



*Photocopy for
Revy Taluhungwa*

WORLD HEALTH ORGANIZATION - ORGANISATION MONDIALE DE LA SANTE
LEAGUE OF RED CROSS SOCIETIES - LIGUE DES SOCIETES DE LA CROIX-ROUGE
UNICEF - URTNA



RED CROSS RADIO PRIZE - PROMOTION OF PRIMARY HEALTH CARE

A F R I C A 1983

First Prize (*) awarded to:

Ms TSENNA MENGISTU
ETHIOPIAN EDUCATIONAL BROADCASTING SERVICE

for the programme:

Primary Health Care - the process of cutting the umbilical cord

1. Script
2. Programme note
3. Animators' Guide
4. Evaluation questionnaire
5. Red Cross animation activities before and after broadcasting

THE ETHIOPIAN EDUCATIONAL BROADCASTING SERVICE
is an autonomous broadcasting centre which gives supportive services to primary schools by means of radio and television instructions. In addition, the centre broadcasts special adult programs to the rural communities focusing on general health education; agriculture and politization in the context of the on-going literacy campaigns.



(*) Second Prize: RADIO ELWA, Monrovia, Liberia
"The medicine for open mole"

Third Prize: RADIO GAMBIA
"The happy Baby Lottery"

TRANSMISSION TIME-TABLE

The first broadcast of this programme was scheduled for the morning transmission of Tuesday, October 26, 1982 (from 7.15 - 7.45), and the repeat for the afternoon transmission of Friday, October 29, 1982 (from 5.00 - 5.30).

Those marked with a Red Cross are the programmes produced by the Ethiopian Red Cross.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
MORNING	Agriculture (Tigrigna)	Health (Amharic) 	Pol. Edu. (Tigrigna)	Health (Tigrigna)	Agriculture (Amharic)	Pol. Ed. (Amharic)
7.10-7.15/7.15-7.45/7.45-7.55						
AFTERNOON	Agriculture (Amharic)	Pol. Edu. (Tigrigna)	Health (Tigrigna)	Pol. Edu. (Amharic)	Health (Amharic) 	Agriculture (Tigrigna)
5.55-5.00/5.00-5.30/5.30-5.40						

1. Each regional transmitter has its own transmission time-table and this one shows that of the "Makale" regional transmitter.
2. The times indicated before and after the actual transmission period are those reserved for the pre-broadcast & post-broadcast activities.



SERIES: Health & Society

PROGRAMME TITLE: Primary Health Care and the process of cutting the umbilical-cord.

WEEK: 3rd week of October, 1982

DURATION:

<u>Amharic</u>	<u>English</u>
29 min. 30 sec.	26 min. 30 sec.

PRODUCER: Tsenna Mengistu

PRESENTERS

	<u>Amharic</u>	<u>English</u>
1. Announcer	Dilnessahu	Dilnessahu
2. Narrator	Asres	Rahel
3. Mid-wife	Tsigie	Adey
4. Father	Damtew	Tsenna
5. Health agent	W/Mariam	Asrat
6. Mother	Rosa	Rosa
7. Villager-crier	Aberra	Aberra

SOUND EFFECTS

1. Baby crying	4. Cows mooing
2. Wood being chopped	5. Cock crowing
3. Dog barbing	6. Bird chirping

MUSIC

Theme music

1. Theme music played *low under voice.*
2. Announcer Health and Society
3. *Up with theme music and then fade under voice.*
4. Announcer Health and Society
5. *Up with theme music and then fade under voice.*
6. Announcer The Ethiopian Education Broadcasting Service presents this programme to you in cooperation with the Ethiopian Red Cross Society.
7. *Up with theme music and then fade under voice.*
8. Announcer Produced by Tsenna Mengistu
9. *Up with theme music and then fade under voice and out.*
10. *Shrilling voice of a new born.*
11. *"Ellilta"(mix with 10)*
12. Narrator

Hallo, listeners!
 I'm sure most of you are familiar with what you just heard. That is how the new-born ones are received and welcomed in many parts of Ethiopia. And that is not without reason. It's often said that reproduction is the only string that ties the past with the present and the present with the future generation. Don't you agree? I hope you do. It is no wonder then that merry-making is common in almost every family when a new baby is born.
 But! Alas!
13. Village-crier

(Shouting loudly! Wo...O...Oy! Wo...O...O...y! Wo...O...y!

