent. Special sound effects, e.g., cry of a baby, were tape-recorded while a baby was getting her regular injection. The four radio spots were then pretested to the staff and clients present in the center at that time. The audience were asked to rank the spots. The result of the ranking was discussed and further comments and suggestions were taken to improve the contents of the two spots chosen. The two spots will then have to be developed in "near professional" form in collaboration with Kwara State Radio and again pretested.

For newspaper ads, five concepts were generated, with one concept to be executed in three versions. Unfortunately, the artist hired from the Ministry of Information was able to produce only one copy during the first day of pretesting. On the second day, he was only able to execute the three versions, of one concept. After pretesting the three versions one was chosen and further comments and suggestions were made to improve it. This improved version and the two other concepts will then be developed in "near professional" form for the final pretests.

For television, it was difficult and expensive to arrange for video facilities in so short a time. A combined slide and tape presentation was considered but found not feasible; neither was a poster and tape combination to, at least, crudely simulate TV. Given the limitations, it was decided to develop two scripts with the project staff. Two concepts were written up in script form and tested with the Project Staff. They were then modified to take into consideration feedback gathered. The scripts will then be developed in "near professional" video form for final pretesting.

Detailed notes on how the final pretest of all the materials will be conducted were discussed with the Project Staff. Please refer to the attached November 28 notes in the letter to Dr. David Olubaniyi. (Appendix B.)

It is important to note that the media campaign has been originally planned to stretch over a period of three months with one or two spots/space a week. This programming is too sparse to be effective. I emphasized the need to shorten the duration of the campaign and telescope a period of two weeks, given limited funds, where media exposures could be intensified. This two weeks could either be at the start or in the middle of the campaign.

Still in Ilorin, I visited the family planning clinic at the University of Ilorin Maternity Hospital operated by Dr. Fakeye and supported by Pathfinder Fund. At the time of the visit, eight women were waiting for family planning services. One was accompanied by her husband. I saw two walk-in clients looking for Dr. Fakeye. I was informed that the clinic serviced about 200 new acceptors a month. This is consistent with the reported 20 old and new clients serviced daily, given 21 working days a month. About 30% of the clients are walk-in and

about 50% are accompanied by husbands. Two of the women I talked to said they heard about the availability of free family planning services in this particular clinic from their relatives. Most of the acceptors are IUCD users (80%) with about 10% pill, 6% Depo Provera and 4% other methods. No Depo Provera supplies were available in the clinic but I was informed it was available in the drugstores. The clients buy their supplies and bring them to the clinic.

I suggested to Dr. Fakeye that more attention may be generated among potential acceptors if signs were set up outside the hospital with arrows pointing to the availability of free family planning services. Inside the clinic, a display of traditional methods is used to explain to the waiting clients that family planning is not something alien to Nigerians. The only poster on display was a "Rite Time" natural method poster promoting a thermometer alarm clock distributed by Bizfield Nigeria. Dr. Fakeye also informed me that he has received copies of the JHU/PCS-developed booklets on pill, IUCD and condom.

In subsequent discussions with Dr. Fakeye and the chairman of the Department of Obstetrics and Gynecology, Prof. O. Ogundobe, I was informed that they are proposing to open a dedicated space for female sterilization. On the whole, the performance of the clinic was commendable. Both physicians were looking forward to the media campaign to be launched by the Health Ministry. Fakeye, in particular felt that, considering the latest economic austerity measures in Nigeria, the economic appeal for smaller family size may prove to be useful rather than the campaign using the MCH appeal alone.

Discussions on the Development of Female VSC Booklet with University College Hospital, Ibadan

Despite a cable and a letter sent by DHL courier, my arrival in Ibadan was not expected. Professor Oladapo Ladipo, head of the Fertility Research Unit, was away and had just returned. I was, however, lucky to see him his first day back in office.

I explored the possibility of developing a booklet on female sterilization with the newly organized Fertility Association of Nigeria (FAN), of which Dr. Ladipo was elected President. He said the Association was barely organized and it has not even met since it was formed three weeks ago by the Nigerian delegates to the Conference on Reproductive Health Management in Sub-Saharan Africa held in Sierra Leone. He expressed his feelings that it was too soon to think of a project under the auspices of FAN since it was not yet even a bona fide Nigerian organization with its own by-laws and articles of incorporation. I explained that since I was in Nigeria anyway I thought I should explore the idea with him. He expressed interest in pursuing the project at a later time when FAN has gotten its act together.

Subsequent discussions were held with Ms. Grace Delano, Fertility Research Unit Project Coordinator, Dr. Dipo Otolurin, consultant to the UCH/Ibadan Department of Obstetrics and Gynecology, and Prof. Ladipo. In these discussions, agreement was reached that there was a need to develop the booklets and that, instead of waiting for FAN to become a viable organization, the project could proceed under the auspices of the Fertility Research Unit of the University of Ibadan. Since Prof. Ladipo was leaving for an out-of-town commitment and Ms. Delano was preparing to attend a conference in Rome, it was agreed that final discussions will be undertaken during the next JHU/PCS visit in February 1985. The major issues where further elaboration would be needed are: 1) the strategy of implementation; 2) major languages to be used and total number of copies; 3) local consultants; and 4) pretesting, printing and distribution. The possibility of incorporating an elaborate treatment of female sterilization into a general methods booklet would be investigated.

Discussions and Activities Related to PPFN

A number of major items and activities were discussed and undertaken with PPFN.

1. Project AF-NGA-03: Family Planning Communication Campaign in Plateau State. One key factor in the management of this project is the choice of the advertising agency subcontracted to develop and produce the bulk of the materials. PPFN has little experience, if any, in the process of preparing bidding

specifications. In view of this, technical assistance was provided in the preparation of the bidding specifications. Detailed specifications were prepared with the Programme Director for two posters, one booklet, one leaflet, recording of one family planning song, four TV spots, six radio spots and one newspaper ad. Beyond the "nuts and bolts" specifications on number of pages, volume, size, number of colors, quality of paper, length of format, etc., the bidding agencies will be asked to prepare an overall conceptual presentation in terms of treatment and content. They will also be encouraged to submit illustrative samples of materials necessary to gauge creativeness. Pretest versions will be required for all the materials developed once the agency has been chosen. To ensure that the agencies participating have a reliable reputation, PPFN will require: 1) certificate of business registration; 2) the latest annual report and list of officers; 3) tax clearance certificate; 4) list of clients in the past three years; and 5) sample of materials done in the past. The agency should also be willing to work in Plateau State.

