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VOA/BASICS COLLABORATION EVALUATION AND SUPPORT FOR ARI SOCIAL MOBILIZATION IN KAZAKHSTAN AND KYRGYZSTAN

October 17-November 8, 1997

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ACRONYMS

ARI	Acute Respiratory Infection
BASICS	Basic Support for Institutionalizing Child Survival
CAIDP	Central Asian Infectious Disease Program
CAR	Central Asian Republics
DD	Diarrheal Disease
EPI	Expanded Program on Immunization
FAPs	Feldsher Obstetric Accoucheur Post
IEC	Information, Education, Communication
MOH	Ministry of Health
NGO	Non-Governmental Organization
NID	National Immunization Days
NIS	New Independent States
ORS	Oral Rehydration Salts
PVO	Private Voluntary Organization
RCI	Republican Center for Immunoprophylaxis
SES	Sanitary and Epidemiological Station
UNESCO	United Nations Education, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VOA	Voice of America

EXECUTIVE SUMMARY

BASICS consultant Fatima Dzhatdoeva and Senior Program Officer Paul Olkhovsky traveled to Kazakhstan and to Kyrgyzstan from October 14 to November 8, 19967 During this period, they carried out three separate, but interrelated assignments (1) conducted an evaluation of radio programs on child health topics, developed in collaboration with Voice of America (VOA) in both countries, (2) assessed progress and planned for further evaluation of communications-related training and materials development activities under the Central Asia Infectious Diseases Program (CAIDP) in both countries, and (3) met with staff of the Republican Center for Immunoprophylaxis (RCI) in Bishkek, and planned a 1-week workshop entitled "Communications Strategy for Immunization," proposed for December of this year

BACKGROUND

Kazakhstan

Kazakhstan is the largest and wealthiest of the five Central Asian Republics (CAR) of the former Soviet Union Demographically, Kazakhstan consists of 44 percent ethnic Kazakhs, 36 percent ethnic Russians, with Ukrainians, Germans, and smaller ethnic groups constituting the rest of the total population of 16 9 million, as of 1993 Economically, Kazakhstan is well-endowed in natural resources, particularly in the fields of energy and metals Kazakhstan is the most industrialized of the CAR and continues to have a productive agricultural sector that exports food to much of the rest of the Commonwealth of Independent States Administratively, the country's land area of 2 7 million sq km is divided into 19 oblasts, and is further broken down into 217 rayons (not unlike counties in the United States) Geographically, most of the country is a sparsely populated, vast steppe with mountains and valleys in the south

Kyrgyzstan

The mountainous Republic of Kyrgyzstan is surrounded by five deserts and is bordered by China, Kazakhstan, Tajikistan, and Uzbekistan Kyrgyzstan' 4 7 million population is made up of 50 percent ethnic Kyrgyz and 30 percent Russians The remaining minorities include ethnic Uzbeks, Uighurs, Ukrainians, Germans, and Koreans

Both countries currently experience high rates of acute respiratory infection (ARI) and diarrheal disease (DD) among children, requiring timely detection and treatment of the ailments Voice of America reporter Irene Kelner in June 1997 traveled to Kazakhstan and Kyrgyzstan to report on ARI and DD, and the challenges they pose to the natural health systems Seven of her stories were broadcast by VOA and VOA-affiliated stations in August 1997 Those stories were rebroadcast on Zhambul oblast radio in Kazakhstan twice a day for most of the month of October BASICS sent Olkhovsky and Dzhatdoeva to Zhambul in late October to evaluate the efficacy of the radio material and the broadcasts Additionally, Olkhovsky and Dzhatdoeva were

to determine the progress of the ARI social mobilization campaign efforts by medical staffs in Zhambul and Osh oblasts and to offer assistance Olkhovsky focused on evaluation questionnaires in Zhambul, as well as the social mobilization work in that oblast Additionally, he evaluated the process of the BASICS/VOA collaboration at the federal MOH level in Almaty Dzhatdoeva worked on focus groups and evaluation in Zhambul, and social mobilization campaign work in both Zhambul and Osh oblasts in Kyrgyzstan They both assisted the Republican Center for Immunoprophylaxis (RCI) in Kyrgyzstan with planning for an upcoming workshop on communications in support of immunization campaigns

TRIP ACTIVITIES

October 17-19 Olkhovsky and Dzhatdoeva met with Lyndon Brown, NIS team leader, and other BASICS staff in the BASICS Regional Office in Almaty, and reviewed the program to date Brown provided Olkhovsky and Dzhatdoeva with their respective schedules and focused on their assignments

At Brown's direction, Olkhovsky met with Barbara Holaway, program administrator of the Zdrav Reform Project, and provided her with an English-language copy of *A Guide to Health Communication* which was developed by BASICS over the last year-and-a-half Holaway described her program on developing a health communications program in Kazakhstan

On October 19, Olkhovsky, Dzhatdoeva, BASICS CAR Coordinator Aigul Kuttumuratova, and Dr Svetlana Rakhimdzhanova Zhakesheva, CDD/ARI (acute respiratory infections) national coordinator for the Kazakh MOH, flew to Taraz, Dzhambul oblast [1]

October 20 The BASICS team met with Gulfia Izmailova, chief pediatrician of Dzhambul oblast, and her staff, and outlined the work plan regarding the VOA/BASICS collaboration evaluation and IEC CAIDP support over the next two weeks The Kazakh members of the team consisted of six health workers, including four pediatricians and two sociologists

Olkhovsky and Dzhatdoeva reviewed health-related materials produced by the oblast medical department Although some materials showed promise, most printed materials were still being produced in the Soviet style of dense print and dull layout A professional video produced by WHO regarding the value of ORS treatment and hygiene was shown to the team The video produced at the local level was amateurish and unusable, however, Olkhovsky did see a local broadcast produced by the local television station regarding social mobilization and ORS work done in Dzhambul oblast a few weeks before the team's visit—this video was well produced Olkhovsky concluded that the social mobilization was reasonably successful from both the quality of coverage and from comments from local- and federal-level medical staff

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[1] In February 1996, Dzhambul, the capital of Dzhambul Oblast was renamed Taraz This may clear up some confusion in previous BASICS documents

Olkhovsky met with and briefed Dr Valerii Kim, chief of the Dzhambul Oblast Department of Health He outlined the planned activities of the BASICS team

October 22 The BASICS team traveled to Lugovskoi rayon, 120 kilometers west of Taraz, and met with the local health authorities headed by Dr Zhana Musabekova Kyl'manova, rayon chief pediatrician Dzhatdoeva conducted two focus groups evaluating the VOA broadcasts Focus participants were randomly selected mothers with children under 5 years of age visiting the local clinic on that day Because few had heard the broadcast, Dzhatdoeva played the ARI portion of the 7-part broadcast The team chose to focus on the ARI tape because it seemed to have the clearest "call to action," and the fact that the oblast soon faced the pneumonia season This tape seemed the most relevant of the seven VOA spots provided to Olkhovsky and Dzhatdoeva (See Appendix A for Dzhatdoeva's report on the conduct and conclusions on qualitative research done in Kazakhstan and Kyrgyzstan during this time period)

There was difficulty with the first focus group because mothers brought their infants with them While the focus group began with eight mothers, by the end, only two remained The second group was more successful The experience of these first groups permitted the team to adjust the questionnaire and focus group surroundings for the remainder of the evaluation (See Appendix B for English, Russian, and Kazakh language versions of the questionnaire)

October 22-23 Olkhovsky and Dzhatdoeva conducted training sessions in Taraz for the team, who in turn would conduct questioning and focus groups of mothers of small children to determine whether they heard the VOA broadcast, and if not, how they generally receive health information On the first day, training was conducted in the morning and in the afternoon, Dzhatdoeva conducted a focus group while the training participants watched On the second day, there was more training in the morning In the afternoon, Dzhatdoeva and Olkhovsky watched and critiqued as participants themselves conducted two separate focus groups with mothers

October 24 Olkhovsky and Dzhatdoeva conducted a seminar on health communications for physicians from throughout the oblast They showed examples of materials that were effective and ineffective and explained why They discussed planning an ARI social mobilization campaign and emphasized the importance of scheduling work on a week-by-week basis Seminar participants created draft posters and leaflets to be used in the ARI campaign

October 25-31 Dzhatdoeva traveled to Osh oblast, Kyrgyzstan, where she conducted workshops and interviewed mothers on their knowledge of diarrheal disease and public health information The local oblast medical staff had not done any work regarding ARI as had been hoped Dzhatdoeva went to Karasuskii and Nookatskii rayons to observe work being done by nurses and mothers at FAPs (feldsher obstetric accoucheur post) Dzhatdoeva observed that public information regarding diarrheal disease had mixed results (See Appendix A for more detailed observations) At the end of her work in Osh, she advised medical officials on ways to improve their public health information efforts targeted at mothers with young children Further, she

advised the officials about the necessity of conducting a week-long information campaign on the dangers and symptoms of ARI

October 27-30 Olkhovsky worked with Gulzhamal Kulbayeva of the CDC Office in Taraz and began to sort the questionnaires completed over the four previous days (See Appendix C for the EPI Info computer summation of the survey) On October 28, Olkhovsky continued the previous week's work with a few participants who will actually be designing the upcoming ARI campaign Olkhovsky focused on helping the participants to identify their target audience and potential allies in the community who could assist in the mobilization campaign

October 31 Olkhovsky traveled back to Almaty and conducted process interviews with MOH staff who had been interviewed by Irene Kelner of the Voice of America They had a very positive impression of their experience with Kelner, they all commented that they would like to repeat their experience Most of the interviewees noted that at first they were apprehensive about talking to the VOA, which had been a previous "enemy of the Soviet government " They said that Kelner put them at ease, and that after they heard the broadcasts, they were very enthusiastic about possible future cooperation with VOA (See Appendix D for a more detailed report about the interviews) Olkhovsky also briefed Bruce Ross of the CDC about his initial findings and the work that was progressing in Dzhambul oblast

November 1-5 Olkhovsky and Dzhatdoeva met in Bishkek to plan a seminar on social mobilization to take place in December On November 3, they met with Dr Svetlana Firsova, director of the Republican Center for Immunoprophylaxis Working with Firsova, and Brown in Washington, a detailed plan and budget for the seminar was put together Olkhovsky and Dzhatdoeva met with Rudy Rodrigues and Gulsana Turusbekova of the Bishkek/UNICEF office, and they agreed to participate and contribute materials for the seminar, as time permits They also met with Cholpon Asambaeva and her staff of the UNESCO-funded Media Resource Center The center agreed to physically host the seminar, to loan necessary audio-visual equipment, and to coordinate media participation One of the products of the seminar/workshop will be a press conference emphasizing the importance of social mobilization for health issues, such as childhood immunization

Additionally, Firsova proposed, and Olkhovsky and Dzhatdoeva agreed, that a modest research effort was needed to update work done by BASICS in 1994 The research will determine how informed parents are about the necessity of childhood immunization and determine their primary sources of health information The research is to take place in the capital Bishkek, the surrounding rural Chuiskii oblast, and the southern oblast of Osh Dzhatdoeva and Olkhovsky met with the research team at the Scientific Research Institute for Prophylaxis and Medical Ecology and reviewed the proposed survey instrument and survey techniques with them