Tora-Meda! Tora-Meda! Listen here!
 Listen here! Ato Deneba has lost his child. The funeral is at St. George church in a little while. You, all are asked to attend! and help in the funeral!

14. Narrator

(Sorrowfully)

What a pity! That is the village-crier that announces the death of many, many unfortunate young ones who are taken away every day, every hour and every minute. This is the case in almost all developing countries, and Ethiopia is no exception. A research, conducted recently, shows that out of every 1,000 born about 200 lose their lives before the age of one. Why such a disaster? Why is this common especially in the developing countries? And what should be done to control this situation?

15. Mother

(Painfully in a low voice) Oh! Oh!
I'm dying - please help me - Oh!
When is it going to end?

16. Mid-wife

Very soon Woizero Genet! You're almost through! Be strong! It's coming dear! Be brave.

17. Mother

(Screaming) Oh! No! I'm dying
Mrs Tangut.

18.

Wood being chopped from a distance
(fades in and under voice)

19. Mother

(Screaming) Oh! Go! Please call some
one!... Do something! I'm dying.

20. Mid-wife

Don't worry my dear. I'm here to help you. Everybody's is gone to work. But your husband is outside. He's chopping some wood.

21. Mother

(Screaming) Oh! Please Mrs Tangut
Hold me! Hold me tight! I'm going to die.

22. Mid-wife

Okay! It's a'most over. Just one strong push! Hold your breath and push!

23. Mother

(Strongly breathing) Oh! Lord!

24. Mid-wife

(Excited) Yes! Yes! that's good!
That's my good girl!

25. Shrilling voice of a new born baby
(fades in and under voice)
26. Mid-wife (Shouts happily) "Ellil!" "Ellil!"
There you see! It's over - you've done
it. (Shouts) "Ellil!"
"Ellil!". You've just delivered the
most beautiful baby. (Shouting)
Ellil! Ellil!!
Now, let me cut the umbilical-cord.
27. Mother (With a weak voice) Ah! Ah! please
don't Mrs Tangut. Don't cut it with
that!
28. Mid-wife (Surprised) What do you mean don't cut
it with that!
29. Mother (With a weak voice) We've prepared
another one.
30. Mid-wife (Sarcastically) So! Now you're the
expert-hugh!
31. Father (Coming close and excitedly)
How is she? Mrs Tangut? How is she?
has she delivered?
32. Mid-wife (Relaxed) Yes! my friend! She is fine!
She's just delivered a beautiful baby.
33. Father Oh! Thank God. How is the baby?
34. Mid-wife Baby's fine too. But she's telling me
not use this blade of mine.. This is
what I always use.
35. Father (In a hurry) No! No! Mrs Tangut
Don't use that!
36. Mid-wife (Surprised) No? What then?
37. Father We've prepared the pieces of string
and the blade. We've boiled them al-
ready... Yes, here, they are.
They're clean and ready. Use them.
38. Mid-wife (Surprised) Why? Why are you refusing
mine? I just can't understand.

39. Father *(Rather angrily)* Oh! please Mrs. Tangut! We've had an unforgettable experience with our first child. So we don't want to repeat the same mistake. Please use these!.....Here! We want to be on the safe side.
40. Mid-wife *(Sarcastically)* Ah! you modern youngsters! So you think you know better than me, hugh! Let me tell you something. It's risky to use anything tha has been exposed to fire.
41. Father *(Surprised)* Oh!
42. Mid-wife Yes! It makes the mother and child dislike each other. *(pause)* Yes! What do you, young ones know! You know our times are so wicked that children don't care for their parents as it is - let alone with this added to it.
43. Father *(Father angrily)* Oh! forget all that Mrs. Tangut. I want you to use this blade and these pieces of string. I told you we want to be on the safe side.
44. Mid-wife *(With a tone of resignation)*
Okay! Give me. Why should I care. After all it's your concern not mine.
45. Father That's alright. Here it is. Tie the strings well. Do tie them real tight or else it could bleed. I've heard that could be dangerous.
46. Mid-wide *(Very angrily)* Oh! shut up! will you! What do you think I am an amateur? I've been a mid-wife almost all my life you know or else come and do it yourself.
47. Father Oh! I'm sorry. It's just that I'm worried.
48. Mid-wife I said don't worry. I know what I'm doing.
49. *Baby crying - (fades in and under voice)*