The job description for the Program Officer (IEC) to be recruited by PPFN under the Project to help manage JHU/PCS-funded activities was also finalized with PPFN. Please see enclosed letter to Mr. Abayomi Fajobi, PPFN Executive Director (Appendix C). It would have been useful to look up the list of candidates for the Pathfinder/PCS Programme/IEC Specialist being recruited through Price Waterhouse (PW), but since the recruitment was scheduled at the end of February it was agreed that PPFN proceed with its own January 3 advertisement in Daily Times along with other vacant positions created under the Project.

In a related event, I had discussions with Tunde Adewole of PW and Dr. Ajayi of Pathfinder/Africa Regional Office regarding the recruitment of the Pathfinder/JHU/PCS IEC Specialist. We agreed that I should schedule my next visit to Nigeria during the final interview of the applicants.

2. Project AF-NGA-02: Family Planning Booklets Production and Distribution. The distribution system designed to ensure the availability of Yoruba booklets in family planning clinics has not worked out as planned. Although letters were sent out informing clinics that they could put in requests for the booklets, the expected response has been discouraging. In view of this,

there was a need to turn the relatively passive system into something more active. Recognizing the problem, PPFN has already embarked on orientation of all its branches in the Yoruba States to distribute the booklets actively rather than wait for the requests to come in from the clinics. Steps have also been made to move bulk supplies to strategic PPFN zones. There are still nagging problems, however, of moving the materials to the field clinics considering the minimal distribution costs provided in the budget.

Ideally, the health workers expected to hand out the booklet should go over the pages with the client, but in practice this is very difficult to implement. To organize orientation seminars for the proper use of the booklets per se would be costly, but orientations could be arranged as add-ons to existing training programs or seminars. PPFN should be on the alert for such opportunities, especially seminars by the State Ministries of Health. Another alternative discussed was the feasibility of requesting Sterling Products to include the booklets, or any other IEC materials for that matter, in its regular distribution of contraceptives. Keys MacManus has indicated her willingness to help in this regard.

In anticipation of the distribution problem which may crop up with the next round of materials (Ibo, Hausa and Pidgin English), it was agreed that PPFN should proceed with the seminar on active distribution of materials for the Hausa and Ibo areas as an add-on to a regular PPFN activity. The next meeting of State Secretaries is not scheduled until the middle of the year, and the materials are expected to be printed by March-April.

PPFN is having difficulty opening bank accounts for both AF-NGA-02 and 03 projects. I was informed that Nigerian banks approached by PPFN required complex procedural arrangements before an account could be opened. PPFN requested time to sort out this problem. For subsequent releases of funds for AF-NGA-02 and the initial advance for AF-NGA-03, it was agreed that consideration must be given to the usual 4-6 weeks delay before funds transferred could actually be used.

3. PPFN Proposal to Develop Booklet on Injectables. PPFN has expressed interest in developing a booklet on injectables, specifically on Depo Provera, which is popular in some parts of Nigeria. The booklet will be patterned after the family planning methods booklets being produced with JHU/PCS support. PPFN submitted a budget of \$100,000 to Dr. Sagoe of UNFPA/Lagos for incorporation into the Federal Ministry of Health budget. The booklet will be produced in Yoruba, Ibo, Hausa and Pidgin English.

Other Project Leads Discussed and Developed

Three other project leads were discussed during the course of my visit to Nigeria.

1. National Radio/TV Workshop. While the print media in Nigeria have been churning out articles and editorials discussing and, in general, supporting the need for a population policy, coverage of the population issue by the broadcast media have been relatively minimal. In view of this, more involvement by the broadcast media was perceived as necessary to expand the public's awareness of the issues concerning population and family planning.

JHU/PCS has recently supported a successful workshop on population and family planning with Union des Radiodiffusions et Télévisions Nationales D'Afrique (URTNA) held November 19-23, 1984 in Nairobi, Kenya. Nigerian participants to the workshop (Ms. Ronke Okusanya, Controller of Programs, NTA/Ibadan Zone; Mr. Patrick Egbe, Principal Producer, FRCN/Lagos zone; and Mr. Marc Okunnu, Director of Programmes, PPFN) have indicated interest in conducting a similar workshop for Nigeria. To explore the feasibility of the idea, a meeting was held with officials of the Lagos Zone Federal Radio Corporation of Nigeria (FRCN). Present during the meeting were Mr. Sunday Young-Harry, Director (also a Vice President of URTNA); Ms. Stella Bassey, Controller of Programs; and Patrick Egbe. PPFN Executive Director Abayomi Fajobi and Marc Okunnu discussed the rationale for organizing a national workshop for radio and TV journalists. The FRCN officials concerned indicated willingness to support the project. It was agreed that PPFN will draft the project proposal outlining, among others, FRCN participation along with that of the other agencies involved. JHU/PCS will provide technical assistance to PPFN in the preparation of the proposal.

In subsequent discussions with Ronke Okusanya and Marc Okunnu, the following major features of the proposed project were identified:

1. The workshop would be co-sponsored by FRCN, NTA, Federal Ministry of Health (FMOH), Federal Ministry of Information (FMOI) and PPFN; PPFN will assume a lead organizing role and administer the funds.
2. An Organizing Committee will be set up to be composed of representatives from the different sponsoring agencies.
3. The workshop should be conceived as the first phase of a two-phase project. The first phase will involve participation at the zonal levels of FRCN and NTA, and federal levels of MOH and MOI. The second phase will focus on state-level participation of all the agencies concerned.
4. The URTNA model of drawing together both media and health/family planning professionals will be followed.
5. Careful consideration will be taken to ensure that the event remains and is perceived as a Nigerian activity.
6. To ensure that the workshop achieves its objectives the total number of participants will be limited to 40.
7. Involvement of high Nigerian government officials will be planned especially for the opening and closing ceremonies.
8. The workshop will be designed and budgeted to attract wide media coverage.
9. A Communiqué will be prepared at the end of the workshop and published in one of the popular daily newspapers.

