

PA-ABN-210  
ISN 80704

**MARKETING ASSISTANCE  
TO MEDIPHARM**

**A Report Prepared by Consultant:  
FLETCHER CATRON (PATH)**

**During The Period:  
MARCH 1992**

**TECHNOLOGIES FOR PRIMARY HEALTH CARE (PRITECH) PROJECT  
Supported By The:**

**U.S. Agency for International Development  
CONTRACT NO: AID/DPE-5969-Z-00-7064-00  
PROJECT NO: 936-5969**

**AUTHORIZATION:  
AID/S&T/HEA: 12/07/92  
ASSGN NO: SUP 228-UG**

## TABLE OF CONTENTS

I. Purpose of Visit . . . . .	1
II. ORS Promotion Committee . . . . .	1
III. USAID/Kampala and PRITECH . . . . .	2
IV. Medipharm . . . . .	5
V. ARMTRADES . . . . .	8
VI. Other Agencies . . . . .	10

### Attachments

1. Recommendations for Medipharm
2. Draft Regional Sales Projections
3. ORADEX Sales Reporting Protocol
4. Comprehensive ORADEX Sales/Distribution Report
5. ORADEX Price Structure Suggested Revisions
6. Report on Tour of Kayunga, Jinja, Iganga, Mbale and Mukono to Promote ORADEX
7. Report on Tour of Luwero, Makasa and Mbarara to Promote ORADEX
8. Proposed Programme Calendar for the Year 1992

## I. Purpose of Visit

The visit to Uganda was conducted to (1) meet with the ORS Promotion Committee to review progress on ORADEx sales targets, formulate regional sales goals using current national sales targets, and discuss product distribution concerns; (2) draft a document with Medipharm, ARMTRADES, and Media Consultants which reviews the effectiveness of all promotional materials; (3) meet with Sjoerd Postma, PRITECH representative, and coordinate supervision of promotional communications between Medipharm, ARMTRADES, and Media Consultants; (4) meet with USAID/Kampala to determine the status of additional monies and provide an update on current project status; and (5) meet with UNICEF and review roles for continued interaction on the ORS promotional program between USAID/Kampala, UNICEF, and Medipharm.

## II. ORS Promotion Committee

Upon arrival in Kampala, a meeting of the ORS Promotion Committee was held (see Attachment 1 for recommendations). The following representatives were present: Mr. David Puckett, USAID/Kampala; Dr. Livingstone Byarubaga, UNICEF/Uganda; Mr. Mike Daugherty, Media Consultants; Mr. Rogers Collins, Mr. Peter Ssali-Mukasa, Mr. Lamuka Nsubuga, and Mr. Charles Kiwendo, Medipharm; Mr. Roy Mayinja, ARMTRADES; Mr. Sjoerd Postma, PRITECH/Uganda; Dr. Fred Musonge, MOH/CDD Program Manager; and Mr. Fletcher Catron, PATH.

The Committee reviewed and discussed the effectiveness of each of the promotional materials developed to date and made suggestions for revised versions of new materials as they are developed. M. Daugherty presented three versions of a draft radio announcement that is to have a final recording by February 5, 1992. Comments on content and theme were addressed.

- 1 -

Sales performance of ORADEX by the product distributor was reviewed. Sales figures totalled 90,837 sachets through the end of January 1992, with 48,096 of those being sold by Medipharm from its dispensary and 42,741 sachets sold by ARMTRADES. Total targets sales for both Medipharm and ARMTRADES through January 1992 were 79,000 sachets; therefore, sales exceeded projections. This performance may have been due, in part, to large quantities given for initial stocking of ORADEX in shops and pharmacies.

ARMTRADES sales goal through January was 60,000 sachets and Medipharm's was 19,000. ARMTRADES expressed its concern that product sales were low due to continued sale or "leakage" of UNICEF sachets to private shops and outlets. ARMTRADES sales staff reports continually encountering UNICEF sachets in shops and pharmacies throughout the country. These UNICEF sachets are typically available for half the retail price of ORADEX, thus undercutting the sales of ORADEX. A general discussion was held on the importance of having the MOH carefully monitor public sector ORS sachets to avoid illegal sales.

