

**NATIONAL IEC FORUM AND
WORK PLAN REVISION**

Maputo, Mozambique

September 22-October 10, 1997

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BASICS Technical Directive: 000 MZ 01 013
USAID Contract Number: HRN C 00 93 00031 00

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ACRONYMS

ACF	Accao Contre Fome
AED	Academy for Educational Development
AIMI	Africa Integrated Malaria Initiative
AMODEFA	Associacao Mocambicana de Familia
BASICS	Basic Support for Institutionalizing Child Survival
CDC	Centers for Disease Control and Prevention
DDS	Departamento Distrital de Saude
DPS	Departamento Provincial de Saude
DTS	Duencas Transmitidas Sexualmente
EPI	Expanded Program on Immunization
FHI	Food for the Hungry International
GDO	General Development Officer
GTZ	German Technical Assistance
HAI	Health Alliance International
IEC	Information, Education and Communication
MISAU	Ministerio de Saude
NGO	Non-governmental Organization
PSI	Population Services International
PVO	Private Voluntary Organization
PY5	Project Year 5
RESP	Reparticao de Educacao para a Saude Publica
SEATS	Family Planning Service Expansion and Technical Support
SESP	Seccao de Educacao para a Saude Provincial
SIDA	Sindrome de Deficiencia Imunologica Adquirida
SMI	Saude Materna Infantil
TBD	To be determined
TBN	To be named
TDY	Temporary Duty Assignment
TOT	Training of Trainers
URC	University Research Corporation
USAID	United States Agency for International Development

BACKGROUND

Although plans for the initiation of BASICS activities have been in the works for some time, on-the-ground program activities began in late July 1997 when Esther Kazilimani-Pale started work on planning and carrying out the national IEC forum scheduled for September 1997. The national IEC forum was the first BASICS activity in Mozambique, bringing together PVOs and provincial and central level Ministry of Health IEC staff. At the request of the MISAU Health Education Unit (RESP), the two-day forum was expanded to five days with additional funding from GTZ (German Technical Assistance) to allow for program planning by MISAU provincial level health education staff (SESP).

PURPOSE OF TRIP

The purpose of the trip included the following:

- 1) **National IEC Forum:** Assist BASICS/Mozambique staff and MISAU colleagues in the planning, facilitating, evaluating, drawing lessons learned, providing IEC technical input and introducing BASICS approaches in IEC, especially emphasis behaviors.
- 2) **BASICS PY5 Time Line/Work Plan:** Assist BASICS/Mozambique in revising this document and in discussing it with the MISAU unit and with USAID.
- 3) **Planning of Future Training Activities:** plan for future training activities by identifying skills and technical assistance needed.

TRIP ACTIVITIES

September 22	Arrival in Maputo.
September 23	Meeting with BASICS staff Esther Kazilimani-Pale, technical advisor, and Carolien Albers, program manager, to develop a draft program for the forum and follow-up meetings with Mr. Chalufu, chief RESP. Meeting with Dr. Calu, USAID.
September 24	Meeting with Mr. Chalufu, chief RESP and Mrs. Zeinaba Ernesto, RESP/SMI/DTS/SIDA. Meeting with Dr. Mondlane, director of Community Health.

- Meeting with GTZ advisor Dr. Shrettenbruner, GTZ facilitator Valeria Salles, Mr. Chalufu, and Mrs. Isabel Ngomane, head of the IEC section of RESP.
- September 25 Prepare materials, finalize arrangements.
- September 26 Finalize forum program and preparations with MISAU/RESP, BASICS Technical Advisor Kazilimani-Pale and GTZ.
- Meeting with Sra. Isabel Soares, Swiss Cooperation.
- September 29-
October 3 National IEC forum: facilitate sessions during the first two days, make a presentation on how to plan and develop IEC strategies, introduce emphasis behaviors; in the last three days, provide technical input to the planning process; develop evaluation questionnaire, distribute it to participants at the first phase, and tabulate it.
- October 6 Meeting with BASICS Program Manager Albers and Technical Advisor Kazilimani-Pale to revise work plan and to discuss program development issues.
- October 7 Finalize revision of work plan, discuss the work plan with Mr. Chalufu, MISAU/RESP.
- October 8 Meeting with USAID's Laura Slobey, GDO, Dr. Calu, and Richard Ozmansky to discuss work plan, trip report and debriefing.
- October 9 Meetings with Kathy Thompson (SEATS) and Diana Silemperi (Pathfinder) to discuss future collaboration.
- October 10 Departure for Washington via Johannesburg/NYC.