2. TV program in Yoruba. URTNA participant Ronke Okusanya came back from the Nairobi workshop enthusiastic about producing a Yoruba TV program on health and family planning. In my discussions with her, she proposed a Yoruba TV program that would situate health and family planning messages in comedy and drama formats. This program, which may range from 30 minutes to one hour, would then be recycled to other interested TV stations in the Yoruba-speaking areas of Nigeria. Although the use of comedy or drama could be effective in drawing audience attention, I pointed out that care and balance should be observed in the preparation of the script since research findings have indicated that the health and family planning messages tend to be diluted when "entertainment" formats are used. I also suggested that she prepare a draft proposal for discussion with AAO/Lagos since I was leaving for the U.S. the next day. It was agreed that JHU/PCS will review the project proposal in my next visit to Nigeria.

3. Workshop to Develop the National IEC Strategy. The AAO identified the need to develop a national IEC strategy to provide a framework for IEC activities in Nigeria. The strategy, among others, would address such issues as the availability of free broadcast time for radio and television. A major component in the development of the strategy would be the organization of a national workshop to discuss strategy development. Further elaboration on the process involved would be discussed with the AAO during the next JHU/PCS visit.

Recommendations

There are three major issues that could be acted upon immediately.

1. For the Kwara project, it is essential that free family planning services are restored in the clinics. Although the fees are described as "nominal" they have proved to be a major hindrance for people to visit the clinics and avail themselves of family planning services. USAID-affiliated agencies working in Kwara should collaborate in a concerted effort to influence the Ministry of Health to restore free family planning services.

2. For the Kwara and the two PPFN projects, a system should be designed to maximize exchange and translation of materials developed across States and languages. Materials produced in some other projects should be incorporated in this system. A well-designed exchange system could provide a pool of materials from which a cost-effective national media campaign could be developed in the near future.

3. There is a need for a closer coordination between JHU/PCS and the training institutions involved in the training of health clinic and field personnel. Closer collaboration would make possible better linkage between the mass media component and the interpersonal component of the IEC campaigns and also make possible better synchronization of major themes and messages at both levels. The training programs should include training in interpersonal communication and motivation for clinic and field staff.

4. Finally, U.S. based agencies working in Nigeria need to discuss alternative schemes to speed up transfer of funds to Nigeria. Delay in the availability of funds transferred has been a recurring problem that has affected the implementation of projects.

APPENDIX A

LIST OF CONTACTS

USAID

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THE JOHNS HOPKINS UNIVERSITY

APPENDIX B

POPULATION INFORMATION PROGRAM
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January 21, 1985

Dr. David Olubaniyi
Project Director
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Dear Dr. Olubaniyi:

Let me take this opportunity to thank you for the generous time you and your staff spent with me during my last visit. Despite the fact that you were on official vacation during the last days of my stay, I greatly appreciated the after-office hours that you spent reviewing the progress of the project with me. As you know, while we did not have sufficient time to produce the final materials for the media campaign, important steps have been taken to ensure that they are properly pre-tested and developed.

I am enclosing a copy of the notes I left you on the development and pre-testing of the media materials. You will note that it is essentially the same as the copy typed in your office except for minor modifications. I have included a reference to free radio time secured by the Ministry of Health in Ogun State to underscore the possibility of getting the same privilege in Kwara or, at least, secure discounts for radio and TV air time. This is crucial since cost reductions would allow us more frequent radio and TV exposures which could make a significant difference in the campaign. The support of higher officials in the Ministry of Health would probably be helpful in this regard.

I have been advised about your letter to Dr. Keys MacManus stating that you have not received the last check from JHU/PCS and that you are postponing the launching of the media campaign indefinitely. Based on our record JHU/PCS wired \$3,247 to your bank on November 16 as reimbursement to your reported expenditures in the second quarter. If you have not yet received this amount we will request a bank trace to find out what happened. In any case, we are wiring you today an advance of \$8,872 to bring your funds up to the level of the initial advance. This should help you cover production and air time costs for the four quarter period. If the funds are still not sufficient you may negotiate to get billed later for services. In my discussions with you, I have the impression that you would be able to do this without much difficulty.

I urge you to proceed with the media campaign as early as possible bearing in mind the necessity of pre-testing the materials before final production.

Dr. David Olubaniyi
January 21, 1985
Page two

I shall be visiting Ilorin on February - March 5 and I am looking forward to assessing the progress of the project with you and your staff. I am arriving February 26 on Nigerian Air flight No. 452 estimated to arrive at 10:00 a.m. Please reserve a hotel room for me at Kwara Hotel for the nights of February - March 4.

Meanwhile, let me summarize the issues I discussed with you about preparing financial reports:


1. Need for a letter to PCS certifying that the car with the new tires is used for project activities;
2. Honoraria expenses should match the activity reports;
3. Clinic furnishing/materials should be itemized or listed;
4. Figures in the financial reports should be totalled in each page;
5. Overtime/extra work should be reflected on the payroll register and the person receiving the amount should sign;
6. The exchange rate used by the bank for conversion should be reflected on the form.

It goes without saying that attention to these financial details help facilitate the flow of funds to the project.

Please be assured that JHU/PCS is always ready to assist you in making this project a worthwhile service to the people of Kwara. My best regards to you, Mrs. Tolushe, Mrs. Adebayo, Mrs. Shoyoola and Dr. Osanoto.

I look forward to meeting with all of you.

Sincerely,



Jose G. Rimon II
Regional Program Coordinator
Population Communication Services

cc: Dr. Keys MacManus/USAID/Lagos

JGR/sdp

TO: Dr. David Olubaniyi,
Project Director,
Ministry of Health,
Ilorin, Kwara State
NIGERIA

