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RECOMMENDATIONS FOR THE PUBLIC HEALTH DEPARTMENT
OF THE GOVERNMENT OF MAHARASHTRA
ON STRATEGIES TO APPOINT ADVERTISING AGENCIES

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List of Abbreviations

- CNA - Communication Needs Assessment
- ORT - Oral Rehydration Treatment
- TB - Tuberculosis
- USAID - United States Agency for International Development

I. INTRODUCTION

As advised by Dr. Rogers Beasley of USAID, I went to Bombay on July 22, 1985 for meetings with Mr. Srinivasan, Secretary of the Health Department of the Maharashtra Government. The purpose was to follow up on the marketing recommendations made by USAID based on the PRITECH team's visit to Maharashtra and the presentation which they made to Public Health Department officials on May 2, 1985.

The meetings with Mr. Srinivasan and officials on July 23-25 were followed by another meeting on August 2, 1985 to give further shape to the mass media plan. This report will cover the activities for both visits.

II. EXECUTIVE SUMMARY

It was agreed with Mr. Srinivasan that the first step would be for his department to write a strategy document after reviewing USAID's marketing recommendations. At his request, Dr. Saramma Mathai of USAID and I worked together with officials of his department to write this document. Our first task was to see that the earlier PRITECH team's marketing recommendations, as endorsed by USAID, were adopted in substance by the Health Department.

The document was given to Mr. Srinivasan who circulated it to members of the Marketing Advisory Committee of his department for their comments. The Committee met August 2, 1985 and approved the document for use by Mr. Srinivasan as his official policy guideline for mass media campaigns.

It was agreed that professional advertising agencies would be selected for these campaigns. I recommended to Mr. Srinivasan the criteria to be used for selecting advertising agencies, as well as a list of agencies which would be asked to make presentations to the department. These recommendations were agreed upon as well.

In the course of these discussions, an overall promotional budget was indicated by Mr. Srinivasan - Rs.175 lakhs (US \$1.48 million). This amount

was then allocated for the different programmes of the Department.

At this stage, the main problem is to find a source which would fund the fees of the advertising agencies selected for developing these campaigns. Dr. Mathai promised to take this up with USAID; for policy reasons, the government of Maharashtra can only bear actual media and production costs but not commissions/fees of advertising agencies.

III. OBJECTIVES

In a meeting with Dr. Rogers Beasley of USAID in Delhi in early July 1985, soon after the PRITECH team's visit, we agreed that our immediate objective was to discuss with the respective State Governments implementation of mass media campaigns and review of their training materials.

At Dr. Beasley's initiative, a meeting was held with Mr. Srinivasan, Secretary, Public Health Department of the Maharashtra Government, in Bombay to discuss questions and to assist his department in taking practical measures towards:

- Concurrence on a strategy for a social marketing approach;
- Agreement on priority issues for mass media campaigns;
- The importance of consistency in messages given to health workers through training and to the target audience through mass media; and
- Agreement to use professional advertising agencies and to decide on a process of selection.

Mr. Srinivasan welcomed USAID's initiative to support the department's review of the mass media recommendations. He requested that Dr. Saramma Mathai of USAID and myself help draft a strategy document.

IV. HIGHLIGHTS OF ACTIVITIES

In a series of meetings which commenced on July 23, 1985 with Mr. Srinivasan in Bombay, it was decided that his department would develop a strategy note on mass media communications which would serve as the official policy guideline.

A. Strategy Note

The department had been studying USAID recommendations (based on PRITECH team observations) but had not made much progress. At Mr. Srinivasan's request, Dr. Saramma Mathai of USAID and I spent the next day drafting a strategy note which could be adopted by the Health Department. Department officials worked with us in adopting the substance of the USAID recommendations and preparing the document.

On July 25, at a meeting with Mr. Srinivasan, the document was accepted in principle with some modifications.

Mr. Srinivasan desired that this document should be reviewed by his Marketing Advisory Committee before further action would be taken.

B. Marketing Advisory Committee

This committee had been set up by Mr. Srinivasan earlier in order to bring into his deliberations some marketing expertise through the presence of seasoned professionals. At my suggestion, he had also included Mr. Jagdish Chopra and Mr. Gurucharan Das.

Mr. Chopra was previously Marketing Director of the Unilever Company in India and is presently Senior Vice-President of Voltas, a very large company in the Tata Group. Mr. Gurucharan Das is President of Richardson Hindustan Ltd., the Vicks Company in India. Both have outstanding track records in marketing.

A meeting of the Marketing Advisory Committee was convened by Mr. Srinivasan on August 2, 1985 and, at his request, I attended it. Unfortunately, the two key personalities, Mr. Chopra and Mr. Das, were both unable to attend. Those members who attended adopted the strategy document.