RECOMMENDATIONS/CONCLUSIONS

The national IEC forum was a success. It provides a basis for BASICS activities and was a good introduction of the BASICS project in Mozambique. The collaboration with GTZ proved to be quite helpful, and it reinforced the MISAU/RESP role of defining Mozambique's needs and working with partners to meet those needs. See Appendix A for the lessons learned document.

The work plan has been revised and agreed upon with the RESP. The next training activity will take place in November. Qualitative research field work in preparation for developing provincial

operational plans, IEC strategies and materials focusing on one or more key behaviors will take place by the end of 1997. See draft revised work plan in Appendix B.

Plans have been made for future training activities and resource needs. McCharen will work on developing the training curriculum for the November workshop, and finalize the design and materials with Kazilimani-Pale when she comes to BASICS/HQ on October 20 for orientation. The dates of November 10-16 were selected for the training to take place in Gaza Province. Dr. Berengere de Negri, senior program officer from AED, will be the IEC trainer for the November 10 TOT/communication skills workshop. Albers and Kazilimani-Pale, along with RESP colleagues, will visit the focus (Gaza) and companion (Nampula) provinces during the week of October 13 to identify priority emphasis behaviors, draft a work plan and conduct a training needs assessment for the upcoming November workshop. Guides for the meetings and training needs assessment were drafted before leaving Mozambique, and are included in Appendices C and D.

DELIVERABLES

- 1) Forum agenda and list of participants: included in Forum Final Report, being completed by RESP, BASICS and GTZ by November 1.
- 2) Lessons learned document on IEC Forum results: Appendix A.
- 3) List of BASICS IEC partners: to be finalized during trip to the focus province during the week of October 13.
- 4) Plan of action for BASICS work in provinces: to be finalized during trip to the focus province during the week of October 13.
- 5) Preliminary list of priority emphasis behaviors: to be discussed during trip to the focus province during the week of October 13 and finalized in the November training session.
- 6) Revised work plan for PY5: Appendix B.
- 7) Trip report: draft.

APPENDIXES

APPENDIX A
National IEC Forum: Lessons Learned

Appendix A

NATIONAL IEC FORUM: LESSONS LEARNED MAPUTO, MOZAMBIQUE

SEPTEMBER 29 - OCTOBER 3, 1997

by Carolien Albers, Esther Kazilimani-Pale, Nancy McCharen

I. Introduction/Background of the Forum

The National IEC Forum was the first BASICS activity in Mozambique, bringing together PVOs, NGOs and Provincial and Central Level Ministry of Health IEC staff. The main objective of the forum was to share information about IEC approaches in Mozambique as well as to showcase materials and techniques used throughout the country. Additionally, the Forum was an opportunity to provide an introduction to the BASICS Project and technical approach to development of IEC for child survival using emphasis behaviors.

BASICS consultant Esther Kazilimani-Pale visited PVOs and the MISAU in Manica, Nampula, Sofala and Zambezia Provinces as well as PVOs and donor organizations in Maputo. Relevant IEC experiences and appropriate participants were identified at this time, and continuous consultation with the MISAU/RESP went into the planning for the Forum.

The GTZ (German Technical Assistance) began a Family Planning/Family Health Project in July of this year, with an objective of developing IEC strategies and building capacity in RESP in addition to improvement of management and rehabilitation of health facilities. Thus the RESP asked GTZ to join with BASICS to extend the forum to 5 days to include participants from all provinces, the first two following the agenda as developed with BASICS with NGOs and DPS and the additional 3 days for planning at Provincial Level with the DPS. USAID, BASICS and GTZ accepted this suggestion and carried out the week long seminar in accordance with MISAU wishes.