November 5-8 Olkhovsky and Dzhatdoeva returned to Almaty from Bishkek They reviewed the result of their work with the BASICS Regional Office Dzhatdoeva wrote a draft summary of her findings from Osh and Dzhambul oblasts Olkhovsky and Dzhatdoeva briefed Dr Viktor

Malayev on IEC issues in Central Asia to assist him in a seminar he will lead at the end of November in Almaty

RESULTS AND CONCLUSIONS

A Evaluation of VOA/Collaboration

In Dzhamul oblast, less than 30 percent of the respondents listen to the radio at all, but half of those listeners tune in to VOA Of those who do listen to the radio, most listen in the morning and evening Fifteen percent of the respondents remember getting information about diarrheal disease on the radio Two-thirds of those who listen to the radio (18 percent of total respondents) think that the health information they receive on the radio is useful Eight focus groups were conducted and exposed to the VOA broadcast on ARI The response was overwhelmingly positive One future change would be to simplify the language and include more interviews with mothers Almost all the focus group respondents thought that the VOA program was useful and interesting, and would listen to the radio more often if they knew that programs of that quality would be on the air

The survey revealed that the best way to communicate with mothers is through their health providers Over 90 percent of those surveyed responded that they receive and trust medical information from health providers Also, over 90 percent receive health information from television, but they have less trust in that information Therefore, in designing a communication campaign in the future, it is recommended that medical workers be prepared with information and communication strategies, and then have the campaign supported through television programing

Olkhovsky traveled back to Almaty and conducted process interviews with MOH staff who had been interviewed by Kelner of the Voice of America earlier in the year They had a very positive impression of their experience with Kelner, they all commented that they would like to repeat their experience Most of the interviewees noted that at first they were apprehensive about talking to the VOA, which had been a previous "enemy of the Soviet government " They said that Kelner put them at ease, and that after they heard the broadcasts, they were very enthusiastic about possible future cooperation with VOA

Olkhovsky and Dzhatdoeva conclude that the BASICS/VOA collaboration, in sum, was a success Although the there was low listenership in Dzhambul oblast, there were two significant accomplishments First, the idea that the MOH can use radio to promote health issues, either in collaboration with another entity or by themselves, is now planted in the minds of key MOH staff Further, it is Olkhovsky's opinion that had the VOA re-broadcasts occurred in the capital, Almaty, and had follow-up surveys been conducted, the results would have shown a greater audience share because of popular radio stations and greater access to radios and electricity

Finally, the MOH staff in Dzhambul oblast were exposed to modern media methods that created a communication capacity at the oblast level that remains after the collaboration

B CAIDP Social Mobilization Materials

In the last two years, it is clear that the Kazakhs at the oblast level have improved their capacity to produce social mobilization materials Posters and pamphlets explaining the need and use of ORT packets were clear and attractive to the eye This is in marked contrast to the lengthy and dull information provided under the Soviet system However, at least in Dzhambul oblast, the MOH staff are unfamiliar with producing video programming and would benefit from further training At the Kazakh federal level, there is a good appreciation of the value of mass communications in assisting information and mobilization campaigns They, too, would benefit from further training in communication material production and distribution

In Osh oblast, Kyrgyzstan, CDD and ARI materials are published at the federal level, but are not distributed to the local levels unless local officials can pay for them Given current economic conditions, local medical authorities cannot pay for these materials, hence, the materials are not being distributed Local medical workers are attempting to inform mothers about key medical information regarding ARI and diarrheal diseases In the Osh area, medical workers would benefit from further communications training and increased allocation of resources to provide, at a minimum, printed materials

CONTACTS

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APPENDIXES

APPENDIX A

CAIDP EVALUATION

DZHAMBUL OBLAST, KAZAKHSTAN
OCTOBER 20 - 25, 1997

OSH OBLAST, KYRGYZSTAN
OCTOBER 27 - NOVEMBER 1, 1997

FATIMA DZHATDOEVA

Activity Code 000 HI 01 004, 000 CR 03 001

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I Introduction

From October 20 to 28, 1997, qualitative research was conducted in Dzhambul Oblast, Kazakhstan

Goals of the research

1 To study the effectiveness and awareness of radio materials developed by VOA regarding acute respiratory infections,

2 To study the effectiveness of social mobilization on acute respiratory diseases,
- mothers' knowledge of acute respiratory diseases among children,
- sources of information and preferable means and sources of information delivery

Research methodology

Eight focus groups were conducted with mothers and 8 interviews with physicians During the investigation 48 women with children under 5 years of age were interviewed After the completion of the focus groups mothers filled out questionnaires regarding the VOA programs and how and from where they receive medical information

Location of research activities

Dzhambul City Children Clinic #1,
Oblast Children's Infection Hospital,
Children's Clinic, village of Kulan, Lugavskoi rayon,
Children's Clinic, settlement of Boyzan

II Results

Mothers' behavior when a child has ARI

1 When a child was running a temperature some mothers started treating them at home, the most preferable and accessible drugs for mothers were aspirin, paracetomol, and biceptol "I use aspirin to make the temperature fall " (#3, Dzhambul), "I give medicines aspirin, biceptol " (#5, Dzhambul) "Paracetomol helps a lot, I always give it " (#7, Dzhambul)

2 A lot of mothers used a combination of drugs and alternative traditional methods of treatment "I give drugs, warm up feet, rub with alcohol briskly " (#4, Dzhambul), " give aspirin, make massage" (#2, Kulan) "I give paracetamol, rub ointment in, apply a compress, wrap the child up to keep him warm" (#2, Kulan)

3 In one of the focus groups there was a volatile debate among mothers whether it was necessary to wrap a sick child up to keep him warm or if the child should be dressed lightly "I always wrap up the child, he should be kept warm I put warm clothes on him

and cover him with a blanket (#2, Kulan)-(Most of the mothers agreed with this point of view) " They say when a child is running a temperature he should not be wrapped up, because he has a fever On the contrary he should be given a chance to share his fever with the air " (#2)-(an opinion shared by several mothers)

4 Some mothers preferred to only treat their children with alternative or traditional medicine " massage with alcohol" (#1, Kulan, #3, 4, 7, Dzhambul), "alcohol compress, fat of sheep's tail", (#4, 6, 7, Dzhambul) "Rub with honey, put some dry mustard (in the stockings) to keep the feet warm" (#5, Dzhambul)

5 Medicinal herbs were also very popular among some of the respondents " mix of herbs against bronchi, grind aloe and mix it with honey and give (it to a child) (#4, Dzhambul)

6 A number of mothers often used the fat of different animals to grease/rub a child's body when he has a high temperature The Fat of sheep's tail was mentioned in every focus group " rub/grease with fat of sheep's tail" (#3, Dzhambul) " (I) give badger's fat, dog's fat, any kind of fat will do" (#4, Dzhambul)

7 One of the respondents said that every time her child was getting ill she "offers prayers to the child" by herself (#2, Kulan)

8 Some mothers asked healers for help but at the same time they continued to give medicines and apply other means of treatment " I visit one woman - a healer, (she) helps But at home I give drugs all the same " (#1, Kulan)

9 There was a significant difference in responses of mothers with children under 12 months and in the answers of mothers with older kids (from 12 months to 5 years of age) The major part of the first group of mothers preferred to call a doctor immediately

The answers of the mothers with babies 4-6 months old "(I) call a doctor at once I am afraid to treat myself " (#8, Boyzan),"To the doctor immediately He knows everything better " (#4, Dzhambul)

Mothers with more than one child or with a child older than 12-24 months old took it easier if their children had a high temperature " this is my fourth child I already know what to do I visit a doctor when I need a medicine to be prescribed " (#2, Kulan) "I have three children, much experience At first I try to treat myself If a temperature keeps on running I visit a nurse or a doctor" (#5, Dzhambul)

Sources of Information

Mothers were asked "Why do you undertake these actions when your child gets ill? How do you know exactly what you should do?"

1 Most of the respondents named health care workers as their main source of information "There are physicians in the village and I visit them " (#8, Boyzan), " a doctor taught me to do it his way" (#1, Kulan)

2 The behavior on the part of the respondents was based on their own experience As a rule they were mothers who had several children " other children of mine also got ill, I remember what to do" (#8, Boyzak) But they also visit a doctor "All the same I ask a doctor for advice If I lose a child (if he dies) it is not a joke" (#4, Boyzak)

3 Some of the respondents seek advice among the members of their families, more often they asked their mothers or mothers-in-law for advice "I always ask my mother what to do" (#3, Dzhambul), "I go to see my mother-in-law, she brought up the whole family, (she) knows everything" (#8, Boyzak)

4 Many women obtained the information about childcare from magazines, newspapers "Sometimes you can come across something in a magazine " (#8, Boyzak), "I read articles about ARI in newspapers " (#2, Kulan)

5 Some women offered their own opinions "If it's possible to reach parents then it can be done only through the clinics" "While you are lining up to see a doctor you can read all the posters I've been visiting a doctor with my child over the last half a year and none of the posters have been replaced over this time " "Posters should be placed in day care centers and kindergartens While parents are taking their children (home) they sooner or later glance at them "

6 The three most common sources of information were health workers, members of the family, and television Although the first too sources mentioned were preferable to most women, many others did mention television as a viable source "I watch TV from time to time, but in general I don't like it very much I ask my mother for advice " (#3, Dzhambul), "I always consult the doctor, in order not to be a doctor of my child myself I watch TV too but in any case I ask a doctor for advice " (#6, Dzhambul) Some women don't watch TV at all as they are "busy with household chores, I don't have any time "

7 Most women do watch programs about children's health, and some of them remember a number of details about acute respiratory disease among children Channel One of Russian Public Television and "Khabahr" channel broadcast from Almaty, were the most popular among mothers "The other day a program was on "Khabahr," they say a flue epidemic is beginning, one must be careful" (#6, Dzhambul) "A good program (called) HEALTH is on Channel One now" (#1, Dzhambul) "On "Khabahr" doctors have presentations, we watch " (#6, Dzhambul)

8 Radio was mentioned rarely as an informational tool Almost all the respondents preferred to get the information on TV rather than on the radio Very few people owned radios in Dzhambul Oblast Only 15% of the respondents in the focus groups had a radio "We don't have radio at home, that's why we don't listen" (#1, Kulan) - this was a typical

answer of the respondents Some women said "There is no radio at our collective farm at all The cables are broken No one has a (radio) " (#6, Dzhambul)

9 Comparatively high prices for newspapers and magazines do not make them accessible to most of the population in Dzhambul Oblast, particularly in rural areas where the income of the population is even lower than in cities "Newspapers cost approximately as much as bread Naturally I better buy bread for my children rather than a newspaper" (#5, Dzhambul)

It is evident that the use of the radio for health communication campaigns in Dzhambul Oblast could be effective only in combination with more productive information channels such as television and printed materials

Mothers preferred methods of obtaining information

1 Part of the discussion in focus groups was dedicated to the issue of how mothers preferred to get printed information about health care

2 Most of the mothers consider booklets or memos with brief information in lay language as a good way to receive information "I have no time to read books, but I can read a short memo " (#1, Kulan)