FROM: Jose Rimón II
Regional Program Coordinator, JHU/PCS

I. NOTES ON THE PRODUCTION OF RADIO SPOTS

1. Of the (5) sample radio spots scripts prepared, two have been chosen after preliminary pretesting with English-speaking staff at the Divisional Health Unit, Ilorin. Those chosen to be most acceptable were "Mama Olu" and "Think First". I have requested your staff to have the final versions typed for your reference. You will note that both have the same tag line, "Take a rest before your next baby" and mention where the services are available. Both also state "This is a public service announcement from your Health Ministry," to add a measure of authority.
2. There is a need to have the two scripts translated to Yoruba for the Yoruba-speaking audience. The translated version shall also undergo pretesting.
3. Since the pretesting done at the District Health Office was very preliminary, and done principally to guide the staff in choosing the most "acceptable" version, there is a need for a more thorough pretesting. This would be done after the two versions have been produced in "near professional" form complete with sound effects and music.
4. At this point, please note that of the five versions, four were produced in rough cuts by the staff themselves. After pretesting the four rough spots, the staff chose two. It is necessary that negotiations are made with competent radio talents to produce the spots. As you know, preliminary discussions have been made with the manager of Kwara State Radio. Two versions of each spot should be made: one in English and the other in Yoruba. Thus, a total of four radio spots will have to be produced.
5. The "Mama Olu" and the "Think First" English-version spots will then have to be pretested to an English-speaking audience. The Yoruba translations will be pretested to a Yoruba-speaking audience.
6. The pretests will help determine attraction, comprehension, acceptability and self-involvement. Persuasion would have to be gleaned later on the basis of clinic records.
7. On the basis of pretests, the staff would be able to determine which of the two spots is more effective. If both spots score very high in the pretest, you may want to consider reserving the second version for future use.

8. In preliminary discussions with the manager of Kwara State Radio, he has agreed to a one price package in the development of the spots, inclusive of the pretest versions, the modifications (if necessary) after pretest and the production of the final copies. There is a need to follow-up on this and arrive at a most advantageous arrangement to the project.
9. It might interest you to know that in the preliminary pretesting the possibility of offensive or negative effects have been explored repeatedly. None was pointed out by the participants. It would be prudent to check them out again during the final pretests.
10. Finally, I have learned that in Ondo State, the Health Ministry was able to negotiate for a one-hour free radio time. This is a good precedent. If it is not at all possible to negotiate for free air time Kwara MOH could at least negotiate for a 50% discount. This would go a long way in allowing more frequency and hence, more probability of effectiveness. The same strategy should be attempted with the Nigerian Television Authority (Ilorin branch).

CORE QUESTIONS TO BE USED FOR RADIO SPOT PRETEST*

1. Please tell me in your own words what the spot said

2. Did you feel that the spot was asking you to do something in particular?

1. _____ Yes
2. _____ No
3. _____ Don't know (DK)

If Yes, what? _____

(Note: At least a total of 70% of the audience comprehend the message)

3. Did the spot say anything that you don't believe to be true?

1. _____ Yes
2. _____ No
3. _____ DK

If yes, what was not true? _____

*Based on the University of Chicago Community and Family Study Center Media Monograph No. 6. The pretest questions for TV spots and newspaper ads were also based on the same monograph. Please note too that three of the radio spots and one TV spot were adapted from the University of Chicago Monograph No. 5.

4. Did the spot say anything that might bother or offend people in the community?

1. _____ Yes

2. _____ No

3. _____ DK

If yes, what? _____

5. Was there anything about the spot that you particularly liked?

1. _____ Yes

2. _____ No

3. _____ DK

6. Was there anything about the spot that you didn't like?

1. _____ Yes

2. _____ No

3. _____ DK

If yes, what? _____

7. What do you feel could be done to make it a better spot?

COMPARATIVE QUESTIONS

(The procedure of playing a spot and asking questions, 1-7 is repeated for each spot. After the questions, the interviewer plays both spots again and proceeds with the questions).

8. You have just heard the two spots again. Of the two which do you like best?

1. _____ Title 1

2. _____ Title 2

3. _____ DK

9. Why do you like this other spot?

10. How old are you? _____ years.

11. Do you know how to read? _____ Yes
_____ No
_____ Others

12. How many years of schooling did you complete?

- 1. _____ none
- 2. _____ 1 - 3 years primary
- 3. _____ 4 - 6 " " "
- 4. _____ 1 - 4 " Secondary
- 5. _____ Higher education

13. What is your current occupation?

14. What is your marital status?

- 1. Single _____
- 2. Married _____
- 3. Others _____

15. Do you have children?

Yes _____
No _____
How many (if yes) _____

16. Sex

Male _____
Female _____

17. Are you currently using a method of family planning?

Yes _____

No _____

If yes, what? _____

NOTE:

The English versions of "Mama Olu" and "Think First" will be pre-tested among English-speaking audience. The Yoruba versions will be pretested among Yoruba listeners.

A total of about 30 participants, preferably half male and half female is desirable. The spots should be played in a cassette to the respondents, one respondent after another. The staff would then interview each respondent and fill out the interview forms.

IMPORTANT. As previously discussed, the budget seems to allow us only a two-month campaign (8 weeks) on the assumption that the air-time rates could not be negotiated free or at a discount rate. To ensure that spots would have impact, it is suggested that two weeks should be chosen for more intensified or frequent exposures. This suggestion is also applicable to TV and newspaper and the two weeks chosen should occur at the same for all three media.

II. NOTES ON THE PRETESTING AND PRODUCTION OF TV SPOTS

1. The two scripts for TV spots have been reviewed and revised with members of the DHU staff and they agreed that both were acceptable. They made suggestions to improve the script and their suggestions have been incorporated in the revisions.
2. There are other ways of pretesting the scripts in rough form (for example, through the use of story boards and cassette tape or through the use of soundslides) but it was agreed that video versions would be better.
3. Hence, there is a need for final negotiations with persons or agencies who have the professional ability to produce TV spots. You may have to explore further discussions already initiated with the staff of the Nigerian Television Authority, Ilorin. To reduce costs consider contracting the package to a professional who knows the business.
4. The pretesting of video spots will have to be done in the same manner as radio spots. The same procedure shall be followed, as outlined in the production of radio spots. The same series of questions will also be asked. About 30 participants (50-50 male/female ratio preferably) will be requested to view the video spots individually. They will be interviewed individually after being shown the spots.

5. Negotiations with the production agency or persons shall be for a package price inclusive of producing pretest versions (English and Yoruba), modifications (if necessary) after pretest and production of the final copies. However, we may need a video machine and monitor to conduct the pretests. Try to negotiate this as part of the package.

The English and Yoruba versions will have the same video. Only the audio will be different. Hence, there would not be a significant price difference.