54 participants attended the first two days of the forum, including DPS staff from 8 provinces and the City of Maputo and NGO representatives from 6 provinces. The attendance of 54 participants, in spite of enormous difficulties in travel and logistics, testifies to the interest in IEC for health and the desire of organizations to develop effective programs in this area. During the second phase of the Forum, GTZ provided a facilitator to work with DPS and RESP personnel to discuss workplans for 1998. The experiences presented and discussed during the first 2 days, as well as the exchanges between NGOs and MISAU provided a rich base for the planning sessions.

As a first activity within the proposed work plan for BASICS in Mozambique, the Forum provides considerable food for thought for the development of activities during this year. What follows, then, are the lessons learned from the Forum. A summary of Forum participant responses to an evaluation questionnaire is attached.

II. Lessons learned

A. The exchange of experiences was very useful.

There has been little communication between DPS and NGOs, and among NGOs and between provinces. Almost no technical consultation occurs, and DPS have little knowledge of how IEC strategies are developed and carried out by other organizations. All workshop participants appreciated the opportunity to hear in detail how others were doing their work, to be able to ask questions and discuss, to work together in small groups and to see examples of materials developed by other organizations.

B. Importance of NGO/DPS Collaboration and Coordination

A number of examples of collaboration were brought out during the discussions. These consisted mainly in shared resources (especially cars when traveling for supervision), use of pamphlets or posters, working together in some training activities, and making sure that DPS guidelines are followed. Planning and strategy development, research for materials development, harmonizing of messages and materials development were all areas named where little or no collaboration takes place.

C. Materials production

This seems to be an area where technical assistance could be quite useful. In many cases, materials are produced with little or no research of any kind, without pretesting and with very general target audiences in mind (e.g., the community, women in fertile age 15-45). Materials are often the objective without the concept of materials being developed to meet specific needs identified in a strategy. Actual production of materials varies from hand drawn and plastic covered pictures, locally made puppets and dolls, in house computer flyers and pictures to the professionally produced materials used by PSI. PSI conducts both qualitative and quantitative research, identifies appropriate types of materials, segmented audiences and relevant messages, and then contracts with private firms to produce prototypes for pretesting.

D. Community Approaches and Use of Volunteers

Several experiences were presented with varying approaches. The HAI in Manica has organized and trained councils of leaders who work with the DPS to address specific health problems. World Relief in Gaza Province trains volunteers who provide education in "door to door" encounters. World Vision has trained many volunteer health promoters to carry out their programs. For the most part, volunteers' role is to pass on information by giving talks or visiting with mothers, women and their families. These may amount to two to four hours per week. Kulima/ACF in Sofala has developed simple messages that they use in their group talks. These groups are either women at a water source or from a *bairro*. They also use "door to door" visits.

E. IEC Methodology/Planning

There already exists a base of IEC program planning in Mozambique. It is not just posters and pamphlets, and both NGOs and DPSs would like to develop activities which will effectively address health issues. Theater is quite popular, and used by several organizations. Methodology is largely interpersonal communication though some examples of community wide approaches were given. Use of mass media (mainly radio) is restricted, in large part because the infrastructure is inadequate. There is a demand for posters and other visual aids which can be used both with small and large groups for various purposes. These purposes include not only distribution of information (messages), but also as picture codes to provoke discussion, achieve consensus or solve problems or to encourage members of target groups who have already adopted recommended behaviors.

F. Child survival themes

Of the experiences presented, the focus was principally on mothers and health personnel. Messages addressed diarrhea and rehydration, family planning, malaria, nutrition. Though messages were not discussed in detail, the impression seemed to be that a wide variety of sometimes contradictory, scientifically unverified, messages go out to the population. For example, the MISAU policy for rehydration is cereal based oral rehydration solution. Yet various organizations have different messages for oral rehydration.

III. Follow-Up/Next Steps

A. Training in IEC

DPS and NGOs in Mozambique are not starting from zero. A training needs assessment carried out with those participants who will attend the training is essential for the development of the BASICS IEC training activities. The Emphasis Behaviors (already translated into Portuguese) provide an entry point for identifying themes for the training. Investigation in the focus province into the specifics of what IEC strategies exist and what skills need further development, provides the process objectives for the training. Training needs identified during the forum include how to plan an IEC strategy, research for message development, pretesting, monitoring and evaluation of messages. Only World Relief described pretesting of their monitoring and evaluation strategy.