The Committee discussed and agreed that PATH and PRITECH should consider 1992 efforts to support detailed market research on product acceptance in conjunction with planning to support US\$15,000 to US\$20,000 in promotional costs for ORADEX in the upcoming project year of July 1992-June 1993. Research to determine product acceptability and promotional material message perception/believability was deemed crucial to further development of any advertising materials.

### III. USAID/Kampala and PRITECH

Upon arrival, a briefing session was held with Ms. Joan La Rosa and D. Puckett, USAID/Kampala and S. Postma, PRITECH/Uganda.

Project history was reviewed, as well as the current status of both public and private sector ORS products. The scope of work for this visit was reviewed and J. La Rosa was oriented to issues concerning the sale of the private sector product, ORADEx.

J. La Rosa brings a valuable perspective to the project, as she was posted in Peru during the beginning of Project SUPPORT efforts to initiate local production of ORS in that country.

D. Puckett discussed USAID's satisfaction with this highly successful, high visibility health project. A general conversation ensued on the mechanism of providing continued technical assistance to Medipharm through the PRITECH project.

D. Puckett requested that PATH submit a discussion draft for both production- and promotion-related technical assistance though June 1993. S. Postma offered his assistance in providing comments on the discussion draft once it is submitted.

S. Postma also discussed his views on ORS product-related promotion and how PRITECH's public sector focus might successfully be used to complement the private sector promotional campaign. Three specific areas were identified for potential collaboration:

1. S. Postma will investigate allowing Medipharm and ARMTRADES sales personnel to participate in the UNICEF/CDD-sponsored CDD Program Manager Diarrheal Disease Training program in March 1992. This training will give both sales forces detailed, up-to-date knowledge of diarrheal disease case management strategies and product knowledge. This information is intended to make each group a more effective vendor of ORS to pharmacists.

2. PRITECH and PATH will collaborate to design and implement a pilot training program for 100 pharmacists in Kampala to provide up-to-date information on diarrheal disease case management and ethical drug prescription practices.

This pilot training program would provide a model for an extended campaign to 200 additional rural pharmacists and shopkeepers in 10 towns and villages throughout Uganda. The estimated cost for training all 300 pharmacists is US\$5,000.

3. S. Postma will investigate the feasibility of funding locally produced taxi stickers to augment the ORADEX promotional program and help increase brand awareness. This item is estimated to cost US\$5,000.

S. Postma agreed that two important links between successful ORADEX sales were both the ARMTRADES and Medipharm sales forces and the pharmacists. Training efforts would be coupled with continued consumer education and promotion to create complementary "push-pull" marketing synergism.

S. Postma and PATH also discussed other areas where ORADEX sales might be stimulated. Some of these areas included asking the MOH/CDD program to declare a national ORS awareness week with banners, plays, and radio programs and increasing sales to other larger medical outlets, such as Joint Medical Stores and Catholic Relief Services. S. Postma also expressed interest in clarifying product mixing and dosage messages in all health promotion/education materials, whether public or private sector.

Debriefing meetings with USAID (with the same participants) emphasized Medipharm's continued need for intensive

technical assistance in a combined, systematic approach to their administrative, marketing, and production needs. D. Puckett recognized the fact that the project is at an important crossroads for creating systems which will help ensure sustainable ORS production and private sector sales.

The "leakage" of public sector ORS in shops and pharmacies was discussed as a major factor affecting the viability of ORADEX sales. PATH informed D. Puckett that they would send a letter to Dr. Musonge communicating the importance of the Ministry's cooperation in monitoring distribution of ORS to approved health centers and suggesting the creation of some statement of liability to health posts should they be identified as selling ORS.