3 Some mothers preferred oral information provided by a doctor to printed information "When it's needed, I'll visit a doctor and he'll tell me everything And these papers we don't read them all the same We throw them away " (#2, Kulan)

4 Some of the mothers were very interested in medical information, and wished to get more medical information from popular editions "I always read magazines, popular medical literature in general Knowledge is needed to avoid troubles" (#4, Dzhambul) "A lot of unnecessary information is published now in magazines, let them better write more about health!" (#5, Dzhambul)

5 Many mothers preferred calendars to booklets " calendar is always needed so I won't throw it away " (#2, Kulan) "Best of all it is to publish calendar on the last page (of a booklet) " (#7, Dzhambul)

6 Some respondents considered that one of the best ways to make people keep printed materials was to publish the addresses of community pharmacies of the city on the back of the booklets "A list of pharmacies with addresses on the back, then nobody will throw them away" (#3, Dzhambul)

7 Some women proposed to publish some pieces of advice about skin and body care on the last page of a booklet "Well, how to take care of the skin or body after baby delivery" (#4, Dzhambul)

8 Some of the interviewed mothers thought that the advice about baby care under twelve months would be a good addition to the booklets on diarrhea and ARI "A lot of mothers are at their wits end as they don't know how to treat a child It would be nice to have some pieces of advice published about how to treat a child under twelve months" (#7, Dzhambul)

9 There was one proposal to publish horoscopes in the booklets

10 A lot of respondents preferred to get the information about childhood diseases on television in the form of commercial spots shown during the broadcasting of soap operas "It's better for me (to get it) on TV in the middle of the film instead of commercials If it is repeated every time than even if we miss it once we'll see it next time anyway " (#5, Dzhambul) "The information should be delivered in such a way that it is put into our subconscious, especially on the radio and TV " (#6, Dzhambul)

<u>The Social Mobilization Week on Oral Rehydration Therapy</u>

1 There was not a single focus group where mothers didn't mention "a week of oral rehydration therapy " "On local TV, radio, in buses - the whole week they told about (oral rehydration product (ORP) " (#4, Dzhambul), "In the market I saw posters which showed how to dissolve ORP " (#6, Dzhambul), "My daughter goes to the fifth grade, they wrote a dictation about ORP, what it is and how it should be administered (She) brought it home, showed " (#6, Dzhambul)

2 Almost all interviewed mothers knew what proportions should be used to dissolve ORP powder "One packet per one liter of boiled cooled water " (#5, Dzhambul), "Posters are everywhere in the clinic, in buses - one packet per one liter of boiled water " (#4, Dzhambul), "As soon as I noticed that my child had diarrhea I dissolved this packet in one liter of water at once and gave (him) one tea spoon every three minutes" (#7, Dzhambul)

3 Focus research demonstrated the effectiveness of social mobilization on ORP conducted in August This well-organized campaign has accomplished its goal as mothers now know what ORP is, when it should be given, what proportions should be used to dissolve it and how it should be administered "I've seen a lot (of posters) about ORP everywhere in pharmacies, clinics, on kiosks I know how to give it " (#5, Dzhambul), "There was a poster in the market, they made announcements in buses, a doctor visited us at home and told us - I know a lot about rehydration " (#6, Dzhambul)

Antibiotics treatment

1 Most of the respondents didn't treat their children with antibiotics "No, I didn't have to give antibiotics We managed without them " (#4, Dzhambul)

2 Part of the respondents used antibiotics when prescribed by physicians "My child had a cold, he was injected with penicillin A doctor prescribed it " (#2, Kulan)

3 Mothers didn't as a rule express any criticism towards antibiotics treatment "A doctor has got education He knows better If he prescribes something it should be given" (#3, Dzhambul)

Comparison of the Recent Quality Research with the Results of the Study Conducted in January, 1997

1 In October mothers mentioned sources of information more often than in January they spoke about magazines, books, booklets, and posters in health care facilities

2 In comparison with the study in January more mothers involved in the October study tried to treat their children for ARI and diarrhea without using antibiotics

3 In the October research there were more mothers who thought that on-time visits to a doctor was a guarantee of a successful cure for a child

4 Among October respondents fewer mothers asked healers for help

5 More mothers expressed interest towards medical literature in October than in January

All these changes probably did not take place because of the conducted health communication work It seems that the difference in data can be explained by the age of the respondents - in October the participants were younger than in January There were a lot of mothers younger than 22 years old in our focus groups in October Thus, the comparison of the results of quality studies in January and October suggest greater interest in the problem of child health among younger mothers in Dzhambul Oblast

VOA Evaluation

A well-organized health communication campaign on diarrhea was held in August 1997 in Dzhambul Oblast Through a BASICS-VOA collaboration, ARI , diarrheal disease and other information spots were broadcast on Dzhambul Oblast radio twice a day during the month of October When work in late October began, the season of diarrheal diseases had passed and ARI season was approaching The study was focused on radio messages dedicated to ARI by VOA reporter Irene Kelner because Dzhambul Oblast was planning to conduct an ARI health communication campaign in December Research included questionnaires and focus groups

In the focus groups, a moderator let the respondents of the focus groups listen either to a part of the radio materials on ARI or to the whole spot, afterward there was a discussion All respondents listened to the radio spot attentively After that the moderator asked them to retell what they had heard Most mothers were able to repeat the main ideas of the radio spot in detail

Some mothers provided scanty information or were not able to give the precise idea of the radio spot Some mothers could say nothing at all

1 In Answer to the question "Have you learned anything new?" most of the mothers answered "No, I knew it (this information) before "

2 When the moderator drew their attention to the specific symptoms of ARI and asked the question, "Are you aware of the expansion of the chest (as a symptom)?" a number of mothers had to acknowledge that they had heard about this for the first time "No, I was not aware of it Probably I missed it" (#2, Kulan) "Well, I have known all about it before," (#3, Dzhambul) A great number of mothers said "I have got three children, they were so often ill I am like a doctor myself, I know everything" (#4, Dzhambul) " There is nothing new When I call a doctor he says absolutely the same " Some of the respondents were shocked by the fact that the radio spot said " the flue can cause death I never knew it before!" (#3, 5, 6, Dzhambul)

3 Most of the mothers considered the radio materials they had heard to be clear "Yes, everything is clear " (#3, 5, 6, Dzhambul) Some mothers shrugged their shoulders and said "It is not quite clear, I didn't understand everything " (#2, Kulan)

4 When the moderator clarified the reasons that caused the lack of understanding, it became obvious that the mothers were either experiencing difficulties with the Russian language or difficulties with medical terminology "We would have understood everything if it were in the Kazakh language, but it's difficult in Russian " (#2, Kulan) "What is pneumonia? I don't know this word " (#2, Kulan, #4, Dzhambul) "I never heard about ARI, I don't know " (#2, Kulan) Mothers said that "inflammation of lung" instead of "pneumonia" and "bad colds" instead of "acute respiratory infections or disease" would have been more understandable " better to say inflammation of lungs Everybody will understand it " (#2, Kulan, #3, 4, 5, 7, Dzhambul) "Bad colds sound better Not everyone knows ARI " (#1, 2, Kulan, #3, 4, 6, Dzhambul) Some mothers thought that it would be better to replace the word "ARI" with the word "flu" in the radio spot "Flu is known by everyone!" (#1, Kulan, #3, Dzhambul)

5 Almost all interviewed women said that if the spot they heard was broadcast on the radio, they would listen to the radio more often " Yes, interesting I would have definitely listened to it " (#2, Kulan) "I would have put everything aside and listen, a lot of useful things are mentioned there " (33, 6, Dzhambul)

6 Almost all participants of the focus groups considered the information provided in the radio spot useful and interesting " yes, it's useful to hear it once again Although a doctor said it already, it's good when it is said on the radio as well " (#5, Dzhambul)

7 One of the wishes expressed by the mothers was to incorporate more interviews with other mothers into the radio programs "An anchor should not speak all the time but different mothers as well " (36, Dzhambul) "It's good when women themselves also

speak on the radio And then a doctor is given the floor to explain more " (#4, Dzhambul)

8 Some mothers also wished to have this kind of program be short (5-7 minutes) but be broadcast frequently " no need to make it long Five minutes is enough, but it would be nice to have them on several times a week " (#7, Dzhambul)

9 "From this radio program I understood that I do the right thing when I call a doctor In any case, medical care should be the priority He (a doctor) will come and listen examine the child Neither coughing nor high temperature should be left without attention It may not be simple coughing but the beginning of pneumonia - that's what I have learnt from the program!" "More programs like that are needed, due to our ignorance we might do something wrong and the child will feel worse "

Conclusions

Radio materials on ARI provided by VOA made a good impression upon the majority of the respondents Most of the women commented on the usefulness of the information However, some of the respondents wished that the radio programs about health care were broadcast in the Kazakh language Most of them would have preferred to hear the radio programs delivered in plain, everyday language which is more understandable than scientific medical terminology (e g "inflammation of lungs" instead of "pneumonia") And, many women suggested that more interviews with mothers be incorporated into similar types of programs The audience is more interested in hearing a woman like themselves discuss family health problems

Interview with Physicians

1 In Dzhambul Oblast, Kazakhstan, from October 10 to October 25, 1997, a total of 7 interviews with physicians were conducted from different facilities in Taraz and Kulan village, of the Lugovskoi Rayon The physicians told us about the preparation for ORT Social mobilization week back in July-August, 1997

"There was a great deal of preparatory work initiated A lot of matters were discussed thoroughly from the number of participants to the means to be used as tools for influencing the population We were training physicians and nurses on what ORS is, how to use it for children of different ages We also did testing of the knowledge, acquired by the health personnel after the training " (Dr Maikamal Eselbaeva, Deputy Chief Physician, First Pediatric Hospital of Taraz, capital of Dzhambul Oblast)

"After all these activities, we started conducting the social mobilization week itself First, short performances were produced in kindergartens Children were taught different rhymes, poems and songs about ORS and its use School children were asked to write dictation on the theme of ORT " (Dr Gulfia Izmailova, Chief Pediatrician of Dzhambul Oblast)

"Physicians at the uchastok level (the city is divided into many uchastok's, and every physician is responsible for one of them) were divided into groups some attended hotels some attended their own uchastoks, another group visited markets Information about ORT was broadcast on the radio every hour at the market We also were distributing leaflets, and displaying posters Posters were displayed in all the buses as well " (Dr M Eselbaeva)

"We held conversations with teachers and conducted lectures for senior schoolchildren on the theme of ORT ORS was distributed and we tried to cover all children under 3 years of age Messages and articles were published in newspapers Several messages were broadcast on TV and radio Personally, I prepared a 7-minute radio program " (Dr Gulnara Djeksalykova)

2 Talking about the plans for the last three months of 1997, Dr G Izmailova pointed out, that the preparation for ARI Social mobilization week has already been started in Dzhambul Oblast "We have begun the training of feldshers in rayons in ARI prevention We plan to conduct ARI week at the end of December Our main objective is to explain the necessity and importance for the population to consult a doctor early during the onset of the disease We also want to expose the population to the information about particularly dangerous ARI symptoms It is stipulated that ORT week will be conducted in the summer "