B. Materials copying/collection

At present, it is very difficult for DPS and NGOs to actually obtain copies of materials. Many times, only one example of a particular item exists. A complete list of materials which have been produced needs to be made, and an effort needs to be made to collect an example or copy of each example at national level and in the provinces. Given logistical constraints in Mozambique, this will be no small task. It was suggested that as much as possible, production of materials should be done in country so that the templates are accessible for easy duplication.

C. Forum Report

This report is in process, a joint effort with the RESP, GTZ and BASICS. To reinforce the collaboration already begun, and to refresh the ideas presented at the Forum, this report needs to be distributed in the provinces as soon as possible. It also becomes a mechanism for sharing experiences with colleagues from NGOs and DPS who were not able to attend the Forum. Ideally, this report should be distributed before the next BASICS activity.

D. RESP/BASICS Relationship

BASICS staff will be working with RESP and GTZ to finalize and produce the report from the Forum. Working on a specific task is a good way of developing the relationship; yet much remains to be defined in terms of the work to be done by BASICS staff. A process of working with RESP to determine a detailed implementation plan to operationalize the revised work plan has already begun. Tentative dates and sites for training, individuals identified for training, technical resources required should be identified.

E. Network creation

As BASICS continues IEC training activities, thought needs to be given to how to support continued dialogue and exchange among PVOs, DPS, DDS, RESP. This may initially be something as simple as follow-up mailings of information. Or it may eventually be a newsletter. The important thing is to continue to encourage and foster linkages among all the partners.

F. Emphasis Behaviors

During the initial training needs assessment and development of work plans with the focus provinces, the emphasis behaviors need to be described and explained. During the first visit to the focus province, the priority emphasis behaviors can be selected.

G. Collaboration with GTZ and other PVOs

The Forum was a good beginning. GTZ and Swiss Cooperation are key players in the Ministry of Health. BASICS needs to coordinate not only activities, but also the use of consultants with these other organizations. Otherwise, the differences in styles and advice make it very hard for the MISAU to move forward in any coherent manner. A URC consultant has produced an IEC manual for health posts. The RESP in consultation with several agencies is developing a manual for the training of *activistas* in IEC. BASICS should incorporate these guides as appropriate into training as well as selected tools from the Toolbox and the Emphasis Behaviors. Coordination of IEC strategies with SEATS and Pathfinder should also be explored.

H. Sharing BASICS experiences

A number of BASICS publications and approaches used in other countries may have relevance for the development of IEC in Mozambique. The Emphasis behaviors document has been translated. And the Tool Box is also being translated. The BASICS team in Mozambique can evaluate which materials are the most interesting, and can be translated to be part of the resources BASICS has to offer Mozambique.

IV Conclusion

The National IEC Forum brought together MISAU central and provincial level staff, NGO and PVO Partners, GTZ and BASICS staff in a first meeting to share information about what is the current situation as well as to identify ways to work together in the future, and to anticipate training and materials needs for IEC. Much was learned about the IEC activities on which to build future efforts, and the potential for training to help develop IEC strategies. The next BASICS activity, basic training in communication skills and qualitative research, will continue this process begun in the forum.

Attachment to National IEC Forum: Lessons Learned

PARTICIPANT EVALUATION OF THE NATIONAL IEC FORUM

First Phase September 29-30, 1997

Questionnaires returned: 12 MISAU/RESP; 11 DPS; 13 NGOs; Many responses were very general. Only specific answers are reported here.

1. Which presentation was the most useful for you in your work?

RESPONSE	RESP/ MISAU	DPS	NGO	TOTAL
HAI/Manica DPS, integration of the community in health issues	3	2	1	6
IEC planning, strategy for the production of material, IEC	2	2	3	7
Presentations of experiences	1	3	2	6
Drama PSI	1	-	-	1
Greater collaboration between DPS/NGO in developing IEC plans	1	2	-	3
AMODEFA	-	-	1	1
Group work, participation	-	1	2	3
Exhibition of materials used by other NGO/DPS	-	-	1	1
All	3	-	2	5