III. NOTES ON THE NEWSPAPER ADS

1. As you know, three concepts were given to the artist to execute in poster-forms, one concept was to be presented in three ways. The artist was thus expected to bring a total of five newspaper advertisement samples. On the first day of pretest, the artist was only able to execute one concept. Hence, nothing substantial could be done. On the second pretest day, the artist was only able to bring the three versions of concept #1. Thus, what was accomplished was only a pretest on concept #1. Concept #1 has now been revised to reflect the following:
 - a. The picture of a "happy planned family" should include a father in his mid-30's standing behind the wife in her late 20's, a son playing with a soccer ball, aged about six, a daughter aged about three and a baby being carried by the mother. The outfit or way of dressing should be Nigerian. The age-gap between the children should be visually discernible.
 - b. At the bottom of the illustration is a bold caption, "A HAPPY FAMILY IS A PLANNED FAMILY". A sub-slogan follows, "TAKE A REST BEFORE YOUR NEXT BABY".
 - c. The three other supporting messages, "Helps you fight austerity," "Helps children grow up healthy," and "Helps mothers preserve their beauty," have been dropped. They were perceived to be "too textual".
 - d. The lower portion of the ad includes a call to action, "FOR BEST ADVICE VISIT THE NEAREST FAMILY PLANNING CLINIC IN YOUR AREA." This is followed by a listing of clinics and their locations.
 - e. The ad will carry the logo of the Kwara Health Ministry.
2. The two other concepts are still to be executed by the artist. Once they are executed, they will be pretested together with concept #1. One ad will then be chosen on the basis of the pretest. Depending on the results, the chosen ad would either remain as composed or will have to be modified for further improvement. I have left detailed instructions to the artist on the preparation of the three concepts to be pretested. He has also agreed that the text for the final version will be done in lettraset. This would give the ad a cleaner and professional look.

CORE QUESTIONS TO BE USED FOR THE NEWSPAPER AD

1a. First, I would like to show you this drawing (illustration).
Please tell me what you see in this picture. (PROBE: Please tell me what this looks like to you.)

1b. Now I would like to show you the whole poster. In your own words, what is the message of this poster? (PROBE: What do you think it says?)

IF THE RESPONDENT CLAIMS HE CAN NOT READ, ASK:

Just looking at the picture, what do you think this says?

2. Do you think this poster is asking you to do anything in particular?

1. _____ Yes

2. _____ No

3. _____ DK

2a. IF YES: What? _____

3. Does this poster say anything that you don't believe is true?

1. _____ Yes

2. _____ No

3. _____ DK

3a. IF YES: What? _____

4. Is there anything in this poster that might bother or offend the people who live in (name of community)?

1. _____ Yes

2. _____ No

3. _____ DK

4a. IF YES: What? _____

5. (IF THERE ARE PEOPLE IN THE PICTURE) Do the people you see in this drawing remind you of your friends, or are these people different from your friends?

- 1. _____ like respondent's friends
- 2. _____ different from respondent's friends
- 3. _____ DK

5a. IF different: In what way are they different?

6. Is there anything in particular that you like about this poster?

- 1. _____ Yes
- 2. _____ No
- 3. _____ DK

6a. IF YES: What?

7. Is there anything in particular that you dislike about this poster?

- 1. _____ Yes
- 2. _____ No
- 3. _____ DK

7a. IF YES: What?

8. In comparison to the other posters that one sees around these days, would you rate this poster on to be:

- 1. _____ excellent
- 2. _____ good
- 3. _____ fair
- 4. _____ poor
- 3. _____ DK

9. What do you think could be done to make this a better poster?

(The procedure of showing the poster and asking items 1-9 is repeated for each poster to be tested. The interviewer then continues on with the items below)

COMPARATIVE QUESTIONS

10. I would like you to take a second look at these posters, this time altogether. (INTERVIEWER LAYS THE THREE POSTERS OUT SO THAT THE RESPONDENT CAN SEE ALL OF THEM.) Of these three posters, which do you like the best?

- 1. _____ poster 1
- 2. _____ poster 2
- 3. _____ poster 3
- 4. _____ DK

11. Which of these posters do you like the least?

- 1. _____ poster 1
- 2. _____ poster 2
- 3. _____ poster 3
- 4. _____ DK

12. How old are you? _____ years.

13. Do you know how to read?

Yes _____

No _____

Others _____

14. How many years of schooling did you complete?

- 1. _____ None
- 2. _____ 1 - 3 years primary
- 3. _____ 4 - 6 " "
- 4. _____ 1 - 4 " secondary
- 5. _____ Higher education

15. What is your present occupation?

16. What is your marital status?

- 1. Single _____
- 2. Married _____
- 3. Others _____

17. Do you have children?

- Yes _____
- No _____
- How many (if yes) _____

18. Sex

- Male _____
- Female _____

19. Are you currently using a method of family planning?

- Yes _____
- No _____
- If yes, what? _____

November 27, 1984
(After First Preliminary Pre-Test)

RADIO SPOT NO. 1

CLIENT: KWARA STATE MINISTRY OF HEALTH
MESSAGE: SPACING (FOCUS ON MOTHERS)
LENGTH: APPROXIMATELY 60 SECONDS
TITLE: "MAMA OLU"

SOUND: LOUD CRY OF BABY. MOTHER TRIES TO SILENCE THE CRYING BUT
BABY PERSISTS.

MAMA OLU: Doctor, please help me. My youngest has been crying all
day. And I don't know what to do. My other children have
been sick one after another.

SOUND: CONTINUED MUFFLED CRYING CAN BE HEARD. FADES.

DOCTOR: Mama Olu, you look weak and sick yourself. PAUSE. The baby
is malnourished and hungry that's why he cries all the time.

MAMA OLU: (IN DESPERATE VOICE). What should I do? I need your advice
Doctor.

DOCTOR: Mama Olu, you have been giving birth every year. That's why
you are weak and the children sickly. Give the children
nutritious foods. And take a rest before having your next
baby.

ANNOUNCER: (FEMALE VOICE). Take a rest before having your next baby.

For further advice visit the nearest Health and Family
Planning Clinic in Ilorin, Okelele, Ogidi, Koko, Shao and
Oke-Oyi. This is a public service announcement from your
Ministry of Health, Kwara State.

November 27, 1984
(After First Preliminary Pre-Test)

RADIO SPOT NO. 2

CLIENT: KWARA STATE MINISTRY OF HEALTH
MESSAGE: SPACING (FOCUS ON COUPLES)
LENGTH: ABOUT 60 SECONDS
TITLE: "ONCE UPON A TIME"

MUSIC: RINKY-TINK MUSIC ACCOMPANIMENT UP TEMPO USING PIANO OR APPROPRIATE LOCAL INSTRUMENT

ANNOUNCER: Once upon a time there was a husband.....