#### IV. Medipharm

Meetings with Medipharm revealed continued concern on the viability of ORADEX distributor, ARMTRADES, Ltd. Medipharm's comments focused on the following:

- ORADEX sales have barely maintained the projected quantities to maintain adequate cash flow (see Attachment 2).
- ARMTRADES customers have not been uniformly offered credit.
- ARMTRADES was late in paying Medipharm for product.

All of these subjects were addressed with the distributor during this visit. Mr. Mayinja of ARMTRADES feels that Medipharm has aggressively sold to clients that were rightfully part of the distributor's sales territory outside of Kampala, occasionally offering the product for less than the distributor was able to. ARMTRADES has extended credit to those clients whose purchase volume merits credit terms and who have solid credit history.

It is apparent that with Medipharm's lack of experience with a product distributor, there is lack of clarity regarding which group should have responsibility for distinct sales areas to avoid any overlap. To remedy the situation, Medipharm agreed to meet on a weekly basis with ARMTRADES sales personnel to review sales territories in and around Kampala and maintain communication on which group would serve which customers. PATH suggested that the large pharmacies that purchase multiple products and are existing clients of ARMTRADES' be served by ARMTRADES sales personnel. Other smaller shops and dukas (local multi-purpose stores) are more rightfully Medipharm's territory.

PATH reviewed with Medipharm its invoicing procedures. It is apparent that Medipharm lacks extensive experience in invoicing and billing clients. Medipharm had not billed ARMTRADES for ORADEX sent them. Invoices simply stated the quantity and the date that product was delivered, with no reference to exchange rate, credit terms, payment due date, or any applicable penalty for late payment. Samples of invoicing and billing procedures were reviewed and will be instituted by Medipharm. In addition, Medipharm had been invoicing ARMTRADES for ORADEX in US dollars (US\$0.12 cents/sachet) and then requesting payment at a historical (October 1991) exchange rate, resulting in a loss in revenue. Updating the exchange rate on product invoices was discussed with both Medipharm and ARMTRADES and will be instituted on a quarterly basis with product invoiced to the distributor.

Medipharm remains skeptical about the necessity/effectiveness of using a distributor for ORADEX sales. Medipharm pointed out that it effectively sold more product in Kampala and surrounding areas than the distributor was able to sell in the rest of the country. PATH encouraged Medipharm to work with the distributor to define sales territories carefully and divide up which areas and shops

will be served by which sales groups to avoid duplication of effort. Medipharm does not perceive the distributor as its customer, but rather as a needless intermediary making a profit on its product.

PATH encouraged Medipharm to think of the distributor not only as its customer that it should strive to service in a timely and efficient manner but, even more importantly, as an agency that performs a vital rural product distribution function--which it is currently unable to assume for lack of an appropriate vehicle and sales staff. Medipharm agreed to hold weekly meetings and review sales figures with ARMTRADES to understand how best to serve the pharmacists and shop owners serviced.

Mr. Collins and PATH discussed that while the distributor commission paid to ARMTRADES is 25 shillings per sachet sold, Medipharm could not pay for and maintain its own distribution and sales capability with vehicles and sales staff for that price.

At Medipharm's suggestion, ARMTRADES was encouraged to pursue bulk sales to Foods & Beverages, Ltd., for a reduced commission. After price and sale terms negotiations with ARMTRADES, it was agreed that ARMTRADES would pursue sales to Foods & Beverages. Bulk sales would allow ARMTRADES a small commission for product purchased by Foods & Beverages in cash and would facilitate product distribution to those areas of the country where the distributor maintains less than optimal delivery. This arrangement would provide Medipharm with immediate cash for product sold to Foods & Beverages. In addition, ORADEX would be available to shop owners and pharmacists in remote areas at the same price as product from the ARMTRADES sale force. Mr. Mayinja agreed to approach Foods & Beverages. Promotional materials would be supplied to the main Foods & Beverages national distribution center, and rural depots would then be supplied with posters, metal signs, and calendars.

The next subjects covered with Medipharm included the quantity of remaining promotional materials and the content of the current calendars, radio and newspaper ads.