50. Father That is good. So everything is over now.
Are you tired Genet?
51. Mother (Breathing hard and in a weak voice)
Yes I'm.
52. Mid-wife I know the labour has exhausted you.
You can sleep for a while and rest.
53. Mother (With a weak voice) Alright, thank you
very much, Mrs. Tangut.
54. Dog barking from a distance (fades in
and under voice)
55. Mother (In a weak voice) I wonder who's here.
The dog is barking.
56. Mid-wife It must be a visitor, Ato Deribe.
You better go out and see - that dog is
dangerous you know!
57. Father Yes I know. Most probably it may be the
health agent from our Farmers' Association.
I met him this morning and having mentioned
my wife's condition he had promised to come
by and see her.
(Off mike) Any way I'll go and see who
it is.
58. Mid-wife (Sarcastically) So, why did you call
me if you've the so-called health-agent
to help you.
59. Mother (With a weak voice) Please Mrs. Tangut
Don't you get offended. The so called
health agent hasn't been here so long.
It's amazing he's here today. It's
you who took all the trouble with me.
I wanted you to help me. You arrived
on time and now it's all safely finished.
Please don't bother about him. He might
only give us some advice. That's all.
(Sighs) Oh! I think I'm too tired even
to speak.
60. Mid-wife Forget it Genet. I know you're tired.
You just rest now. A new mother needs
all the rest she can get.
61. Mother Alright - What about the baby Mrs. Tangut.

62. Mid-wife *(Laughing)* So now you've forgotten over your pains and worry about your baby -- hugh? I know mothers are all the same. Don't worry about the baby, you just rest.
63. *Baby crying - (fades in and under voice)*
64. Father *(Talking to the health agent and approaching)*
Yes, yes everything is over.
65. Health agent *(Approaching)* Oh! good... good... sorry I didn't come on time.
66. Mid-wife *(Loudly)* Oh! You're here. I see!
67. Father *(Approaching)* Yes it's the health agent I told you about. He's here to check on the health condition of our village.

So Mrs. Tangut meet Ato Tibebe - our health agent.
68. Mid-wife *(Sarcastically)* Oh! I see! Welcome Sir! But it's unfortunate - You arrived a little too late. We've just finished everything.
69. Health agent ... Oh! good! How is she? - the mother?
70. Mid-wife She's fine. She's now resting. She had a rough labour period. She's rather exhausted and I told her to get some rest - And she's now sleeping I guess. Otherwise, She's fine.
71. Health agent And the baby?
72. Mid-wife Baby is fine too. I had thought of putting some dung on his sore belly but I couldn't find anyone to bring me some from outside.
Would you please me Ate Derbe?
73. Health agent *(Interrupting)* No! No! I don't think you should do that madame.
74. Mid-wife Oh! No - why? Just tell me why not?
75. Health agent Well, It's just not good.

76. Mid-wife *(Angrily)* That's what you think -
ugh! Let me tell you - Unless some
dung or butter is put on the area
where the umbilical-cord was cut the
poor baby will suffer from nightmares
and frightful dreams all his life!
77. Health agent No! No! Madame. This is a custom
we've to get rid of. It's harmful
to the baby.
78. Father That is true. I think we've to stop
that Mrs. Tangut. I'm afraid the dung
will cause problems agan - I've has
enough of that.
79. Mid-wife *(Angrily)* Oh! you talk so much about
what has happened to you before -
Tell me what is that really happened.
80. Father Let Genet sleep peacefully. Let's us
not shout here please - I think we will
have to go to the next room and chat
there.
81. Mid-wife I think that is better. You two can go
and sit there. I'll stay here a little
and help the baby to sleep.
82. Father *(Off mike)* OK! Come Tibetu. let's go.
83. *Baby crying (gradually fades out)*
84. Health agent *(Whispering)* Is that the mid-wife in this
village?
85. Father *(Loudly)* Yes, she is called Mrs. Tangut,
she is the mid-wife of this village.
86. Health agent *(Whispering)* Ah! Ah! don't speak so loud
please. I see that the rooms are so
close. She might overhear us
87. Father No problem. She is partially deaf.
She can't hear clearly from a distance.
88. Health agent Aha! But tell me how is she as a mid-
wife. Is she careful?
89. Father *(Hesitating)* Well... they say she used
to be very efficient before. But now,
I guess it's with her age, she's not as

good any more - And as you might have heard the new-born ones are dying like flies these days, and some people blame her for all that.