C. Choice of Ad Strategies

My proposal regarding the criteria for short-listing those advertising agencies which would be asked to make presentations was adopted (Appendix I).

The short-list of such agencies was also agreed upon after some discussion.

The letter, which I drafted, inviting these agencies to make their presentations was accepted and the department would send out the requisite invitations to the short-listed agencies. Tentatively, the date for presentation of credentials by these agencies is fixed for mid-September 1985.

D. Training

On July 24, Dr. Mathai and I had extended meetings with Dr. Panse, Additional Director of Health Services, and Dr. Mainker, Deputy Director of Health, both of which are involved in the training of health workers.

I recommended that instructors use visual and other training aids to ensure the consistency and accuracy of messages given to the trainees. The "telling, showing, doing" method would be used.

Slides, video cassettes, and printed modules would be the principal training instruments. There would be coordination between training authorities and the selected advertising agencies also to ensure the consistency and accuracy of messages.

This addresses the problem of message distortion from the time guidelines are stated to when they are communicated to the grassroots level.

E. Brief for Agencies

Mr. Srinivasan also asked his departmental officials to immediately commence work on a briefing document for the agencies which would be selected. This document would cover the following aspects:

- Existing status of health achievements and the targets;
- Existing media infrastructure of the Health Department, e.g., cinema vans, etc.;
- Data on audience and awareness as brought out by the Communication Needs Assessment (CNA) survey;
- The basic messages for each programme;
- Technical notes to assist the agencies in developing their campaigns.

F. Promotional Budget

Mr. Srinivasan indicated that his budget for health education and mass media would be in the region of Rs.175 lakhs (US\$ 1.48 million). This seems an appropriate amount for the task. The Committee discussed the factors which should determine the budget to be allocated to the different programmes. The factors for such allocation were agreed upon as:

- Education and attitude change should be amenable to mass media.
- The extent of reach required for the target audience.

- Speed of implementation.
- Timing and seasonality, e.g. diarrhea.
- No programme would receive an allocation below the threshold level of effectiveness.

The following allocations were agreed upon in respect of the priority of the programmes:

Copper-T	Rs.50 - 60 lakhs
Oral Pills	Rs.20 - 30 lakhs
ORT	Rs.15 lakhs
Ante-Natal/ Immunisation	Rs.40 lakhs
TB/Leprosy	Rs.30 lakhs
	Rs.175 lakhs

V. OBSERVATIONS AND CONCLUSIONS

Progress has been made in the following directions:

1. The Health Department of the Maharashtra Government and its leader, the Secretary, Mr. Srinivasan, have decided to adopt a social marketing approach for selected programmes on spacing and health.
2. A strategy note reflecting this approach has been drawn up and will be used in developing mass media communication programmes.
3. A decision has been made to appoint professional advertising agencies for mass media communications and to assist the Department in

developing training materials.

4. Recognition of the importance of coordinated and consistent messages given to the health providers through departmental training and to the target audiences through mass media.
5. Recognition of the importance of coordinating field activities of the health worker with the mass media activities in that area.
6. Recognition that video technology and video equipment can greatly assist the department in dissemination of training as well as communication to their audience.
7. Priorities for the mass media campaigns for the immediate period have been agreed upon and provisional budgets allocated.
8. The criteria for selecting advertising agencies have been agreed upon, along with the short list of agencies to be invited to present their credentials.

Conclusions

The first operational problem at this stage is to locate a source which would fund the selected advertising agencies through suitable fees which would be a strong motivation to the agencies to give their best to these campaigns.

The Department is not accustomed to dealing with professional advertising agencies. I foresee considerable practical difficulties in working out an effective and expeditious procedure for 1) briefing agencies, 2) evaluating their work, and 3) making appropriate decisions. Such procedures will need to be worked out at an early date and then monitored to overcome problems as they arise.

FAMILY WELFARE COMMUNICATIONS

Criteria for Selection of Advertising Agencies

1. Track record of outstanding and effective advertising.
2. Involvement in social change through advertising.
3. Experience in communicating with "down" market and rural audiences.
4. Media planning skills.
5. Willingness to set up adequate organisational structure of personnel committed to the task: Account Director and Service Executives; Creative Director plus Art Director and Copywriters; Media Planner; Production Executives for print, radio, cinema, and TV.
6. Willingness to work on a fee basis.

Note:

Two ad agencies would be selected and the major programmes should be divided between them.

APPENDIX II

SHORT-LIST OF ADVERTISING AGENCIES
WHICH WILL BE ASKED
TO PRESENT THEIR CREDENTIALS

1. Hindustan Thompson Associates
2. Chaitra Advertising
3. Ulka Advertising
4. Everest Advertising
5. Rediffusion Advertising
6. Sista's Advertising

Stand by (in case selection cannot be made from the above):

7. daCunha Advertising
8. Interpublicity