2. What was the most useful group work for you?

RESPONSE	RESP/ MISAU	DPS	NGO	TOTAL
Collaboration between DPS and NGOs	3	1	4	8
IEC Strategy components in the experiences presented	5	1	1	7
Lessons learned and thoughts for the future	-	1	3	4
Behaviors in Mozambique	-	-	1	1
Exchange of experiences, participation	4	7	4	15
All	-	-	1	1
Time was too short	-	-	1	1

3. Was there something you learned in the Forum that you intend to integrate into your work?

RESPONSE	RESP/ MISAU	DPS	NGO	TOTAL
Coordination of activities with NGO/DPS, evaluation, joint supervision, integrated work, general planning	5	4	2	11
Coordination and uniformization of messages between NGO and DPS/SESP, development of educational material	-	1	3	4
IEC program planning, strategy development, definition and objectives	3	4	3	10
HAI/creation of community leaders, health promoters in schools	2	2	-	4
A lot of work is already being done in Mozambique	-	1	-	1
Make an action plan taking into account the area	-	1	-	1
Exchange of experiences, strategies and planning in each province, activity	2	-	1	3
It helps to reflect on activities already accomplished	1	-	-	1
Do talks door to door	-	-	1	1
In depth study of negative practices in order to improve strategies	-	-	1	1
Experiences with volunteers	-	-	1	1
Make an assessment before starting activities, pretesting, test material produced together with DPS and other NGOs	-	-	2	2

4. What do you need in order to carry out IEC?

RESPONSE	RESP/ MISAU	DPS	NGO	TOTAL
Materials (ex: posters, pamphlets, booklets, slides, videos, megaphones)	4	4	3	11
Financial means	5	5	-	10
Human resources	1	-	-	1
The noteworthy Manica experience	1	-	-	1
Collaboration in planning and activities, reinforce the ties with DPS/DDS	1	3	4	8
Specific training for staff	2	2	-	4
Plan and objectives	-	1	-	1
Moral support	-	1	-	1
Technical support from NGO	-	3	-	3
Exchange of experiences between provinces	-	1	-	1
Must do a situation assessment in order to then define priorities for implementation of activities	-	1	-	1
An organization with knowledge of IEC, capable of collaborating and carrying out IEC activities	-	1	-	1
Readings on work that has been done	-	-	1	1
Teaching methodology, guide	-	-	1	1
Identify more community needs	-	-	1	1

5. Other comments:

RESPONSE	RESP/ MISA	DPS	NGO	TOT AL
This experience should be completed in the field.	-	-	1	1
Congratulations! I hope that follow-up of this initiative will be possible	-	-	1	1
I found out that many NGOs are working in IEC, only there is no exchange of information.	1	-	-	1

Time was short; rethink time/duration of group work so that everyone participates actively and can reach a consensus	-	1	1	2
I hope to receive the manual in the future	-	-	1	1
I liked meeting new colleagues from other provinces; exchange with other NGOs	-	-	2	2
I would like more forums like this one; periodically; with partners	2	4	1	7
Meetings like this one at regional level	-	1	-	1
The forum was well directed because we reached our objective; good organization	-	1	1	2
Exchange of experiences was useful	-	1	2	3
I would have liked to make copies of some materials; organize a system for distribution of materials.	-	-	1	1
To cover the area of IEC, it would be better to divide discussions into information, education, communication, motivation. This would permit better understanding and discussion by the participants. Also, more time should be given to exchange of experiences, especially when they relate to activities carried out with the community (community organization)	-	-	1	1
Materials should be the same with all NGOs doing the same program in a district.	-	-	1	1
Pedagogic aspect excellent as well as logistics	-	1	-	1
Logistic organization should be improved in the next forum	1	1	-	2
If the MISAU has IEC material, send it to all provinces	-	1	-	1
that the moral, technical and financial support from NGOs materialize for effective implementation of activities.	-	1	-	1
Think through the linkage between NGOs and SESP; This linkage is necessarily administrative, and therein lies the blockage.	1	-	-	1

APPENDIX B
Revised Work Plan/Time Line for PY5

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Appendix B

PROJECT YEAR 5 ACTIVITY TIME LINE

Country/Location: Mozambique
 Program: IEC/MCH
 Country/Program Code: 000 MZ 01
 Program Begin/End Date: October 1, 1996-September 30, 1998
 TIME LINE Begin/End Dates: October 1, 1997-September 30, 1998

Objective 1: Improve the effectiveness of district and community level health information, education and communications (IEC) efforts.