MUSIC: THREE NOTE BASS.

ANNOUNCER: And a wife.....

MUSIC: THREE NOTE PICCOLO.

ANNOUNCER: They were happy. They had two beautiful healthy children.

MUSIC: ONE NOTE BASS. ONE NOTE PICCOLO.

ANNOUNCER: But then, every year or so they had a baby.

SFX: CRY OF NEW-BORN BABY.

ANNOUNCER: Soon, the family was large.

SFX: NOISE OF MANY CHILDREN.

ANNOUNCER: They worked hard but their income was not enough. Not enough food. Not enough savings.

MUSIC: THREE NOTE BASS, VERY SLOW.
THREE NOTE PICCOLO, EVEN SLOWER.

ANNOUNCER: Today, every husband and wife should discuss when to have children and how many.

Take a rest before your next baby.

Visit the nearest health and Family Planning Clinic in Ilorin, Okelele, Ogidi, Afon, Koko, Shao and Oke-Oyi.

This is a public service announcement from your Kwara State Ministry of Health.

November 27, 1984
(After First Preliminary Pre-Test)

RADIO SPOT NO. 3

CLIENT: KWARA STATE MINISTRY OF HEALTH
MESSAGE: SPACING (YOUNG HUSBANDS)
LENGTH: ABOUT 30 SECONDS
TITLE: "ANDREW, SLOWLY"

MUSIC: CATCHY TUNE, FADE IN AND FADE OUT.

JOHN: Ah, Andrew, I hear you are getting married.

ANDREW: Yes John, I'm getting married
(IN EXCITED VOICE)

JOHN: And you will have children?

ANDREW: (GIGGLES). Of course!

JOAN: Lots of Children?

ANDREW: Yes, lots of children.

JOHN: How many, Andrew?

ANDREW: (COUNTS VERY QUICKLY). One.. Two.. Three.. Four..
Five.. Six.. Seven.. Eight.. Nine.. Ten.

JOHN: (FRANTIC). Stop! Andrew stop!

ANDREW: (STARTLED VOICE) What is it?

JOHN: Can't you count slowly, very slowly please?

MUSIC: FADE IN AND FADE OUT.

ANNOUNCER: Today it is possible to have children slowly. Let your wife
rest first before your next baby. Slower children means
slower expenses and better health for your wife and
children.

Visit the nearest health and family planning clinic in
Ilorin, Okele, Ogidi, Afon, Koko, Shao, and Oke-Oyi.

This is a public service announcement of the Kwara State
Ministry of Health.

November 27, 1984
(After First Preliminary Pre-Test)

RADIO SPOT NO. 4

CLIENT: KWARA STATE MINISTRY OF HEALTH
MESSAGE: SPACING (YOUNG COUPLES)
LENGTH: 30 SECONDS
TITLE: "NOT ENOUGH MONEY"

SFX: CASH REGISTER RINGING

ANNOUNCER: Nowadays it is difficult to provide for the needs of the family. It seems there is always not enough money to spend.

But you could help stretch your money. Have only the number of children you can provide for.

Take a rest before your next baby.

Visit the nearest health and family planning clinic in Ilorin, Okelele, Ogidi, Afon, Koko, Shao and Oke-Oyi.

This is a public service announcement of the Kwara State Ministry of Health.

November 27, 1984
(After First Preliminary Pre-Test)

RADIO SPOT NO. 5

CLIENT: KWARA STATE MINISTRY OF HEALTH
MESSAGE: SPACING (FOCUS ON COUPLES)
LENGTH: 30 SECONDS
TITLE: "THINK FIRST"

MUSIC: CATCHY TUNE, FADE IN AND FADE OUT.

ANNOUNCER #1: Here is an important public service reminder from your Kwara State Ministry of Health.

ANNOUNCER #2: (SLOW, MEASURED TONE). Do you have enough living space at home for your children? Can you buy enough food and clothing for them? Can you have all of them educated? Can you ensure they will grow up healthy and strong? Before having more children, think first. (EMPHASIS ON THINK FIRST).

MUSIC: FADE IN AND FADE OUT.

ANNOUNCER #1: Take a rest before your next baby. Visit the nearest health and Family Planning Clinic in Ilorin, Okelele, Afon, Koko, Shao and Oke-Oyi.

November 27, 1984
(After First Preliminary Pre-Test)

TV SPOT NO. 1

CLIENT: KWARA STATE MINISTRY OF HEALTH
MESSAGE: FAMILY PLANNING (FOCUS ON COUPLES)
LENGTH: 30-60 SECONDS
TITLE: "POWER OF CHOICE"

VIDEO

CLOSE UP OF BOWL OF
FOOD (RICE OR PORRIDGE) WITH EIGHT
CHILDREN'S HANDS PUSHING EACH OTHER
FOR SHARE OF FOOD. FOOD
SPILLING OUT.

CUT TO MEDIUM SHOT OF COUPLE LOOKING HELPLESS
AT THEIR CHILDREN. AGE OF
CHILDREN SHOULD HAVE ONE YEAR GAP.

CUT TO EMPTY BOWL. AND ZOOM IN.

CUT TO MEDIUM SHOT OF HAPPY COUPLE WITH
3-4 CHILDREN.
DINNER TABLE WITH
THREE KINDS OF FOOD (RICE, MEAT WITH
SOUP AND FRUIT).
FAMILY MEMBERS ARE
WELL-GROOMED.

CUT TO MEDIUM SHOT OF CHILDREN
TAKING TURNS GETTING
FOOD FROM THEIR
MOTHER. AGE OF CHILDREN SHOULD
HAVE 3-YEAR GAP

CUT TO CLOSE UP SHOT OF
HUSBAND LOOKING APPROVINGLY
AND SMILING TO WIFE.

AUDIO

SEX: NOISY CHILDREN
ARGUING AND
FIGHTING FOR
FOOD. CHILDREN
CRYING.

COLD: NO SOUND.

MUSIC: FADE IN AND
FADE OUT AND
UNDER.

MUSIC: FADE IN AND
FADE OUT.