Mr. Nsubuga reported on the remaining quantities of 1991 promotional materials:

Metal Signs	3,000
T-Shirts	200
Calendars (1992)	2,500
Posters	22,500
Small Banners	1
Big Banners	3

Medipharm will draw up plans for distribution of these remaining promotional materials and will submit them to PATH.

Medipharm currently requires assistance in developing administrative and basic financial management skills. The increased administrative burden, as a result of ORS production, has strained its existing administrative capabilities. Assistance to install cost accounting, personnel management, marketing, advertising, and materials procurement capabilities are key to the sustainability of this project. These areas will be addressed in the discussion draft given to D. Puckett for continued technical assistance to Medipharm through June 1993.

## V. ARMTRADES

Frequent meetings were held with the ORADDEX distributor, ARMTRADES. Given Medipharm's concern regarding actual vs. projected sales, detailed regional forecasts were drawn up to track sales performance, create a mechanism to allow for tracking

sales performance, and identify areas where promotional efforts should be concentrated (see Attachments 3 and 4). These discussions resulted in the regional sales projections. The lack of sales history for ORADEX and the novelty of a private sector ORS product combine to make these projections experimental. The projections will be revised on a quarterly basis with both the distributor and Medipharm.

Product pricing was also reviewed. The exchange rate at which the distributor will pay for product invoiced was updated from 780 Uganda shillings/sachet to 940. It was, henceforth, agreed that quarterly exchange rate reviews between Medipharm and ARMTRADES would be standard. A pricing review during the visit resulted in the price structure referenced in Attachment 5.

ARMTRADES voiced strong concern that their sales force should receive some formal training in ORS sales techniques and detailed information on diarrheal disease case management. As a result, the ARMTRADES and Medipharm sales staff have been tentatively scheduled, pending S. Postma's investigation, to be included in the CDD program managers training to be held in March 1992. This training is offered through UNICEF and covers comprehensive information on diarrheal disease case management. This effort will be part of a longer term effort to provide continued training to both sales forces.

ARMTRADES was also very concerned about Medipharm's aggressive sale of ORS both within Kampala and around the country. Several established clients of ARMTRADES were approached by Medipharm, thus causing confusion as to which organization would be the responsible party for customer servicing on a regular basis. In discussing the matter with both Medipharm and ARMTRADES, it was agreed that weekly meetings between the companies is intended to clarify which group will serve which clients to avoid duplication of effort and customer confusion.

It is clear from these interactions that Medipharm will need continued supervision to manage their distributor relations properly. PATH believes that Medipharm is not capable of national distribution with its current transportation facilities and must rely on ARMTRADES. Medipharm's challenge will lie in servicing its distributor in a timely fashion with accurate invoices, monthly statements, and payment due notices. This, combined with accurate production and inventory planning, will give Medipharm the experience needed to eventually consider assuming distribution and stock maintenance on its own.

ARMTRADES is concomitantly distributing the USAID-sponsored SOMARC condom through a parallel social marketing program. Reports indicate that while there have been problems with religious authorities opposing the marketing of the condoms, ARMTRADES has performed well in product distribution and marketing.

## VI. Other Agencies

Medipharm submitted reports (Attachments 6 and 7) from the two drama groups on their activities during the product launch. It is widely felt that this activity should be repeated.

The schedule for the Ugandan Society of Traditional Healers who have incorporated ORADEX training into their regional workshops is also included (Attachment 8). Using training materials from the CDD Program and UNICEF, the Traditional Healers' Association will educate all of its members on oral rehydration therapy. The schedule lists eight separate training events focusing on AIDS and ORADEX as distinct health subjects throughout 1992.

## Recommendations for Medipharm

1. Open a U.S. dollar-denominated account. Cash reserves may be held in dollars to limit inflationary losses of the Uganda shilling.

This account will allow monthly expenditures to be calculated in Uganda shillings and the appropriate amount of dollars converted on the day of payment to cover costs. This would apply, for instance, to payroll or other administrative costs.