Act #	Activities	Begin/end date	key persons	Expected outputs
1.01	Assessment of IEC needs, existing materials and promising approaches a. Collect existing IEC materials, including flipcharts, counseling aids, audio materials, community training manuals, and other adult educational tools. ---document and catalogue materials and approaches ---analyze targeted behaviors, messages content, channels of communication	Aug-Oct 97	Kazilimani, RESP, McCharen	IEC materials and approaches collected, catalogued, and analyzed in preparation for IEC training curriculum development
	---use information to evaluate existing approaches to adapt IEC training content, and to provide TA to NGOs and DPS	Oct 97	McCharen	

1.02	<p>Adapt/Prepare IEC Training Curriculum and Materials</p> <p>a. Using the HealthCom Tool Box and other existing materials, develop a training curriculum and materials, focusing on emphasis behaviors, community participation and problem solving techniques</p> <p>b. Adaptation and dissemination of successful IEC materials and methods, and incorporation of such into training design.</p>	Oct-Nov 97	<p>Albers, RESP, NGOs, Kazilimani, McCharen</p> <p>Kazilimani</p>	Training curriculum developed, using successful IEC models to the extent possible
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1.03	<p>IEC Training Program for Provincial NGO and MOH personnel</p> <p>a. Basic communications training. Design and conduct 6 days workshop for 30 NGO, DPS, DDS, ICS, RESP participants on basic communications principles including communication for behavior change, selection of key behaviors, and formative research methods. 2 two-week TDYs by IEC Trainer and Qualitative Research Specialists</p> <p>b. Field Work. Using the formative research techniques learned in the first workshop, NGO and DPS staff conduct formative research in their districts. Local qualitative research spec. Will: ---train local research team ---conduct research --- analyze data, prepare report</p> <p>c. Developing behavioral change intervention plans: In a two week workshop, the participants will develop a communications strategy based on field research, including targeting audiences, developing and testing messages, selecting communications media and channels, developing community partnerships, alternative communications channels and methods, considering cost-effectiveness and learning about the process of materials development. 3-wk TDY by IEC Trainer and 2-wk TDY by IEC Technical officer</p>	Nov 97	IEC trainer, qualitative research specialist, Kazilimani Albers	30 participants trained in basic communications for behavior change principles and methods + basic principles of formative research
		Dec 97	Albers, local consultants, Kazilimani, RESP	Formative research conducted.
		Jan 98 Feb 98	Albers, local consultants, IEC Trainer, Kazilimani, McCharen	data analyzed for 7 districts + report Communications/behavioral change operations plans developed in 7 districts