November 27, 1984
(After First Preliminary Pre-Test)

TV SPOT NO. 2

CLIENT: KWARA STATE MINISTRY OF HEALTH
MESSAGE: QUALITY OF CHILDREN (FOCUS ON HUSBANDS)
LENGTH: 60 SECONDS
TITLE: "RESPECT"

VIDEO

BACKGROUND SHOT OLD MAN
SITTING UNDER A TREE WITH
HIS SON.

OLD MAN PULLS OUT
HIS TOBACCO POUCH AND GOES INTO
THE MOTION OF PREPARING IT.

CUT TO CLOSE UP SHOT OF SON AND
THEN OF WIFE.

CUT TO CLOSE UP SHOT OF OLD MAN.
USES FINGERS FOR NUMBERS.

CUT TO MEDIUM SHOT OF SON AND
WIFE. ZOOM IN ON SON.

CUT TO MEDIUM SHOT OF TWO CHILD-
REN (DAUGHTER AND SON) RUNNING
TO EMBRACE PETER AND WIFE.

TAG OF NAMES AND LOCATIONS OF
FAMILY PLANNING CLINICS.

AUDIO

GRANDFATHER: Look now,
Peter, you have been married
for the past, eeee..., since
the year that famous rain-
fall; and yet you only have
two children. What is hap-
pening? Is there something
wrong? Let me know. I know
a really good medicine man
who can help you.

PETER: No, No Grandpa. My
wife and I are all fine.

GRANDFATHER: What is the
problem then? We are
waiting for more. I have
eight and your father has
nine.

PETER: Grandpa times have
changed. Now respect is not
measured by the number of
children but by the quality
of children: their health
their grooming and their
education. We are taking a
rest before having the next
baby.

ANNOUNCER: For best advice
visit the health and family
planning clinic nearest you
in Ilorin, Okelele, Ogidi,
Afon, Shao, Koko and
Oke-Oyi.

This is a public service
announcement from your Kwara
State Ministry of Health.

THE JOHNS HOPKINS UNIVERSITY**HOPKINS POPULATION CENTER**

POPULATION INFORMATION PROGRAM
 624 North Broadway, Baltimore, Maryland 21205 USA
 Population Reports • **POPLINE**
 301/955-8200 • Cable **POPINFORM**
 Population Communication Services (PCS)
 301/955-7666 • Telex 701815

January 17, 1985

Mr. Abayomi Fajobi
 Executive Director
 Planned Parenthood Federation
 of Nigeria (PPFN)
 2, Akimmade St.
 Anthony Bus Stop
 1 Korodu Road
 PMB 12657
 Lagos, NIGERIA

Dear Mr. Fajobi:

It was a pleasure meeting you and your staff to discuss joint projects and activities in Nigeria. As you may have been probably briefed, my discussions with Marc Okunnu while you were in Madagascar for the IPPF meeting, were most fruitful and covered all areas of mutual concern. Let me summarize the major points:

- I. When I arrived in Lagos November 19, I left the following items for PPFN at the U.S. Embassy before proceeding to Ilorin, Kwara State:
 - a) Letter of Dr. Piotrow to you;
 - b) Two copies of the revised AF-NIG-03 project document which has been increased by about \$42,000 to reflect the modifications arrived at during Dr. Piotrow's visit;
 - c) Copies of the PCS communication process poster and the magazine "African Population";
 - d) Sample copies of pill, IUCD and condom posters (enlarged version of the covers of the Yoruba booklets);
 - e) Envelopes containing negatives for the Hausa version of the pill, IUCD and condom booklets.

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Marc Okunnu has informed me that the materials were picked up at the U.S. Embassy.

2. I clarified with Marc certain issues you raised in your letter to Dr. Magarick of our office regarding translations of the booklets. The bill for the Pidgin English translation requested to be charged to AF-NIG-02 will instead be paid directly. There is no line budget item to use in AF-NIG-02. Also, the Hausa and Ibo translations have already been made, hence, there is no need for PPFN to engage translators.
3. Printing and Distribution of Family Planning Methods Booklets (Projet AF-NIG-02).
 - a) In separate discussions with you, Mr. Okunnu and Dr. Keys MacManus, AID Affairs Officer, it was agreed that the extra sentence ("The condom should be used only once") to be inserted in page ten of the Hausa condom booklet need not be included as this would only delay the printing of the booklet by a month. The existing text ("The man throws away the condom he has used into the toilet") already suggests the same idea that the condom should be used once. It was agreed that in orientation sessions for field and clinic personnel in the use of the booklets, the same message should be emphasized.
 - b) Marc and me also explored alternate ways to develop a more active distribution system for the print materials. Among them are: the use of scheduled workshops or meetings of agencies delivering family planning services, especially MOH; hiring of delivery vans to move bulk materials in strategic places; the possibility of tapping Sterling Products to include IEC materials in their delivery of contraceptive supplies. I informed Marc that I discussed the idea with Mr. Andrew Franklin and Jean Karambizi of FPIA Africa Region and they have no objections to exploring the possibility. Dr. MacManus has also indicated her willingness to help. Marc has agreed to consider it as one alternative.
 - c) I agreed with Marc to go ahead in January with the seminar on distribution of materials for the Hausa and Ibo areas as an add-on to a regular activity. Since the next meeting of State Secretaries is not scheduled until the middle of the year, it would be too late to conduct the workshop as printing of the materials is expected to be completed the first quarter of 1985. A workshop would also be too expensive to convene for State Secretaries involved only to discuss distribution of the booklets.

- d) It is good to know that bids to seven (7) printers for the Pidgin English version of the pill, IUCD and condom booklets have been issued. To speed up the process, we also agreed that PPFN issue bids for both the Hausa and the Ibo versions. We agreed that there was no need to wait for the negatives of the Ibo version (I brought the negatives for Hausa) in order to invite bids. The specifications are virtually the same as the Yoruba booklets except for the changes in the number of pages. The number of pages for the Ibo and Pidgin English versions of the three booklets are the same as the pages in the negatives of the Hausa versions. You will note from the negatives of the Hausa IUCD version that the red blot on page five has been removed. This is in response to some negative feedback conveyed by Dr. MacManus. The removal would also considerably reduce the cost of printing. I sent you, in early January, through Peggy Curlin of CEDPA, negatives of the Pidgin English version of the three booklets and the Ibo version of the IUCD and pill booklets. The Ibo condom booklet has been delayed and the negatives will have to be sent to you by mid-January. My own feeling is that, on the whole, this would not delay printing since you still have to give allowance for the turn-around time for the printers to submit their bids (usually a maximum of two weeks) including the turn-around time for JHU/PCS concurrence. By that time you will have received all the negatives.