A Ugandan shilling account would still be maintained to cover smaller administrative costs for local purchases in Ugandan shillings.

2. Reach an agreement regarding periodic (for example, quarterly) reviews of exchange rates for suppliers with whom Medipharm issues invoices in U.S. dollars. This will effectively limit the inflationary exchange loss.
3. List the total Ugandan shilling amount owed, which can be calculated at the individual agreed upon quarterly exchange rates, on monthly billing statements.

After reviewing the total ORS production capacity and 1991-1992 the sales projections, the following surplus was estimated:

1,650,000	Total production capacity
<u>791,313</u>	MOH share
858,687	Remaining sachets for sale in public or private sector
<u>403,000</u>	Sales Projection Estimate
455,687	Surplus capacity for sale to UNICEF for the MOH (or private sector if sales exceed projected 550,000 sachets)

## Draft Regional Sales Projections

Private sector sales targets for ORADEX sales are as follows:

Year 1	(Oct 1 1991-Sept 30 1992)	403,000 sachets
Year 2	(Oct 1 1992-Sept 30 1993)	550,000 sachets
Year 3	(Oct 1 1993-Sept 30 1994)	750,000 sachets
Year 4	(Oct 1 1994-Sept 30 1995)	1,150,000 sachets
Year 5	(Oct 1 1995-Sept 30 1996)	1,350,000 sachets

The 1992-1993 annual figures have been broken down into regional forecasts for ARMTRADES in the following manner (all monthly quantities are expressed in thousands, e.g., 7,500 sachets = 7.5):

Region	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Kampala	8	3	8	12.5	13	15	13	13	13	13	13	13
Jinja	4	1	2	3	5	5	5	5	5	5	5	5
Masaka	4	1	2	3	2.5	5	5	5	5	5	5	5
Mbarara	1	0	1.5	3	2	3	5	3	3	3	3	3
Mbale	2	0	1	2	2	2	3	2	2	2	2	2
Gulu	1	0	.5	1	1	2	2	2	2	2	2	2
Sub Total	20	5	15	20	25	30	35	30	30	30	30	30

Medipharm Sales Projection:

Region	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Kampala	2	4	6	7	9	10	10	11	11	11	11	11
TOTAL	22	9	21	27	34	40	45	41	41	41	41	41

YEARLY TOTAL = 403,000 sachets (100% of target)

112

ORADEx

Sales Reporting Protocol

1. Medipharm compiles its total number of sachets sold by the 15th day of each month for the previous month.
2. Medipharm collects from Roy Mayinja/ARMTRADES the "ARMTRADES Sales/Distribution Report" no later than the 20th of each month for the previous month's sales figures. This document should include the written portions which describe backorders and the reported effect of marketing and promotional activities.
3. Combining sales figures and other pertinent information from Medipharm and ARMTRADES, Medipharm completes the attached "Comprehensive Oradex Sales/Distribution Report." A copy of this document is faxed to PATH, attention K. Mahmood/F. Catron before the 25th of the month that the report is due. This document should ALSO include the written portions which describe backorders, and the reported effect of marketing and promotional activities. Medipharm may add to or edit ARMTRADES comments as it sees fit.

Comprehensive ORADEX Sales/Distribution Report

Month: \_\_\_\_\_

Prepared By: \_\_\_\_\_

Date: \_\_\_\_\_

REGION	Sales in Sachets	Plan	Total/Plan
MEDIPHARM			
Kampala Sales			
	=====	=====	
Total sold	=====	Total Plan	=====
	=====		=====
			Total % of Monthly Plan Accomplished

ARMTRADES SALES:

1. Kampala
2. Jinja
3. Masaka
4. Mbarara
5. Mbale
6. Gulu

	=====	=====	
Total sold	=====	Total Plan	=====
	=====		=====
			Total % of Monthly Plan Accomplished

ORADEX Price Structure  
Suggested Revisions

January 4, 1992

1. Product invoiced between now and the next scheduled price revision should be calculated at the current exchange rate of UgSh940/US\$1.
2. Distributor margin must now be added:

0.12 x 940 =	112.8	Ex-Factory Price to ARMTRADES
	5.6	5% Handling Charge
	<u>25.4</u>	22.5 % Distributor Margin (of 112.8)
	143.8	Ex-Distributor Price

Distributor Price 145 UgSh per sachet for boxes of 1,000 or more.