3 Breast-feeding was frequently touched upon during interviews with physicians "We are actively involved in breast feeding promotion as a tool of prevention of infectious diseases in children During these 4-5 days of the mothers' stay at our maternity house, we do our best to 'load' her with all kinds of knowledge When mothers are discharged from the facility, I explain that they should disseminate the knowledge acquired to their neighbors, friends, and relatives That's the way we are gradually creating mothers' support groups I believe that in about 2-3 years we will see the results of the work performed " (Dr Arna Djeksanbaeva, obstetrician-gynecologist, Kulan village, Lugovskoi Rayon)

Conclusions

The success of ORT Social mobilization week, confirmed by our focus group surveys and research among mothers, is accounted for by the enormous preparatory efforts of those involved The range of activities of the health personnel of Dzhambul Oblast during ORT week, could be used as a good example for conducting similar activities in other oblasts of Kazakhstan and other regions in Central Asia The ORT information campaign conducted in Dzhambul oblast was very effective, and the efficacy of the activity is proved by the analysis of mothers' answers to different questions in our focus groups

REPORT ON A FIELD TRIP TO OSH OBLAST

Kyrgyzstan

October 21-October 31, 1997

Dzhatdoeva worked in Osh Oblast from October 25 until October 31 to evaluate CAIDP activities conducted in this region of Kyrgyzstan Dzhatdoeva was accompanied by Damira Bibosunova, BASICS ARI/CDD Coordinator from Bishkek, on this trip On October 27, Dzhatdoeva and Bibosunova worked in Osh Oblast Health Education Center with Chief Physician, Dr Eraliev and other specialists from the Center Dr Eraliev, informed Dzhatdoeva about the activities carried out by the Center both in Osh City and in the oblast in general In accordance with the assistance of the German Cultural Society (Fund) "Epos," the staff of the Center interviewed 57 families during a survey that was carried out in Djide village, Osh Oblast The questionnaire asked about social issues in the family, economic status, and awareness about prevention of diarrheal diseases, acute respiratory infections and 13 other diseases (questionnaire came from the German Central Asia Society) Breastfeeding comprised a separate section on the Questionnaire The work was conducted within a one-week period The questionnaires that were filled out were submitted to "Epos" for processing and analysis Appreciating the work done by the Center, "Epos" is supporting the Center with health promotion and educational literature both in Russian and Kyrgyz

A similar survey will be repeated on the population in Djide village in three months to evaluate the upcoming mass information campaign The findings of the two surveys will then be compared The surveyors want to assess the impact of the campaign on the level of awareness of the population on health issues It is stipulated that the results of the two rounds of the survey will be used as the framework of a strategy for conducting an information campaign on health issues in Osh Oblast Distribution of booklets and brochures both in the Russian and Kyrgyz languages among the population is regarded as the main channel of communication

According to Dr Eraliev, " due to financial problems, radio is working poorly in the villages (rural areas) The same is true for local newspapers, as the local population can not afford to buy them So, newspapers are not available to most of the population " The situation is a little bit better for television because the majority of the oblast population watch TV "But the air time is very expensive on TV the rate is 100 soms (approx $6) per minute But sometimes we are given free air for broadcasting health messages, and the workers of the Center prepared several TV-programs on sex education for teenagers, AIDS prevention, etc "

The Center does not have a special well-defined program for ARI/CDD prevention activities Dzhatdoeva proposed conducting a special ARI social mobilization week in Osh Oblast and Dr Eraliev accepted this proposal with enthusiasm He promised that the workers of the Center and he himself would take an active part in this activity It was agreed between Dr Eraliev, Dzhatdoeva and Bibosunova that a special Workshop on the Issues of ARI/CDD prevention would be held October 31, with joint efforts of the Osh City Health Education Center's workers, as well as Dr Kadyrova Madicha, Chief Pediatrician for the oblast

On October 28, Dzhatdoeva and Bibosunova made a field trip to Kara-Suu Rayon The Central Rayon Hospital (CRH), "Internat" (a secondary boarding school), 3 FAPs and 1 SUB were visited during this trip The feldsher responsible for prevention and educational work at the CRH told them that

- All the physicians of Kara-Suu Rayon have their own annual plans of lectures on health issues, ARI and CDD included, to be conducted for the population At the end of every month, physicians report on the number of the lectures conducted by them to their supervisors and health authorities
- Every 2 weeks school children of the Rayon write a dictation on themes of various diseases

The visit to the "Internat" in Kara-Suu City was made to see if children remember any health information, considering the fact that they are required to write dictations on the themes of diseases so frequently

- We talked with 30-35 children in the school-yard Most of the children interviewed named the symptoms and possible complications of ARI correctly The answers to the questions about DD were somewhat muddled Almost all of the children interviewed named DD symptoms correctly, but not all of them could tell us what ORS was

When visiting the FAP's and SUB, Dzhatdoeva and Bibosunova met with both medical personnel and mothers of children under 5 years of age Medical workers visit from 10 to 12 families every day in each village of the oblast On their visits, they inform the population about ARI/DD preventative measures, breastfeeding, vaccination and other issues Dzhatdoeva and Bibosunova found that medical staff at the primary level do need published materials for their education and that of mothers

During the conversation with mothers the following questions were asked

- Do you know what ORS is?
- When is ORS used?
- How is ORS used?

Out of 10 mothers, who were interviewed, almost all of them answered the above questions correctly Dzhatdoeva was surprised by the mother's high level of awareness of ORS The feldsher of the corresponding FAP explained that, "Each mother is visited by a medical nurse as many times as it is required for the mother to remember the information given Now we expect the knowledge acquired by the mothers to lead to their behavioral changes, and that they will start using ORS correctly "

On October 29, Dzhatdoeva and Bibosunova worked in the Osh City Health Education Center There are only two qualified specialists on the staff of this Center Elena Arkadievna Kon, Chief Physician, and the Deputy Chief Physician The main function of the Center is primarily limited to the control/supervision of physicians' health information work, e g the number of lectures

conducted by the physicians for the population The themes of the lectures conducted were mainly focused on prevention of STDs, and the issues of family planning and birth control among teenagers The Osh City Health Education Center is almost not involved at all with ARI/DD, and staff of the Center did not seem interested in a proposal to conduct a ARI/DD social mobilization week

In the afternoon, Dzhatdoeva and Bibosunova visited the International Information Center of Osh City, which was established by The Soros Foundation The employees of the Information Center promised to provide assistance and support during ARI/DD social mobilization week in Osh City, if there were to be such an event

On October 30, Dzhatdoeva and Bibosunova went to Nookat Rayon and visited four FAPs Dzhatdoeva and Bibosunova talked with medical personnel of the health institutions and 8 mothers The findings are similar to those in Kara-Suu Rayon Mothers are well informed of the issues related to ORS use Mothers also expressed their gratitude to local medical staff for their concern and attention in their regular visits and discussions with families

On October 31, a Workshop was held at the Osh oblast Health Education Center with the participation of, Dzhatdoeva, Bibosunova, Eraliev, Kadyrova, and nine other specialists of the oblast Health Department Dzhatdoeva presented the results and findings of the field trips to Kara-Suu and Nookat Rayons to the audience Then informed them about the experience gained during ORT Social mobilization week, conducted in Dzhambul Oblast, Kazakhstan Dzhatdoeva gave her recommendations for ARI Social mobilization week to be held in December 1997 The specialists of both the oblast and City Health Education Centers discussed the issues concerning the upcoming preparation for ARI week

CONCLUSIONS

1 0 Virtually all of the work related to the education and increase of public awareness of ARI/DD issues is the responsibility of medical nurses and primary level medical personnel (mid-wives, feldshers)

2 0 The majority of mothers who were interviewed are correctly informed of the issues related to ORS use

3 0 The Osh oblast Health Education Center has different booklets and brochures on various disease prevention methods both in Russian and Kyrgyz, but cannot distribute them at the rayon-level because the rayon health facilities can't afford to do so The Osh oblast Health Education Center gets these materials from the Republican level Health Education Center and is expected to pay for them Each medical information set comprises two brochures, three posters and two leaflets The price of one set is approximately $3

RECOMMENDATIONS

It is necessary for the Osh oblast Health Education Center to

1 Provide the primary health personnel of FAP, SUB and SVA with supplementary medical literature,

2 Appeal to the oblast local authorities to allocate some funds to cover the costs of the educational materials on ARI/DD and other vaccine-preventable diseases to be circulated among the population,

3 And, to use the following available channels more actively
Markets, city (municipal) transport, and higher educational institutions

APPENDIX B

English, Russian and Kazakh language versions
of the questionnaire on the
VOA Broadcast and Sources of Health Information in Zhambul Oblast

October 1997

25

Анкета

Благодарим Вас за согласие уделить нам время
Мы бы хотели узнать из каких источников
Вы получаете информацию об охране здроровья
Ответьте пожалуйста, на вопросы и спросите
если что то Вам не понятно Спасибо

1 Слушаете ли Вы местное радио

Да _____
Нет _____

2 Если 'да" тот как часто?

Один день в неделю _____
Два дня _____
Три дня _____
Каждый день_____
Другое_____

3 В какое время дня Вы обычно слушаете радио?

Утром _____
Днем _____
Вечером _____
Поздно вечером/ночью _____

4 Какие джамбульские радиостанции Вы слушаете?

_____ _____ _____ _____ _____

5 Можете ли Вы вспомнить какие либо радиопередачи об охране здроровья за последний месяц?

Да _____
Нет _____

Если нет", то на вопросы № 6 7 8 отвечать не надо

6 Если Вы можете вспомнить какую либо радиопередачу об охране здроровья то о чем он была/они были?

Об острых респираторно-вирусных заболеваниях _____
Об острых кишечных инфекциях (диарея)_____
О воспалении легких_____
Об иммунизации детей _____
О правильном приготовлении и хранении пищи _____
О грудном вскармливании_____
О детских болезнях _____
Другое_____

7 Была ли для Вас полезной информация которую Вы получили из радиопередачи?

Да_____
Нет_____

8 Что Вам запомнилось из радиопередачи?

_____
_____

9 Помните ли Вы какая радиостанция передавала эти программы?

Да _____
Нет _____

10 Как она называлась?

Радиостанция _____

11 Вы слушаете "Голос Америки" или те станции которые передают радиопрограммы подготвленные "Голосом Америки"?

Да _____
Нет _____

12 Если Вы не слушаете "Голос Америки" то каковы причины?
-нет радио
не знаю на каких волнах ее ловить
-не слышал о такой радиостанции
-плохо понимаю по-русски
мне не нравится эта радиостанция
-другое_____

13 Слушали ли Вы "Голос Америки" или радиопрограмму, подготовленную "Голосом Америки" в течение двух прошедших недель?
Да _____
Нет _____

14 Если "да" то помните ли Вы о чем была эта программа?

Новости _____
Здравоохранение _____
Культурные темы _____
Спорт _____
Бизнес _____
Другое_____

15 Слышали ли Вы когда либо передачи ' Голоса Америки" о здравоохранении?

Да _____
Нет _____

16 Помните ли Вы какую тему затрагивала передача по "Голосу Америки"?