4. Family Planning Communication Campaign, Plateau State, Nigeria (Project AF-NIG-03).

- a) The revised project document has been submitted November 20, 1984 to AID/Washington for approval. As soon as we receive the approval we will send you official copies of the sub-agreement. Meanwhile, I have sat down with Marc to prepare detailed bidding specifications for the advertising agencies to be invited to bid in the project. Based on what we agreed he will prepare the document for your review. Beyond the detailed specifications for the materials to be produced (e.g. size, length, quality of paper, number of colors, etc.) we shall also be requesting the following: 1) certificate of business registration, 2) tax clearance certificate, 3) annual report and list of officers with brief description of their jobs, 4) list of clients in the last three years, 5) samples of materials produced and 6) a conceptual presentation involving style and content (including sample print, radio and TV treatments). Pre-testing of materials prior to final production would be an important component of the bidding specifications as well as an important criteria for the choice of the advertising agency.

- b) We have also agreed on the job description for the Program Officer/IEC to be recruited as part of Project AF-NIG-03. Enclosed is a copy of the final job description for your reference. We visited Price Waterhouse, the company engaged by Pathfinder Fund to search for an IEC specialists (20% of the costs of maintaining the IEC specialist would be paid by JHU/PCS). The recruitment process would culminate by the end of February which would be too late for us to be able to look over some of the applicants and consider them for the PPFN Program officer/IEC position. Hence, we agreed that PPFN should proceed with its own December advertisement of job openings to include those to be recruited under AF-NIG-03.
- c) I have requested Marc to keep us posted as to the membership of the Project Advisory Committee in Plateau State. I am glad to know that you and Marc appreciate the value of such a group.
- d) Marc has informed me about the difficult procedures necessary to open an account for AF-NIG-03. We agreed that PPFN send us the accomplished fiscal information sheet as soon as problems with the bank are resolved. This is vital to ensure rapid remittance of funds.

5. Proposed National Radio/TV Workshop in Nigeria.

Encouraged by the result of our productive December 6 meeting with officials of the Federal Radio Corporation of Nigeria (Mr. Sunday Young-Harry, Director of the Lagos Zonal Area; Mr. Patrick Egbe, Principal Producer, and participant to the URTNA workshop; and Ms. Stella Bassy, Head of Programmes), I sat down with Ms. Ronke Okusanya (participant to the URTNA workshop and Controller of Programmes, Nigerian Television Authority, Zone A, Ibadan), and later, with Marc, to develop ideas on the proposed national Radio/TV workshop for Nigeria. Among the major features we agreed tentatively are:

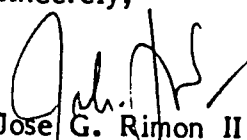
1. The workshop would be co-sponsored by PPFN, FRCN, NTA, Ministry of Health (MOH) and Ministry of Information (MOI); JHU/PCS and Pathfinder will provide support and technical assistance.
2. PPFN will assume a lead agency role and administer the funds. The workshop is the first part of two-phases: the first phase will involve participants at the Zonal and federal levels while the second phase will focus at the state level; this is necessary in order to limit the number of participants and make the workshop more manageable and effective. Given a total of 19 states it may be worthwhile to think of the second phase beyond just one workshop. The URTNA model of drawing together family planning and media professionals would be used.

3. For the first national workshop a maximum of 40 participants and 10 observers will be invited. They will be complemented by a pool of support staff. The tentative proposed composition of participants include 12 from the six TV Zonal areas; four from the three radio zones; four from MOH (two from the federal level and the other two from Plateau and Kwara); five from PPFN (two from headquarters and one each from Plateau, Oyo and another state); and two from the Federal Ministry of Information. Representatives from international donor agencies will be invited as observers.
4. The workshop will involve participation of high Nigerian government officials and the workshop will be heavily covered by the media.
5. Marc will draft the detailed proposal in cooperation with Ronke Okusanya of NTA and Patrick Egbe of FRCN for JHU/PCS review.
6. Other matters
 - a) I briefed Marc on the JHU/PCS project with the Ministry of Health, Kwara State. We discussed possibilities on the wider use and exchange of media materials developed in Kwara and Plateau States.
 - b) We also discussed your proposal to UNFPA to develop and distribute booklets on injectibles.

On the whole, I consider my meetings with your staff very productive. I found working with Marc a very pleasant experience. I shall be visiting Nigeria Feb. 22 to March 15 and will be in Lagos Feb. 22-26, March 5-8 and March 12-15. I hope to be working with you on those days that I'll be in Lagos. I will be arriving 5:30 a.m. on Feb. 22 on British Caledonian Flight No. 371.

Finally, let me express my appreciation once again for the hospitality extended by your staff during my last visit. I look forward to meeting you in February.

Sincerely,



Jose G. Rimón II
Regional Program Coordinator
Population Communications Services

JGR:adt

cc: Dr. Keys MacManus/USAID/Lagos
Marc Okunnu Sr., PPFN

PLANNED PARENTHOOD FEDERATION OF NIGERIA

JOB DESCRIPTION

(PROGRAMME OFFICER/IEC)

I. PRIMARY RESPONSIBILITY

Under supervision of the Programme Director, the Programme Officer/Information, Education and Communication (PO/IEC) is responsible for implementation (including scheduling, organising, coordinating and monitoring all aspects) of the PPFN's communication projects (Nigeria - 02 and 03) with The Johns Hopkins University/Population Communications Services Project (JHU/PCS), within the broad context of the PPFN's information and education strategy. The responsibility involves extensive contacts with PPFN Branches, particularly in Plateau State, and liaison and collaboration with various government and sub-contracted advertising agencies to design, develop and produce IE & C materials.

II. WORK FUNCTIONS

1. Monitor and coordinate implementation of the Nig-02 and 03 projects by sub-contracted advertising agencies to ensure adherence to the terms of the JHU/PPFN contract.
2. Provide technical assistance to the PPFN Branch in Plateau State in designing the IEC campaign, developing media relations and organising seminars, meetings and workshops.
3. Develop guidelines on technical content and presentation of messages, including performance and quality standards in production, for approval by the Executive Director.