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Practical step-by-step guide to setting up and operating programme communication in respect of the Child Survival and Development Revolution, by Colin Fraser.
A Guideline for Planning and Operating Programme Communication

INTRODUCTION

The draft that follows is intended to be a practical step-by-step guide to setting up and operating Programme Communication in respect of Child Survival and Development Revolution. To some extent, it is a synthesis of the Operational Guidelines already before the Workshop participants, but it also takes into account some of the points raised in discussions during the first days: in particular, it attempts to promote an approach that automatically integrates supply/service programming and communication programming - with the cross-feed working to the benefit of both.

It is assumed, of course, that Government staff will also be involved from the start.

We come in on the programming exercise at a moment when top level advocacy has already brought about a decision to work on a CSDR. The continuation of advocacy activities among government echelons by UNICEF staff is, of course, an essential ingredient at all times.

PROGRAMMING AND OPERATIONAL STEPS

1. Using available data, examine the health or child problem that it has been decided to tackle. Determine, insofar as possible, the size of the problem and its prevalence, government past and present policy and action towards resolving it, actual practice in respect of it, et cetera. Set this information in the context of the country: its demographic trends, population split between rural and urban areas, linguistic and ethnic groupings, religious/cultural issues that could affect CSDR, levels of literacy, physical communication facilities, per capita income and general standards of living among the sectors with the highest IMR.

2. Identify the behavioural changes and the supply and service inputs that will be required to help overcome the problem.

3. Assess the government's existing capacity to provide health services in the main areas where the problem is prevalent. Take into account also non-governmental health assistance such as TBAs.
4. Identify the various segments of the population from whom the main action will be required in terms of behavioural change and in ensuring adequate and timely provision of supply and service inputs.

5. Ask the following questions: WHAT are the problems facing each population segment identified in 4? and WHY, at present is the segment NOT taking the action required of it? 1/

6. Specify the population sectors in which attitudinal or knowledge-related problems have been identified. These sectors are target audiences for communication activities. Examine any available data or research findings on these audiences.

7. Make an inventory of communication resources in the country noting their outreach, and the quantity and quality of materials production capacity.

8. Identify individuals, groups or institutions that can help to carry out audience research and evaluation work.

9. Determine what, if any, special orientation-cum-training will be required for those selected for audience research and carry it out.

10. Carry out action research as necessary among the identified target audiences. (The high level audiences, whose commitments to CSDR and whose instructions to government cadres will be essential, will normally be well known to UNICEF staff. Advocacy among these audiences should be an ongoing activity.

11. On the basis of the audiences research findings, and on the communication resources inventory, plan the communication activities. Aim to reach each audience with messages and information tailored to their concerns and needs and in a form, and through channels, that the research has shown to be the most appropriate. The research will also have revealed intermediate audiences through

1/ The problems identified in this way will usually be of a supply/infrastructure nature or of an attitudinal/knowledge nature. The action programme for the supply and service inputs and for the communication inputs should be based on the cluster of problems identified. In this paper, we will only follow the communication activities, though there should continue to be the closest coordination between these and the supply and service inputs.
which the primary audiences can be reached persuasively. These should also become targets for appropriate communication activities.

12. Match the locally available communication resources against the plans drawn up; identify any shortcomings and establish what UNICEF inputs could or should be made to fill the gaps. Juggle 11 and 12 until you have the best likely cost/benefit ratio.

13. Establish a timetable for the communication programme in coordination with those programming supplies and services to ensure a correct mesh at the field level.

14. Go operational. Give attention to pretesting and formative evaluation. Monitoring and formative evaluation findings should be used to fine-tune both the communication and the other aspects of the programme.

15. Carry out summative evaluation after an appropriate time interval as a basis for future CSDR programme planning.

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Colin Fraser
Nairobi. 12 February 1985

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1 The words research and evaluation over-awe too many communicators. They need not. For the sort of action-oriented programmes we are involved in, it is sufficient to do evaluation work with a handful of homogeneous groups from a given target audience; or if a homogeneous group cannot be found, with a few tens of individuals who are reasonably representative of the target audience. Any questionnaires will usually be quite short. The main personal skill required is that of being able to put questions and raise issues in such a way that they elicit information that has not been influenced by the questioner. The continuous feedback of evaluation findings into the communication programme, and its consequent modification if necessary, is a vital tool. So, evaluation should not be thought of, as it too often is, as an external process leading to possible criticisms and sanctions.