	<p>d. Development and pre-testing of communications aids in one district</p> <p>e. Design and conduct 2 week workshop to finalize materials and training of trainers in interpersonal communications and community participation.</p> <p>---IPC and counseling skills</p> <p>---how to use new teaching aids</p> <p>---how to plan district level training</p> <p>1 three week TDY by IEC Tech officer, in conjunction with activity 2.03(b)</p> <p>LOCAL COSTS FUNDED BY PVOS</p> <p>f. Application of provincial IEC strategies by DPS and NGO personnel</p> <p>---production of materials</p> <p>---train local teams</p> <p>---implement interventions as part of routine service delivery and community outreach</p> <p>LOCAL COSTS FUNDED BY PVOS</p>	<p>Mar 98</p> <p>Apr-May 98</p> <p>May-Aug 98</p>	<p>Albers, local consultant, Kazilimani</p> <p>Albers, local consultants, Kazilimani, McCharen</p> <p>Kazilimani, NGO, DPS</p>	<p>communications aids developed and pre-tested in 1 district</p> <p>Communications materials completed and 30 facilitators trained in IPC, counseling and community participation</p> <p>IEC strategies launched and being implemented in 7 districts in 1 province</p>
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2.02	<p>Develop and test provincial IEC strategy in pilot province</p> <p>a. Provide technical assistance to local NGO/DPS team trained in previous workshop (Act 1.03b) to train local research teams in formative research methods. 1 two-week Ext.TA by qual res spec</p> <p>b. Conduct formative research</p> <p>c. Provide technical assistance to NGO/DPS team, following participation in Activity 1.03c, as well as to the larger provincial IEC Task Force to develop a comprehensive IEC strategy which aims to change 1 or more key behaviors using a variety of communications channels and/or audience. 1 two-week TDY by IEC trainer</p> <p>d. Test methods of IEC strategy in conjunction with activity 1.03d</p>	<p>Dec97-Jan 98</p> <p>Mar-Apr 98</p> <p>Apr 98</p>	<p>Albers, NGOs, DPS, ICS, Kazilimani, Qual Research specialist</p> <p>Albers, NGOs, DPS, ICS, IEC Task Force, IEC trainer Kazilimani</p> <p>Kazilimani, NGOs, DPS, ICS, RESP</p>	<p>Formative research conducted and data analyzed</p> <p>Provincial IEC strategy developed</p> <p>Methods of IEC strategy tested</p>
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2.03	Implementation and evaluation of provincial IEC strategy			
	a. Preparation and reproduction of IEC materials, both print as well as possible radio spots, as well as preparation of training materials, and training of trainers. Note: funding supplemented by local NGOs and other donors	May-Aug 98	Albers,RESP NGOs, DPS, ICS, IEC Task Force, Kazilimani	IEC materials and training curriculum developed; facilitators trained
	b. Official launch of provincial strategy to facilitate support and coordination of provincial resources. PVOs will fund costs of supervisions and monitoring. 1 three-week TDY by IEC Tech Officer in conjunction with activity 1.03(e)	May-June 98	Albers,RESP NGOs, DPS, ICS, IEC task force, Kazilimani, McCharen	IEC strategy launched in province
	c. Evaluate progress of IEC strategy addressing the specific objectives and target audiences defined by the provincial team. ---Evaluation should document the IEC initiative and results, the coordination process and factors that encourage full participation and replication by participating organizations	Aug 98	contract local research firm	Provincial IEC strategy evaluated and analyzed
d. Conduct provincial lessons learned workshop, using results of evaluation-2 week TDY by IEC trainer	Aug 98	IEC trainer Albers,RESP NGOs, DPS, ICS, IEC Task Force, Kazilimani	Workshop conducted and lessons learned analyzed	

Objective 4: Improve treatment of malaria as part of Africa Integrated Malaria Initiative (AIMI) with CDC

Act #	Activities	Begin/end date	key persons	Expected outputs
4.01	Improve treatment seeking behavior for malaria a. Conduct formative research in malaria endemic area in conjunction with DPS and provincial PVOs to determine treatment seeking behaviors. National Level planning meeting October 97 (All costs funded with global AIMI funds)	TBD	Health Alliance Int'l (T)	Malaria treatment seeking behaviors identified
	b. Conduct drug efficacy trials in conjunction with activity (a) (All costs funded by CDC)	TBD	CDC	Results produced

Objective 5: Improve immunizations services and logistics

Act #	Activities	Begin/end date	key persons	Expected outputs
5.01	Improve capacity of MISAU to deliver EPI Services a. Activities and funding to be determined	TBD	TBD	
5.02	Improve planning, implementation and evaluation of National Immunization Days a. Activities and funding to be determined	TBD	TBD	

BASICS/Mozambique Management

Act #	Activities	Begin/end date	key persons	Expected outputs

6.01	Program Manager a. Provide technical, operational and financial oversight to BASICS activities in Mozambique	Sept 97- Sept 98	Albers	Monthly reports
6.02	IEC Technical Advisor a. Provide technical assistance in IEC training, Materials Design and Qualitative Research Methods for BASICS activities at provincial levels	Oct 97- Sept 98	Kazilimani- Pale	PVO and DPS partners identified, Forum designed and conducted, IEC materials gathered for use in Forum, other outputs as in plan
6.03	Maputo Office Costs a. Administrative Assistant/Accountant-to provide administrative and financial support to BASICS program	Oct 97- Sept 98	Manhique	Monthly field accounts
	b. Security guards-to provide 24 hour security to BASICS staff and office	Oct 97- Sept 98	SOS	security provided
	c. Driver/messenger - to provide transportation and messenger/courier services for BASICS program	Oct 97- Sept 98	Imperial Cars	transportation and messenger services provided
	d. Maputo Office costs	Oct 97- Sept 98	Albers	office established and functioning