Distributor Price 150 UgSh per sachet for less than 1,000 sachets.

\*\*\* New Suggested Retail Price of 200 UgSh \*\*\*

3. Proposed ORADEX pricing to Foods & Beverages (F & B):

0.12 x 940 =	112.8	Ex-Factory Price to ARMTRADES
	<u>16.9</u>	15% Distributor Margin
	129.7	Ex-Distributor Price

Distributor Price	130.0	UgSh to F & B
	<u>19.5</u>	15% F & B Margin
	149.5	(150) Suggested Wholesale price F&B Depots

Terms: Cash sale to F & B = Cash payment to Medipharm

15

REPORT ON OUR TOUR OF KAYUNGA, JINJA, IGANGA, MBALE AND  
MUKONO TO PROMOTE ORADEX.

My group The Mpungu Film Players was so grateful to tour, the above mentioned districts Eastern Uganda showing our play "EKITUUFU KYEKI ? " to public in those Areas.

KAYUNGA:

The people of Kayunga were very much amused by the play because it was educative and they understood it thoroughly. It was fitting the very situation in their Area. The play was attended by many different officials and authorities e.g A.D.P.C (Police) Officials in Municipal Council PC's e.t.c. all in all, those who attended benefitted very much and they were compelled to ask for a re-play same other time for the sake of those who missed that day.

Due to the fact, the people were poor we were forced to make some people enter freely, meanwhile the entire audience was composed of mostly women and infants.

IGANGA:

Iganga people here, have a night influence shows because most of them are business orientated. This was found according to our afternoon show which was attended by many women and infants. Anyway, the audience was also encouraging. The bigger number attended the night show this was mostly men and women but few infants. Both audience achieved our aims and people wanted another show which we could not afford according to the Budget and the Management of the Hall (Theatre). Lastly samples were underestimated. therefore were not enough.

MBALE:

This place was the most attended despite of the fact that it was a rainy season. They tried their best to come and support as though it was raining. The best, thing they understood our Major Aim.

Here our fellow Drama actors are very co-operative we were helped a lot though the district cultural officer gave us

a hard time by taxing us heavily yet we had introduced ourselves. He showed no concern that our aim was to educate people.

According to what we assessed people were poor and on addition the Transport expenses were so high for that, Mbale is a far place.

JINJA / NAKIBIZZI.

The hall itself here is still poor in conditions and it was also observed that people here have a night influence shows. The bigger number come at night after their market duties. In order to achieve our purpose we did let all those who were nearby to enter freely during the day time show.

These people reacted as almost as people of Kayunga. Because the play fitted their area and people as well. The Rcs helped us a lot to mobilise people to come and attend the play. Therefore, we were asked to go back whenever there is such programmes.

MUKONO

Mukono people were already experienced with such type of entertainments, therefore the audience was very much aware of the play.

We had two shows which were both successful.

RECOMMENDATIONS:

This being the first of its kind, the exercise was quite successful but to make it more successful another tour is necessary and to include other districts that were not covered.

*Stephen Balagadde*  
Stephen Balagadde.

DIRECTOR / MPUNGU FILM PLAYERS.

ACCOUNTABILITY FOR THE PROMOTION OF ORADEX.