Об острых респираторно-вирусных заболеваниях _____
О воспалении легких_____
Об острых кишечных инфекциях (диарея)_____
Об иммунизации детей _____
О правильном приготовлении и хранении пищи _____
О грудном вскармливании_____
О детских болезнях _____
Другое_____

17 Была ли полезной для Вас информация которую Вы получили?

Да _____
Нет _____

18 Если 'да то в чем была польза?

_____
_____

19 Смотрите ли Вы телевидение?

Да _____
Нет _____

20 Если Вы смотрите телевидение то сколько часов в неделю?

Один день в неделю _____
Два дня _____
Три дня _____
Каждый день_____
Другое_____

21 Получаете ли Вы информацию о здравоохранении по телевидению?

Да _____
Нет _____

22 Каким источникам информации о здравоохранении Вы доверяете больше всего? (Отметьте столько пунктов сколько сочтете нужным)

Медицинским работникам_____
Радио _____
Родственникам _____
Телевидению _____
Газетам _____
Плакатам _____
Друзьям _____
Знакомым _____
Другим источникам _____

23 Возраст женщины у которой берется интервью _____

24 Число детей до пяти лет в семье _____

25 Место проживания женщины

Село_____
Город_____

Кто проводит интервью?
Дата интервью
Время интервью
Место интервью

Заметки лица взявшего интервью

Какие вопросы были плохо понятны женщинам присматривающим за детьми?

Анкета

Сіздің бізге бөлген уақытыңыз үшін үлкен алғыс айтамыз Біз сіздің денсаулық сақтау туралы мәліметті қай саладан хабардар болатыныңызды білгіміз келеді Төмендегі сұрақтарға жауап беруіңізді өтінемізі, егер түсініксіз сұрақ кездессе сұраңыз Рахмет

1 Сіз жергілікті радионы тыңдайсыз ба ?
Иә_____
Жоқ_____

2 Егер «Иә» болса қанша рет ?
Бір аптада бір рет_____
Еке күн_____
Үш күн_____
Үнемі_____
Басқа жауап_____

3 Сіз радионы күннің қандай кезеңінде тыңдайсыз ?
Таңертең_____
Күндіз_____
Кешке_____
Өте кеш / түнде_____

4 Сіз жамбылдық қандай радиостанциясын тыңдайсыз ?
_____ _____ _____ _____ _____

5 Соңғы айдағы денсаулық сақтау туралы қандай да болмасын радиодан берілген хабарларды есіңізге түсіре аласыз ба ?
Иә_____
Жоқ_____
Егер «жок» болса №6,7,8 сұрақтарына жауап берудің қажеті жоқ

6 Егер денсаулық сақтау туралы радиодан берілген қандай да болмасын хабарды есіңізге түсіре алсаңыз Ол немесе олар не туралы болды ?
Тұмау аурулары туралы_____
Ішек аурулары туралы (диарея)_____
Өкпе кабынау туралы_____

Тағамды дұрыс дайындап, сақтау туралы_____
Аналардың емізуі туралы_____
Жас балалардың аурулары туралы_____
Басқалар_____

7 Сіз үшін радио арқылы берілген хабардан алған мәлімет пайдалы болды ма ?
Иә_____
Жоқ_____

8 Радио арқылы берілген хабардан
Сіздің есеңізде не қалды ?

_____

_____

9 Хабар қандай радиостанция арқылы берілгені Сіздің есіңізде ме ?
Иә_____
Жоқ_____

10 Ол (радиостанция) қалай аталады ?
Радиостанция_____

11 Сіз «Америка даусын» немесе «Америка даусы» дайындаған хабарларды беретін радиостанцияларын тыңдайсыз ба ?
Иә_____
Жоқ_____

12 Егер сіз «Америка даусын» тыңдай алмасаңыз оның себептері неде ?
-радио жоқ
-қандай толқыннан оны ұстайтынын білмеймін
-ондай радиостанция туралы естігем жоқ
-орыс тілінде жақсы түсінбеймін
-маған ол радиостанция ұнамайды
-басқа себептер_____

13 Өткен екі апта аралығында Сіз «Америка дауысы» дайындаған хабарды
тыңдадыңыз ба ?
Иә_____
Жоқ_____

14 Егер «Иә» болса ол хабар не туралы болды ?
Жаңалықтар_____
Денсаулық сақтау_____
Мәдени тақырыбтар_____
Спорт_____
Бизнес_____
Басқа тақырыб_____

15 Сіз «Америка даусының» денсаулық сақтау туралы хабарын тыңдаған кезіңіз болды ма ?
Иә_____
Жоқ_____

16 Сіз «Америка даусы» арқылы берелгін хабардың тақырыбы сіздің есіңезде ме ?
Тұмау туралы_____
Өкпе қабынуы туралы_____
Ішек аурулары туралы_____
Балаларға екпе жасау туралы_____
Тағамды дұрыс дайындап сақтау туралы_____
Аналардың емізуі туралы_____
Басқалар_____

17 Сіздің алған мәлімет сіз үшін пайдалы болды ма ?
Иә_____
Жоқ_____

18 Егер «Иә» болса, онда пайдасы неде ?
_____
_____

19 Сіз теледидар көресіз бе ?
Иә_____
Жоқ_____

20 Егер Сіз теледидар көрсеңіз, онда аптасына қанша сағат ?
Бір аптада бір сағаттан кем_____
Бір аптада бес немесе одан да көп сағат_____

21 Теледидар арқылы денсаулық сақтау туралы мәлімет (хабар) аласыз ба?
Иә_____
Жоқ_____

32

22 Сіз денсаулық сақтау мәлімет (хабар) туралы қандай салаға көбірек сенім білдіресіз ?

Медецина қызметкерлеріне_____

Радиоға_____

Туыстарыма_____

Теледидарға_____

Газеттерге_____

Плакаттарға_____

Достарыма_____

Таныстарыма_____

Басқа салаларға_____

23 Интервью алған әйелдің жасы_____

24 Бес жасқа дейінгі жанұядағы балалардың саны_____

25 Әйелдердің турғылықты мекен жайы

Ауыл_____

Қала_____

Интервьюді кім өткізді ?

Интервью өткізген күн

Интервью алған уақыт

Интервью өткізген орын

Интервью алған адамның белгілері

Балаларды қарайтын әйелдерге қандай сұрақтар түсініксіз болды ?

Questionnaire – Women Who Care For Children Age Five Years and Younger

Thank you for agreeing to take some time to talk to us We would like to talk to you about where you get information on health Please answer the questions to the best of your knowledge, and let us know if you do not understand any questions Thank you

1 Do you ever listen to the radio?

Yes_____
No_____

2 If you do listen to the radio, how often?
One day a week_____
Two days_____
Three days_____
Every day _____
Other_____

3 What time of day do you usually listen to the radio?

Morning_____
Afternoon_____
Evening_____
Late night_____

4 What dzhambul radio stations do you listen to?

_____ _____
_____ _____

5 Do you recall hearing any information about health on the radio in the past month?

Yes_____
No_____

6 If you do remember a health program, do you remember what the topic(s) was/were?

Acute Respiratory Disease_____
Diarrheal Disease_____
Pneumonia_____
Childhood Immunization_____
Safe food preparation_____
Breast Feeding_____
Danger signs of a child's illness_____
Other_____

7 Was the information you received on the radio useful?

Yes_____
No_____

8 What specifically do you remember about the program?

9 Do you remember which radio channel broadcast it?
Yes_____
No_____

10 Name of channel_____

11 Do you ever listen to the Voice of America, or listen to radio stations that broadcast programs created by the Voice of America?

Yes_____
No_____

12 If you do not listen to the Voice of America, is there a specific reason?

Do not have a radio_____
I do not know what frequency on which it is broadcast_____
I have never heard of that station_____
I do not understand Russian well_____
I do not like that station_____
Other_____

13 Have you listened to the Voice of America or a Voice of America program in the last two weeks?
Yes_____
No_____

14 Do you recall what the subject was?

News_____
Health_____
Cultural Subjects_____
Sports___
Business_____
Other

15 Have you ever heard any programs about health on the VOA?

Yes_____
No_____

16 If you do remember a health program on the VOA, do you remember what the topic(s) was/were?

Acute Respiratory Disease_____
Pneumonia_____
Diarrheal Disease_____
Childhood Immunization_____
Safe food preparation_____
Breast Feeding_____
Danger signs of a child's illness_____
Other_____