BASICS/HQ Support

Act #	Activities	Begin/end date	key persons	Expected outputs
7.01	Operations and Technical Support	Oct 97- Sept 98	Cluster	Technical, administrative, logistical, and financial support provided to Mozambique program

7.02	Program Planning, Monitoring and Evaluation a. 1 two-wk TDY by TBN to monitor program activities b. 2-wk TA from BASICS/W on evaluation c. 2 wk TDY by TBN to close out BASICS Office	Oct 97-Sept 98 Feb 98 Oct 97-Sept 98 Aug 98	TBN Ops officer TBN TBN	 trip report Close-out report prepared
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APPENDIX C
Question Guide for Meetings in Focus and Comparison Provinces

Appendix C

QUESTIONS TO ASK NGO'S/DPS DURING VISITS TO GAZA AND NAMPULA

1. Regarding current health education activities:
 - What are health problem areas in the actual program?
 - What are the objectives of the h.e. activities?
 - Target groups?
 - What methods are used?
 - Are any audio-visual aids used? If so, may we see/hear them?
 - How are activities evaluated?
 - What is the community's participation in the activities?
 - What experience have you had with the mass media?
2. Who helps plan h.e. activities? What process is used for planning IEC?
3. Who carries out the activities?
4. What is your plan of activities between now and Sept.98? (All, not just IEC)
5. BASICS with RESP is planning a workshop for November in basic IEC...after this workshop, then field work; then workshop for strategy dev; pretesting then materials dev. Would someone from your organization be available to participate in this sequence of activities? Who would that person be?
6. Explain the Emphasis Behaviors - give list.
 - Which of these behaviors have you been trying to address in your IEC efforts?
 - What would be the one most important behavior for us to work on?
 - After that one, what are the next three behaviors in importance?

APPENDIX D
Participant Training Needs Assessment Questionnaire

Appendix D

PARTICIPANT TRAINING NEEDS ASSESSMENT

(A questionnaire to be completed by each individual attending the workshop - could be done as an interview, or if necessary, during the first session of the training - but ideally, by the participant as early as possible)

Name

Education

Training/workshops, conferences attended on IEC or health education or communication:
describe

Organization

Position

1. Which of the following IEC skills have you actually used in your work:

- health problem analysis to set priorities
- conduct community diagnosis or situation analysis
- community mapping
- conduct focus group discussion
- develop question guide for focus group discussion
- participate in KAP survey
- conduct interviews
- analyze study data, write report
- counseling of mothers
- counseling of patients at the health post/center/hospital
- giving health talks
- leading community meetings
- design a poster, flyer, flipchart
- planned/produced a radio spot
- planned/carried out an education campaign (describe: _____)
- taught a school health class
- facilitated a role play
- facilitated a small group discussion
- used theater group for IEC
- organized/worked with a health committee
- meetings with community leaders
- planned an IEC program
- developed a district/province wide IEC strategy
- evaluation and monitoring of IEC/he activities
- other: please specify

2. In your experience, what is the main objective of health education activities?

3. In your experience, what motivates people to change their behavior?
4. Which IEC skills would you most like to improve?
5. Which target groups are the easiest to reach?
6. Which target groups are the hardest to reach?
7. List the channels of communication that you know.
8. Which channels of communication are available in your area?
9. Which channels of communication are the most effective?
10. What are the problems that people have in planning and carrying out IEC/he in Gaza/Nampula?
11. How can IEC/he activities be evaluated?
12. In your locality, can you give us a general idea of:
 - size of the population
 - infant mortality rate
 - maternal mortality rate
 - rate of vaccination coverage
 - fertility rate
 - migration/employment patterns: do men leave to work so mostly women, children and old people? How can people make money?
 - Availability of/access to : schools (levels), health facilities, shops, bank(means to save), churches, organized groups