KAYUNGA:

Transport	.....	62,000/=
Meals	.....	20,000/=
Publicity	.....	65,000/=
Allowances	.....	15,000/=
Hire of Venue	.....	15,000/=
Stage of construction	.....	10,000/=
Total	.....	<u>187,000/=</u>

IGANGA:

Transport	.....	20,000/=
Meals	.....	40,000/=
Publicity	.....	65,000/=
Hire of Venue	.....	15,000/=
Stage construction	.....	10,000/=
Allowances	.....	30,000/=
Lodging	.....	15,000/=
Total	.....	<u>255,000/=</u>

JINJA :

Transport	.....	64,000/=
Publicity	.....	65,000/=
Meals	.....	20,000/=
Hire of Venue	.....	15,000/=
Stage construction	.....	10,000/=
Allowances	.....	15,000/=
Total	.....	<u>189,000/=</u>

MBALE :

Transport	.....	155,000/=
Publicity	.....	65,000/=
Meals	.....	20,000/=
Hire of Venue	.....	15,000/=
Stage construction	.....	10,000/=
Lodging	.....	15,000/=
Allowances	.....	30,000/=
Total	.....	<u>330,000/=</u>

MUKONO:

Transport	.....	25,000/=
Publicity	.....	65,000/=
Meals	.....	25,000/=
Hire of Venue	.....	20,000/=
Stage Construction	.....	15,000/=
Allowances	.....	15,000/=
Total	.....	<u>165,000/=</u>

Kayunga, Jinja , Iganga, Mbale and Mukono	..	1,125,000/=
Production costs	..	<u>200,000/=</u>
Less amount paid )		1,325,000/=
)	-----	- 950,000/=
Balance to be paid.	.....	<u>375,000/=</u>

*Prepared and verified  
by: Stephen Balagacde  
for Mpungu Film players.*

REPORT ON OUR TOUR OF LUWERO, MASAKA AND MBARARA TO PROMOTE

ORADEx.

INTRODUCTION:

My group The Planets was commissioned to tour the above mentioned Districts showing our play "MBITEGEDDE" to the public in those areas.

LUWERO: ( 27th, 28th, 29th SEPTEMBER 1991)

We spent three days in Luwero and performed at Luwero town in a place called Kiyembe. The turn-up was encouraging. The following day we performed at Wobulenz and Bamunaliza respectively.

Generally the people appreciated the performance but we wished we could have stayed longer or made a bigger tour in the District.

We left Luwero in on Monday. We performed for over ninty people

MASAKA : 2nd, 3rd, and 4th NOVEMBER. 1991.

We were in Masaka for a total of four days. we performed in three areas thus Kinosi, Lyantonde and Masaka. The town is a Slum area which needed more than one tour. The play was welcomed although people expected more packets of Oradex and pamphlets to help them understand. We also had a chance to perform to Masaka Secondary school Students.

They responded well to the play. The School authorities demanded that if it was possible we went back to school. The audience for the tourplaces totalled to three hundred.

MBARARA 16th to 20th NOVEMBER.

We performed the play in Mbarara at quite a bigger cost than our estimate. We overspent because of the distance and number of days performed. It was inevitable because that we had already informed the authorities that we were ready. However the audience was very encouraging and responded very positively the shows were attended well inspite of the fact that the language was not of that area. Over 200 people attended the show. On our Mbarara trip we included Nakal district on the list. We performed at Mbarizi.

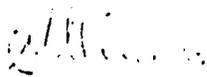
20

PROBLEMS.

The biggest problem we were confronted with was inflation. Just before we started the trips fuel prices went up. As such every thing went up Publicity and hiring of Venue the items that cost a lot in the exercise. Apart from expenses beyond the Budget, my artistes and the Public enjoyed the tour. Whenever we reached the people were waiting for us. In some parts of the Country we realised that ORADEK had already reached the people. As such our work became easier.

RECOMMENDATIONS.

This being the first of its kind, the exercise was quite successful but to make it more successful another tour is necessary and to include other districts that were not covered.