17 Was the information useful?
Yes_____
No____

18 If yes, what specific useful information do you remember about the health program(s)?

19 Do you watch television?

Yes_____
No_____

20 If you do watch television, how often do you watch?

One day a week_____
Two days_____
Three days_____
Every day _____
Other_____

21 Do you get health information on television?

Yes_____

No_____

22 What are the sources you trust the most for getting information on health? You may choose more than one answer

Health workers_____

Radio_____

Relatives_____

Television_____

Newspapers_____

Posters_____

Friends_____

Acquaintances_____

Other sources _____

23 Age of Woman Interviewed _____

24 Number of children cared for age five years and younger _____

25 Where does the mother live

Rural area_____

Urban area_____

Interviewer

Date of Interview

Time

Location

Thank the respondent for the interview

Notes

APPENDIX C

Dzhambul VOA Evaluation Key

ID _____

1 Do you listen to local radio? _

2 One day a week? _

3 Two days a week? _

4 Three days a week? _

5 Everyday? _

6 Other? _

7 Morning? _

8 Afternoon? _

9 Evening? _

10 Late evening/late night? _

11 What stations in Dzhambul do you listen to? _ _____

12 Do you remember anything about the radio broadcast? _

13 If you remember the radio broadcast do you remember what it was about? About ARI? _

14 Diarrhea? _

15 Pneumonia? _

16 Childhood immunization? _

17 Nutrition? _

18 Breastfeeding? _

19 Childhood disease? _

20 Other? _

21 Was the information useful? _

22 What do you remember most about the broadcast? _

_____

23 Do you remember which radio station? _

24 Do you remember what it is called? _

25 Do you listen to VOA? _

26 If you do not,why? No radio _

27 Don't know on what band it is broadcast _

28 Never heard of it _

29 Don't understand Russian well _

30 I don't like that station _

31 Other _

32 Have you heard VOA in the last two weeks? _

33 If you do remember the broadcast, what kind of programming was it?
News _

34 Health _

35 Cultural _

36 Sports _

37 Business _

38 Other _

39 Have you ever heard a VOA broadcast about health? _

40 Do you remeber the the theme from the VOA broadcast?
About severe respiratory-viral infection? _

41 Pneumonia ? _

42 Diarrhea? _

43 Childhood immunization? _

44 Nutrition? _

45 Breastfeeding? _

46 Childhhod disease? _

47 Other? _

48 Was the information useful? _

49 If yes, what was useful? _

---

50 Do you watch TV? _

51 If you watch TV, haw many often during the week?
One day a week? _

52 Two days? _

53 Three days? _

54 Every day? _

55 Other? _

56 Do you get information about health from television? _

57 Where do you get the most reliable information about health? May choos Medical workers? _

58 Radio? _

59 Relatives? _

60 Television? _

61 Newpapers? _

62 Posters? _

63 Friends? _

64 Acquaintences? _

65 Other sources? _

66 Age of mother? __

67 Number of children 5 years and under? __

68 Area of interview urban _
rural _

69 Date of interview _____

70 Time of interview _____

71 Place of interview _____

72 Notes

_____

ID	Freq	Percent	Cum
1 0	1	0 4%	0 4%
2 0	1	0 4%	0 7%
3 0	1	0 4%	1 1%
4 0	1	0 4%	1 5%
5 0	1	0 4%	1 9%
6 0	1	0 4%	2 2%
7 0	1	0 4%	2 6%
8 0	1	0 4%	3 0%
9 0	1	0 4%	3 3%
10 0	1	0 4%	3 7%
11 0	1	0 4%	4 1%
12 0	1	0 4%	4 4%
13 0	1	0 4%	4 8%
14 0	1	0 4%	5 2%
15 0	1	0 4%	5 6%
16 0	1	0 4%	5 9%
17 0	1	0 4%	6 3%
18 0	1	0 4%	6 7%
19 0	1	0 4%	7 0%
20 0	1	0 4%	7 4%
21 0	1	0 4%	7 8%
22 0	1	0 4%	8 1%
23 0	1	0 4%	8 5%
24 0	1	0 4%	8 9%
25 0	1	0 4%	9 3%
26 0	1	0 4%	9 6%
27 0	1	0 4%	10 0%
28 0	1	0 4%	10 4%
29 0	1	0 4%	10 7%
30 0	1	0 4%	11 1%
31 0	1	0 4%	11 5%
32 0	1	0 4%	11 9%
33 0	1	0 4%	12 2%
34 0	1	0 4%	12 6%
35 0	1	0 4%	13 0%
36 0	1	0 4%	13 3%
37 0	1	0 4%	13 7%
38 0	1	0 4%	14 1%
39 0	1	0 4%	14 4%
40 0	1	0 4%	14 8%
41 0	1	0 4%	15 2%
42 0	1	0 4%	15 6%
43 0	1	0 4%	15 9%
44 0	1	0 4%	16 3%
45 0	1	0 4%	16 7%
46 0	1	0 4%	17 0%
47 0	1	0 4%	17 4%
48 0	1	0 4%	17 8%
49 0	1	0 4%	18 1%
50 0	1	0 4%	18 5%
51 0	1	0 4%	18 9%
52 0	1	0 4%	19 3%
53 0	1	0 4%	19 6%
54 0	1	0 4%	20 0%
55 0	1	0 4%	20 4%

56	0	1	0	4%	20 7%
57	0	1	0	4%	21 1%
58	0	1	0	4%	21 5%
59	0	1	0	4%	21 9%
60	0	1	0	4%	22 2%
61	0	1	0	4%	22 6%
62	0	1	0	4%	23 0%
63	0	1	0	4%	23 3%
64	0	1	0	4%	23 7%
65	0	1	0	4%	24 1%
66	0	1	0	4%	24 4%
67	0	1	0	4%	24 8%
68	0	1	0	4%	25 2%
69	0	1	0	4%	25 6%
70	0	1	0	4%	25 9%
71	0	1	0	4%	26 3%
72	0	1	0	4%	26 7%
73	0	1	0	4%	27 0%
74	0	1	0	4%	27 4%
75	0	1	0	4%	27 8%
76	0	1	0	4%	28 1%
77	0	1	0	4%	28 5%
78	0	1	0	4%	28 9%
79	0	1	0	4%	29 3%
80	0	1	0	4%	29 6%
81	0	1	0	4%	30 0%
82	0	1	0	4%	30 4%
83	0	1	0	4%	30 7%
84	0	1	0	4%	31 1%
85	0	1	0	4%	31 5%
86	0	1	0	4%	31 9%
87	0	1	0	4%	32 2%
88	0	1	0	4%	32 6%
89	0	1	0	4%	33 0%
90	0	1	0	4%	33 3%
91	0	1	0	4%	33 7%
92	0	1	0	4%	34 1%
93	0	1	0	4%	34 4%
94	0	1	0	4%	34 8%
95	0	1	0	4%	35 2%
96	0	1	0	4%	35 6%
97	0	1	0	4%	35 9%
98	0	1	0	4%	36 3%
99	0	1	0	4%	36 7%
100	0	1	0	4%	37 0%
101	0	1	0	4%	37 4%
102	0	1	0	4%	37 8%
103	0	1	0	4%	38 1%
104	0	1	0	4%	38 5%
105	0	1	0	4%	38 9%
106	0	1	0	4%	39 3%
107	0	1	0	4%	39 6%
108	0	1	0	4%	40 0%
109	0	1	0	4%	40 4%
110	0	1	0	4%	40 7%
111	0	1	0	4%	41 1%
112	0	1	0	4%	41 5%
113	0	1	0	4%	41 9%
114	0	1	0	4%	42 2%

115	0	1	0	4%	42 6%
116	0	1	0	4%	43 0%
117	0	1	0	4%	43 3%
118	0	1	0	4%	43 7%
119	0	1	0	4%	44 1%
120	0	1	0	4%	44 4%
121	0	1	0	4%	44 8%
122	0	1	0	4%	45 2%
123	0	1	0	4%	45 6%
124	0	1	0	4%	45 9%
125	0	1	0	4%	46 3%
126	0	1	0	4%	46 7%
127	0	1	0	4%	47 0%
128	0	1	0	4%	47 4%
129	0	1	0	4%	47 8%
130	0	1	0	4%	48 1%
131	0	1	0	4%	48 5%
132	0	1	0	4%	48 9%
133	0	1	0	4%	49 3%
134	0	1	0	4%	49 6%
135	0	1	0	4%	50 0%
136	0	1	0	4%	50 4%
137	0	1	0	4%	50 7%
138	0	1	0	4%	51 1%
139	0	1	0	4%	51 5%
140	0	1	0	4%	51 9%
141	0	1	0	4%	52 2%
142	0	1	0	4%	52 6%
143	0	1	0	4%	53 0%
144	0	1	0	4%	53 3%
145	0	1	0	4%	53 7%
146	0	1	0	4%	54 1%
147	0	1	0	4%	54 4%
148	0	1	0	4%	54 8%
149	0	1	0	4%	55 2%
150	0	1	0	4%	55 6%
151	0	1	0	4%	55 9%
152	0	1	0	4%	56 3%
153	0	1	0	4%	56 7%
154	0	1	0	4%	57 0%
155	0	1	0	4%	57 4%
156	0	1	0	4%	57 8%
157	0	1	0	4%	58 1%
158	0	1	0	4%	58 5%
159	0	1	0	4%	58 9%
160	0	1	0	4%	59 3%
161	0	1	0	4%	59 6%
162	0	1	0	4%	60 0%
163	0	1	0	4%	60 4%
164	0	1	0	4%	60 7%
165	0	1	0	4%	61 1%
166	0	1	0	4%	61 5%
167	0	1	0	4%	61 9%
168	0	1	0	4%	62 2%
169	0	1	0	4%	62 6%
170	0	1	0	4%	63 0%
171	0	1	0	4%	63 3%
172	0	1	0	4%	63 7%
173	0	1	0	4%	64 1%

174	0	1	0	4%	64	4%
175	0	1	0	4%	64	8%
176	0	1	0	4%	65	2%
177	0	1	0	4%	65	6%
178	0	1	0	4%	65	9%
179	0	1	0	4%	66	3%
180	0	1	0	4%	66	7%
181	0	1	0	4%	67	0%
182	0	1	0	4%	67	4%
183	0	1	0	4%	67	8%
184	0	1	0	4%	68	1%
185	0	1	0	4%	68	5%
186	0	1	0	4%	68	9%
187	0	1	0	4%	69	3%
188	0	1	0	4%	69	6%
189	0	1	0	4%	70	0%
190	0	1	0	4%	70	4%
191	0	1	0	4%	70	7%
192	0	1	0	4%	71	1%
193	0	1	0	4%	71	5%
194	0	1	0	4%	71	9%
195	0	1	0	4%	72	2%
196	0	1	0	4%	72	6%
197	0	1	0	4%	73	0%
198	0	1	0	4%	73	3%
199	0	1	0	4%	73	7%
200	0	1	0	4%	74	1%
201	0	1	0	4%	74	4%
202	0	1	0	4%	74	8%
203	0	1	0	4%	75	2%
204	0	1	0	4%	75	6%
205	0	1	0	4%	75	9%
206	0	1	0	4%	76	3%
207	0	1	0	4%	76	7%
208	0	1	0	4%	77	0%
209	0	1	0	4%	77	4%
210	0	1	0	4%	77	8%
211	0	1	0	4%	78	1%
212	0	1	0	4%	78	5%
213	0	1	0	4%	78	9%
214	0	1	0	4%	79	3%
215	0	1	0	4%	79	6%
216	0	1	0	4%	80	0%
217	0	1	0	4%	80	4%
218	0	1	0	4%	80	7%
219	0	1	0	4%	81	1%
220	0	1	0	4%	81	5%
221	0	1	0	4%	81	9%
222	0	1	0	4%	82	2%
223	0	1	0	4%	82	6%
224	0	1	0	4%	83	0%
225	0	1	0	4%	83	3%
226	0	1	0	4%	83	7%
227	0	1	0	4%	84	1%
228	0	1	0	4%	84	4%
229	0	1	0	4%	84	8%
230	0	1	0	4%	85	2%
231	0	1	0	4%	85	6%
232	0	1	0	4%	85	9%

233 0	1	0 4%	86 3%
234 0	1	0 4%	86 7%
235 0	1	0 4%	87 0%
236 0	1	0 4%	87 4%
237 0	1	0 4%	87 8%
238 0	1	0 4%	88 1%
239 0	1	0 4%	88 5%
240 0	1	0 4%	88 9%
241 0	1	0 4%	89 3%
242 0	1	0 4%	89 6%
243 0	1	0 4%	90 0%
244 0	1	0 4%	90 4%
245 0	1	0 4%	90 7%
246 0	1	0 4%	91 1%
247 0	1	0 4%	91 5%
248 0	1	0 4%	91 9%
249 0	1	0 4%	92 2%
250 0	1	0 4%	92 6%
251 0	1	0 4%	93 0%
252 0	1	0 4%	93 3%
253 0	1	0 4%	93 7%
254 0	1	0 4%	94 1%
255 0	1	0 4%	94 4%
256 0	1	0 4%	94 8%
257 0	1	0 4%	95 2%
258 0	1	0 4%	95 6%
259 0	1	0 4%	95 9%
260 0	1	0 4%	96 3%
261 0	1	0 4%	96 7%
262 0	1	0 4%	97 0%
263 0	1	0 4%	97 4%
264 0	1	0 4%	97 8%
265 0	1	0 4%	98 1%
266 0	1	0 4%	98 5%
267 0	1	0 4%	98 9%
268 0	1	0 4%	99 3%
269 0	1	0 4%	99 6%
270 0	1	0 4%	100 0%
Total	270	100 0%	

Total	Sum	Mean	Variance	Std Dev	Std Err
270	36585	135 500	6097 500	78 086	4 752

Minimum	25%ile	Median	75%ile	Maximum	Mode
1 000	68 000	135 500	203 000	270 000	1 000

Student's "t", testing whether mean differs from zero
T statistic = 28 513, df = 269 p-value = 0 00000