  
H. KIYIMBA - MUSISI  
for The Planets.

ACCOUNTABILITY FOR THE PROMOTION OF ORADEX

MASAKA (FOUR DAYS)

Transport	-	300,000-
Meals	-	40,000-
Publicity	-	42,000-
Allowances	-	<u>70,000-</u>
		452,000-
		<u>-----</u>

LUWERO (THREE DAYS)

Transport	-	210,000-
Meals	-	10,000- <sup>lunch</sup> ( )
Publicity	-	40,000-
Meals	-	30,000- (Supper)
Allowances	-	<u>60,000-</u>
		370,000-
		<u>-----</u>

MBARARA (FIVE DAYS)

Transport	-	380,000-
Publicity	-	45,000-
Meals	-	50,000-
Allowances	-	<u>80,000-</u>
		555,000-
		<u>-----</u>

Masaka, Luwero and Mbarara	-	1,377,000-
Production costs	-	<u>200,000-</u>
		1,577,000-
Less amount paid	-	<u>940,000-</u>

Subtotal 537,000-

U. KIYIMBA - MUSISI  
DIRECTOR/THE PLANTERS

22

DATE/MONTHS	ACTIVITIES	PURPOSE	VENUE	PARTICIPANTS
14th-15th Jan.	Seminar on ORADEX, AIDS Leadership	To acquire Knowledge.	Kumi	Traditional Healers.
28th-29th Jan.	Seminar on ORADEX, AIDS, Leadership.	To acquire knowledge.	mpale	Traditional Healers.
12th-13th Feb.	Traditional Medicine Show (At District Level)	To create Awareness to the Public our role.	Iganga	OPEN
26th-27th Feb.	Seminar on ORADEX, AIDS Leadership.	To acquire knowledge	Tororo	Traditional Healers.
7th-8th March	Traditional Medicine Show Dist. Level.	To create Awareness to the Public our role.	Masaka	OPEN
17th-18th March	Seminar on ORADEX, AIDS Leadership	To acquire Knowledge.	Luweero	Traditional Healers.
27th-29th Mar.	Traditional Medicine Show at National Level.	To create Awareness to the Public.our role.	Kampala	OPEN
14th-15th April	Seminar on ORADEX, AIDS Leadership.	To acquire knowledge.	Kasese	Traditional Healers.
25th-26th April	Traditional Medicine Show at dist. Level.	To create Awareness to the Public our role.	Rakai	OPEN
1st-3rd May	Joint Meeting for information secretaries	To discuss on our Newsletter	Kampala	Information Secretaries of the Ass.
20th May.	National Executive Committee meeting.	Review Previous programmes,	Kampala	Executive Committee members only
30th-31st May.	Traditional Medicine show at Dist. Level.	To create awareness to the public our role.	Mukono	OPEN
13th-14th June	National Council Meeting	Reports on the progress	Kampala	All MEMBERS

23

DATE/MONTHS	ACTIVITIES	PURPOSE	VENUE	PARTICIPANTS
27th-28th June	Traditional Medicine Show at District Level.	To create Awareness to the Public our role	Masinda	OPEN
8th July	Seminar on ORADEX, AIDS, Leadership.	To require knowledge	Bundi-bugyo	Traditional Healers
22nd July	Seminar on ORADEX, AIDS Leadership	To acquire knowledge	Kisoro	Traditional Healers
1st-2nd August	Seminar on ORADEX, AIDS, Leadership	To acquire knowledge	Rukungiri	Traditional Healers
3rd-31 Aust.	Rural Water Protection	Improving Rural Health	IN ALL DISTRICTS	Traditional Healers
1st-30th Oct.	Rural Water Protection	Improving Rural Health	IN ALL DISTRICT	Traditional Healers
7th-11th Oct.	Independance Celebrations	To create Awareness to the public	IN ALL DISTRICTS	Traditional Healers
1st-30th Nov.	Evaluating All Programmes		IN ALL DISTRICT	Traditional Healers
1st-19th Dec.	Christmas Party	Gate together	IN ALL DISTRICTS	Traditional Healers
19th-20th Dec.	Christmas Party	Gate together	IN ALL DISTRICTS	Traditional Healers