N1DOYOULIS	Freq	Percent	Cum
+	72	26 7%	26 7%
-	198	73 3%	100 0%
Total	270	100 0%	

2ONEDAYAW	Freq	Percent	Cum
-	12	100 0%	100 0%
Total	12	100 0%	

N3TWODAYSA	Freq	Percent	Cum
-	1	100 0%	100 0%
Total	1	100 0%	

N4THREEDAY	Freq	Percent	Cum
-	11	100 0%	100 0%
Total	11	100 0%	

N5EVERYDAY	Freq	Percent	Cum
+	45	100 0%	100 0%
Total	45	100 0%	

N6OTHER	Freq	Percent	Cum
+	2	100 0%	100 0%
Total	2	100 0%	

N7MORNING	Freq	Percent	Cum
-	37	100 0%	100 0%
Total	37	100 0%	

N8AFTERNOO	Freq	Percent	Cum
+	11	100 0%	100 0%
Total	11	100 0%	

N9EVENING	Freq	Percent	Cum
-	40	100 0%	100 0%
Total	40	100 0%	

N10LATEEVE	Freq	Percent	Cum

-	3	100 0%	100 0%
Total	3	100 0%	

N11STATION	Freq	Percent	Cum
+	43	97 7%	97 7%
-	1	2 3%	100 0%
Total	44	100 0%	

N11STATIO1	Freq	Percent	Cum
Akparat	7	16 7%	16 7%
Aktılek,Densaulyk,An	1	2 4%	19 0%
Habar	1	2 4%	21 4%
Mayak	2	4 8%	26 2%
local	27	64 3%	90 5%
local,Mayak,Arman,VOA	1	2 4%	92 9%
local,oblast,Akparat	1	2 4%	95 2%
local,republıc	1	2 4%	97 6%
local,republıc,Kyrgız,	1	2 4%	100 0%
Total	42	100 0%	

N12DOYOURE	Freq	Percent	Cum
+	47	70 1%	70 1%
-	20	29 9%	100 0%
Total	67	100 0%	

ABOUTARI	Freq	Percent	Cum
+	32	100 0%	100 0%
Total	32	100 0%	

N14DIARRHE	Freq	Percent	Cum
+	42	100 0%	100 0%
Total	42	100 0%	

N15PNEUMON	Freq	Percent	Cum
+	11	100 0%	100 0%
Total	11	100 0%	

N16CHILDHO	Freq	Percent	Cum

-	13	100 0%	100 0%
Total	13	100 0%	

N17NUTRITI	Freq	Percent	Cum
+	10	100 0%	100 0%
Total	10	100 0%	

N18BREASTF	Freq	Percent	Cum
+	18	100 0%	100 0%
Total	18	100 0%	

N19CHILDHO	Freq	Percent	Cum
+	21	100 0%	100 0%
Total	21	100 0%	

N20OTHER	Freq	Percent	Cum
+	5	100 0%	100 0%
Total	5	100 0%	

N21WASINFO	Freq	Percent	Cum
+	49	100 0%	100 0%
Total	49	100 0%	

N22DOYOURE	Freq	Percent	Cum
+	38	90 5%	90 5%
-	4	9 5%	100 0%
Total	42	100 0%	

N22DOYOUR1	Freq
ARI, Diarrhea	1
Diarrhea	1
Habar	1
ORS	3
about ARI,breast feeding,immunization	1
about Diarrhea, ARI	1
about Diarrhea, immunization	1
about Diarrhea,ARI,breast feeding	1

about ORS	1
about breast feeding	2
about breastfeeding	1
about diarrhea, dysentery	1
advices about health of children,american method of breast feeding	1
breast feeding	1
breastfeeding untill 6 months of age	1
breastfeeding up to 2 years	1
breastfeeding,useful of immunization of children,signes of illnesses	1
children must use clean water	1
complication with ARI	1
during vomiting,diarrhea,increasing of fever means to go to the doctor	1
how to give ors, breastfeeding	1
infectious diseases	1
learned about Diarrhea	1
nothing	1
prophylaxis against diarrhea	1
prophylaxis against diarrhea, ARI	1
prophylaxis and timliness in getting to the doctor	2
the look of measles rash,ORS,Airan(kefir),rice water for diarrhea	1
timliness in getting to the doctor	1
timliness in getting to the doctor, prophylaxis against ARI	1
to go to the doctor quickly when ill	1
to wash the food and to eat them clean and to keep hygienic norms	1
understood the importance of getting to the doctor early	1
useful advice	1
viral infections	1
what it is necessary to do during these diseases	1
what to do to keep a child from having diarrhea	1
Total	41

N23DOYOURE	Freq	Percent	Cum
+	32	64 0%	64 0%
-	18	36 0%	100 0%
Total	50	100 0%	

N24DOYOURE	Freq	Percent	Cum
+	32	78 0%	78 0%
-	9	22 0%	100 0%
Total	41	100 0%	

N25DOYOULI	Freq	Percent	Cum
+	15	22 4%	22 4%
-	52	77 6%	100 0%
Total	67	100 0%	

N26YOUDONO	Freq	Percent	Cum

+	2	100 0%	100 0%
Total	2	100 0%	

N27DONTKNO	Freq	Percent	Cum
+	14	100 0%	100 0%
Total	14	100 0%	

N28NEVERHE	Freq	Percent	Cum
+	6	100 0%	100 0%
Total	6	100 0%	

N29DONTUND	Freq	Percent	Cum
+	1	100 0%	100 0%
Total	1	100 0%	

N30IDONTLI	Freq	Percent	Cum
+	1	100 0%	100 0%
Total	1	100 0%	

N31OTHER	Freq	Percent	Cum
+	2	100 0%	100 0%
Total	2	100 0%	

N32HAVEYOU	Freq	Percent	Cum
+	12	63 2%	63 2%
-	7	36 8%	100 0%
Total	19	100 0%	

NEWS	Freq	Percent	Cum
+	3	100 0%	100 0%
Total	3	100 0%	

N34HEALTH	Freq	Percent	Cum
+	12	100 0%	100 0%

Total	12	100 0%	

N35CULTURA	Freq	Percent	Cum
+	4	100 0%	100 0%
Total	4	100 0%	

N38OTHER	Freq	Percent	Cum
+	1	100 0%	100 0%
Total	1	100 0%	

N39HAVEYOU	Freq	Percent	Cum
+	13	72 2%	72 2%
-	5	27 8%	100 0%
Total	18	100 0%	

ABOUTSEVER	Freq	Percent	Cum
+	10	100 0%	100 0%
Total	10	100 0%	

N41PNEUMON	Freq	Percent	Cum
+	1	100 0%	100 0%
Total	1	100 0%	

N42DIARRHE	Freq	Percent	Cum
+	4	100 0%	100 0%
Total	4	100 0%	

N43CHILDHO	Freq	Percent	Cum
+	2	100 0%	100 0%
Total	2	100 0%	

N44NUTRITI	Freq	Percent	Cum
+	1	100 0%	100 0%
Total	1	100 0%	

N45BREASTF	Freq	Percent	Cum
+	3	100 0%	100 0%
Total	3	100 0%	

N46CHILDHH	Freq	Percent	Cum
+	2	100 0%	100 0%
Total	2	100 0%	

N47OTHER	Freq	Percent	Cum
+	1	100 0%	100 0%
Total	1	100 0%	

N48WASINFO	Freq	Percent	Cum
+	14	100 0%	100 0%
Total	14	100 0%	

N49WASUSEF	Freq	Percent	Cum
+	11	100 0%	100 0%
Total	11	100 0%	

N49 ASUSE1	Freq
Health and prophylaxis for the body	1
about breast feeding	1
about breast feeding, immunization	1
about pneimonia -is the cold of lungs	1
about useful of breastfeeding,timliness in getting to the doctor	1
how to cure diarrhea	1
knew more about cold illnesses	1
knew what pneumonia is	1
prophylaxis against ARI	1
understood what pneumonia is	1
what it is necessery to do during these diseases	1
Total	11

N50DOYOUWA	Freq	Percent	Cum
+	258	95 9%	95 9%
-	11	4 1%	100 0%
Total	269	100 0%	

ONEDAYAWEE	Freq	Percent	Cum
+	7	100 0%	100 0%
Total	7	100 0%	

N52TWODAYS	Freq	Percent	Cum
+	6	100 0%	100 0%
Total	6	100 0%	

N53THREEDA	Freq	Percent	Cum
+	7	100 0%	100 0%
Total	7	100 0%	

N54EVERYDA	Freq	Percent	Cum
+	232	100 0%	100 0%
Total	232	100 0%	

N55OTHER	Freq	Percent	Cum
+	4	100 0%	100 0%
Total	4	100 0%	

N56DOYOUGE	Freq	Percent	Cum
+	231	92 8%	92 8%
-	18	7 2%	100 0%
Total	249	100 0%	

MEDICALWOR	Freq	Percent	Cum
+	247	100 0%	100 0%
Total	247	100 0%	

N58RADIO	Freq	Percent	Cum
+	66	100 0%	100 0%
Total	66	100 0%	

N59RELATIV	Freq	Percent	Cum
-	79	100 0%	100 0%
Total	79	100 0%	

N60TELEVIS	Freq	Percent	Cum
-	164	100 0%	100 0%
Total	164	100 0%	

N61NEWPAPE	Freq	Percent	Cum
+	115	100 0%	100 0%
Total	115	100 0%	

N62POSTERS	Freq	Percent	Cum
+	84	100 0%	100 0%
Total	84	100 0%	

N63FRIENDS	Freq	Percent	Cum
+	40	100 0%	100 0%
Total	40	100 0%	

N64ACQUAIN	Freq	Percent	Cum
+	30	100 0%	100 0%
Total	30	100 0%	

N65OTHERSO	Freq	Percent	Cum
+	55	100 0%	100 0%
Total	55	100 0%	

N66AGEMOTH	Freq	Percent	Cum
18	3	1 1%	1 1%
19	7	2 6%	3 7%
20	6	2 2%	5 9%
21	12	4 4%	10 4%
22	11	4 1%	14 4%
23	20	7 4%	21 9%
24	12	4 4%	26 3%
25	15	5 6%	31 9%

26	18	6 7%	38 5%
27	13	4 8%	43 3%
28	17	6 3%	49 6%
29	13	4 8%	54 4%
30	17	6 3%	60 7%
31	8	3 0%	63 7%
32	16	5 9%	69 6%
33	6	2 2%	71 9%
34	5	1 9%	73 7%
35	11	4 1%	77 8%
36	12	4 4%	82 2%
37	12	4 4%	86 7%
38	5	1 9%	88 5%
39	8	3 0%	91 5%
40	7	2 6%	94 1%
41	4	1 5%	95 6%
42	1	0 4%	95 9%
43	2	0 7%	96 7%
44	2	0 7%	97 4%
45	1	0 4%	97 8%
46	1	0 4%	98 1%
49	4	1 5%	99 6%
50	1	0 4%	100 0%
Total	270	100 0%	

Total	Sum	Mean	Variance	Std Dev	Std Err
270	7994	29 607	46 983	6 854	0 417

Minimum	25%ile	Median	75%ile	Maximum	Mode
18 000	24 000	29 000	35 000	50 000	23 000

Student's "t", testing whether mean differs from zero
T statistic = 70 976, df = 269 p-value = 0 00000

N67 NUMBERC	Freq	Percent	Cum
0	3	1 1%	1 1%
1	154	58 3%	59 5%
2	93	35 2%	94 7%
3	11	4 2%	98 9%
5	2	0 8%	99 6%
8	1	0 4%	100 0%
Total	264	100 0%	

Total	Sum	Mean	Variance	Std Dev	Std Err
264	391	1 481	0 608	0 780	0 048

Minimum	25%ile	Median	75%ile	Maximum	Mode
0 000	1 000	1 000	2 000	8 000	1 000

Student's "t", testing whether mean differs from zero
T statistic = 30 862, df = 263 p-value = 0 00000

56

URBAN	Freq	Percent	Cum
-	130	100 0%	100 0%
Total	130	100 0%	

RURAL	Freq	Percent	Cum
+	140	100 0%	100 0%
Total	140	100 0%	

N69DATEINT	Freq	Percent	Cum
21/10/97	19	7 2%	7 2%
22/10/97	14	5 3%	12 5%
23/10/97	61	23 1%	35 6%
24/10/97	48	18 2%	53 8%
25/10/97	5	1 9%	55 7%
26/10/97	5	1 9%	57 6%
27/10/97	112	42 4%	100 0%
Total	264	100 0%	

N70TIMEINT	Freq	Percent	Cum
10 00	1	0 4%	0 4%
10 20	1	0 4%	0 8%
10 30	1	0 4%	1 2%
10 45	1	0 4%	1 6%
11 00	5	2 0%	3 6%
11 15	6	2 4%	6 1%
11 20	1	0 4%	6 5%
11 30	2	0 8%	7 3%
11 35	2	0 8%	8 1%
11 37	2	0 8%	8 9%
11 40	1	0 4%	9 3%
11 50	1	0 4%	9 7%
11,15	1	0 4%	10 1%
12 00	7	2 8%	13 0%
12 10	2	0 8%	13 8%
12 15	3	1 2%	15 0%
12 20	2	0 8%	15 8%
12 30	4	1 6%	17 4%
12 35	2	0 8%	18 2%
12 40	7	2 8%	21 1%
12 50	2	0 8%	21 9%
12 55	2	0 8%	22 7%
12,10	1	0 4%	23 1%
12,45	1	0 4%	23 5%
13 00	14	5 7%	29 1%
13 03	1	0 4%	29 6%
13 05	1	0 4%	30 0%
13 10	4	1 6%	31 6%

13 15	2	0.8%	32.4%
13 20	5	2.0%	34.4%
13 25	2	0.8%	35.2%
13 27	3	1.2%	36.4%
13 30	7	2.8%	39.3%
13 35	2	0.8%	40.1%
13 40	7	2.8%	42.9%
13 45	1	0.4%	43.3%
13 50	4	1.6%	44.9%
13 55	2	0.8%	45.7%
13.30	1	0.4%	46.2%
14 00	10	4.0%	50.2%
14 05	2	0.8%	51.0%
14 15	3	1.2%	52.2%
14 25	1	0.4%	52.6%
14 30	4	1.6%	54.3%
14 35	1	0.4%	54.7%
15 00	5	2.0%	56.7%
15 05	1	0.4%	57.1%
15 30	2	0.8%	57.9%
15 40	1	0.4%	58.3%
15 50	2	0.8%	59.1%
15 55	1	0.4%	59.5%
16 00	9	3.6%	63.2%
16 20	3	1.2%	64.4%
16 25	3	1.2%	65.6%
16 30	11	4.5%	70.0%
16 35	1	0.4%	70.4%
16 45	2	0.8%	71.3%
16 46	1	0.4%	71.7%
16 48	1	0.4%	72.1%
16 50	3	1.2%	73.3%
17 00	19	7.7%	81.0%
17 10	2	0.8%	81.8%
17 20	4	1.6%	83.4%
17 25	1	0.4%	83.8%
17 30	3	1.2%	85.0%
18 00	6	2.4%	87.4%
18 20	2	0.8%	88.3%
18 30	2	0.8%	89.1%
18 50	1	0.4%	89.5%
19 00	4	1.6%	91.1%
19 10	1	0.4%	91.5%
19 40	1	0.4%	91.9%
20 00	4	1.6%	93.5%
20 10	1	0.4%	93.9%
20 15	1	0.4%	94.3%
20 20	2	0.8%	95.1%
20 30	1	0.4%	95.5%
20 40	1	0.4%	96.0%
21 00	3	1.2%	97.2%
22 00	2	0.8%	98.0%
8 00	1	0.4%	98.4%
9 00	4	1.6%	100.0%
Total	247	100.0%	

N71PLACEIN	Freq	Percent	Cum

N71PLACEIN	Freq	Percent	Cum
Baizak Rayon	114	42.4%	42.4%
Lugovskoi Rayon	19	7.1%	49.4%
Taraz	136	50.6%	100.0%
Total	269	100.0%	

APPENDIX D

Process Interviews and Conclusions in Kazakhstan Regarding BASICS/VOA Collaboration

Process Interviews Regarding BASICS/VOA Cooperation in Kazakhstan

Summary

In June 1997, working with BASICS Voice of America reporter Irene Kelner went to Central Asia to report on acute respiratory infections (ARI) , diarrheal diseases and other childhood illnesses The seven-part series was broadcast in Kazakhstan in August and rebroadcast in October on Dzhambul Oblast local radio twice a day in the morning and in the evening Part of her work included coordinating with local BASICS staff and interviews with Kazakhstan's Ministry of Health (MOH) staff

In October and November, as part of an evaluation of the BASICS/VOA collaboration Paul Olkhovsky traveled to Almaty and interviewed several Kazakh Ministry of Health staff and a BASICS staffer in Kazakhstan to learn of their views of the work These are the following conclusions

- The broadcasts were seen as well done and useful, despite a small radio audience in Dzhambul Oblast,
-
- MOH staffers, at first hesitant to work with a Cold War enemy agency, had a very positive impression of VOA as a result of the collaboration,
- Irene Kelner impressed both MOH and BASICS staff in Almaty with her professionalism,
- And, MOH would work with VOA again given the opportunity

Dr Ivan Ivasiv, Deputy Chief of the Department for Health of Women and Children, Ministry of Health, Republic of Kazakhstan

Interview on October 31, 1997

Ivasiv stated that there is a great need to increase social mobilization work especially in area of informing mothers about the necessity of breast feeding He had a very positive experience with Irene Kelner of VOA He had heard the broadcasts, but he could not honestly say what the short or long term impact of them would be He said he liked the fact that the broadcast were short and "compact with information " He believed the broadcasts were useful because they served to inform the population about important medical information He pointed out that it was his impression, however, that few people listen to the radio these days He believed that the program reached more people in cities like Almaty, than audiences in rural areas Ivasiv wass impressed with Kelner's ability to listen, while at the same time she was clear about what information she wanted He was reluctant at first to work with VOA because of its Cold War reputation as an ' enemy of our government " He said at first he was very careful about what he said to Kelner But he became much more comfortable when noting Kelner's professionalism He said he "breathed more easily" after hearing the broadcasts Ivasiv said that he would be delighted to repeat the work with VOA and BASICS

Dr Sophia Ayupova, Chief Pediatrician on the Kazakh Ministry of Health Immunoprophylatic Committee

Interviw on October 31, 1997

Ayupova heard the broadcasts and thought there was good information for those whoalso heard them She noted that she was impressed with the depth of the information on diarrheal disease, ARI and breasfeeding Ayupova said that these were not just Kazakh problems, but problems that were global in nature She believed that radio was a very effective tool to communicate with targeted populations She thought that Kelner was very professional and asked good questions Ayupova said the two of them understood each other well She thought that it was good to have this kind of cooperation She felt that VOA has a certain "credibility and so it was good to have them talk about our problems " As, Ivasiv had mentioned, Ayupova was apprehensive about talking to VOA, not only because of the Cold War experience, but because it is a global radio network and therefor she was concerned about being misunderstood She emphatically said that she would like to repeat the experience

Dr Svetlana Zhakesheva, CAIDP/ARI Country Coordinator, Department for Health of Women and Children, Kazakh Ministry of Health

Interview on October 31, 1997

Zhakesheva concluded it was too early to tell what the short or long-term effects of the broadcasts would be and whether or not it would change the way the MOH communicates with the population The broadcasts impressed Zhakesheva as being professionally done Since Zhakesheva was involved with the evaluation focus groups done in Zhambyl Oblast and saw for herself how the broadcast on ARI was received, she concluded that the terminology of the broadcasts needed to be simpler She felt the broadcasts were useful in principle and that in the future more people would probably listen to the radio than was the case when they were first on the air Zhakesheva said she would like to repeat the program, especially now that they were all familiar with VOA reporter Irene Kelner She thought the work with VOA was excellent and her impression of Kelner was very positive Zhakesheva said that Kelner made MOH staff feel that she wanted to help them Zhakesheva had a negative preconceived notion about VOA as a holdover from the Cold War Her impression after working with Kelner and hearing the broadcasts was that VOA is a helpful entity and a world-class broadcasting operation

Dr Albert Askarov, Chief of the State Sanitary Epidemiological Control Board, MOH, Kazakhstan

Interview on October 31, 1997

Askarov worked with Kelner, but to date had not heard the broadcasts He felt that it was useful, in principle, to use the radio as a way to connect with the population He liked working with Irene Kelner and would look forward to doing so again He thought the work with Kelner went well He always had a good impression of VOA, so the process did not change his already positive view of the agency He thought that cooperation with VOA was very constructive and should be repeated

Aigul Kuttumuratova, BASICS Coordinator, Regional Office, Almaty, Kazakhstan

Interview on November 6, 1997

Kuttumuratova felt that she was sufficiently involved with the decision-making and coordination of the BASICS/VOA collaboration She noted that she felt adequately informed through e-mail from BASICS staff in Washington She knew when Kelner would arrive and what her interests were Kuttumuratova said they worked out who Kelner should interview after her arrival

Kuttumuratova knew which diseases were the focus of the work and made sure there was enough information available She said it was a pleasure to work with Kelner and like to watch her work Kuttumuratova particularly noted Kelner's professionalism So much so, that Kuttumuratova felt Kelner gave her the idea that radio journalism could be a possible career choice in the future She had a very positive impression of the broadcasts When she heard them she felt they were solid and short, which she regarded as a plus Kuttumuratova believed that the programs were useful, particularly the information provided on ARI and diarrheal diseases She believed that this information was very necessary for mothers to have She couldn't honestly say whether or not the broadcasts or the process of VOA working with MOH had changed any of the policies or practices of Kazakhstan's MOH Kuttumuratova noted that Kelner had a hard time at first working with the MOH because of what she believes were "old views" of the VOA She noted that by Kelner's third meeting with MOH staff, they had relaxed Because of the positive working relationship Kelner had with the MOH, Kuttumuratova was sure the given an opportunity, the MOH would work with VOA in the future Kuttumuratova said that Kelner's manner of not being "too pushy" made the collaboration a success