Well!..... I don't know.

90. Health agent Oh! Oh! I think she heard what we said. The old lady is shouting and coming.
91. Mid-wife *(Interrupting and shouting)*
I heard you! I heard you! You back-biters! hh! That's all nonsense!
92. *(Cows mooing - from a distance)*
(fades in and under voice)
93. Health agent *(Whispering to Derebe)* You see, I told you she could overhear what we say. We should've been careful.
94. Mid-wife *(Still angry)* I heard you! I helped your wife when she was in pain and you call me all these names! I should have known.
95. Father *(Puzzled)* No Mrs Tangut. You must excuse us. We weren't actually insulting you.
96. Mid-wife *(Angrily)* Oh yes ? That's what you think - I heard you calling careless and saying that I caused the deaths of all the children dying these days. God forbid! I've never been so insulted like this before - I've always been helping women in labour and delivery - Oh no! never! never!
(Angrily) Well - You might as well take me to court if you consider me a criminal - Oh! never!
97. Father *(Puzzled)* Mrs Tangut, I've said it so many times. I keep interrupting you saying this and that because of my first experience. Another mid-wife, in the village we lived in before cut our baby's umbilical cord with a dirty blade and he died of infections.
98. Mid-wife Oh!
99. Father Yes, that's what the doctors told us.

100. Health agent So, you see Mrs Tangut. We weren't talking about you. We were discussing another person. Wasn't it so Ato Derbe?
101. Father Yes, that's what I'm saying.
102. Health agent So, do excuse us Mrs. Tangut - It's because, Ato Derbe was was very upset about the first child he lost. And it was all due to lack of care on the part of the mid-wife.
103. Mid-wife *(Regretfully)* Oh! how sad! I got upset and angry because I thought you were saying all that about me. My ears are surely getting weak. I never used to have problems with my ears. But now - Oh! I'm getting old.
104. Father *(Laughing)* Yes. I believe so Mrs Tangut.
105. Health agent Anyway - Do sit down here with us - You see we were talking about how and why Ato Derbe lost his first child.
106. Mid-wife OK! I'll stay here with you. Genet and the baby are still asleep.
107. Health agent Good. So what was the problem with your first child, Ato Derbe?
108. Father *(Sadly)* Oh! that was very very tragic. You see the baby had very high fever, his whole body became stiff, he could not even open his mouth. He just became like a dry piece of wood.
109. Mid-wife *(Sorrowfully)* My goodness!
110. Father We took him to the traditional medicine men. They couldn't help him at all. Finally we took him to the town - to the clinic. But the doctors told us it was too late and there was nothing they could do.
111. Mid-wife Poor thing! - I knew it! Evil spirits! They took him away!
112. Health agent No, I don't believe it was evil spirits Mrs. Tangut.

124. Mid-wife
May be with others, but not with me.
Tangut! None of the children I delivered
have died.
125. Health agent
You see Mrs. Tangut, besides using dirty
blades and strings the tradition of
putting butter, and dung is just as
dangerous. Also if the personal hygiene
of the mid-wife that of the mother is
not satisfactory, if the delivery takes
place in unhygienic surroundings, you
know... dirty floor mats, grass leaves
and so on, and if the new born baby
is covered with dirty pieces of cloth...
all these are just as bad. They all can
cause infection. So, you have to beware
of all these as a mid-wife.
126.
*Bird chirping - from a distance -
(fades in and under voice).*
127. Father
That is true. And may be that is why
babies are dying like flies these
days - Oh! God forbid!
128. Mid-wife
So, from what you're saying we mid-wives
are causing all these deaths - you know
our dirty and rusty blades and dirty
strings - we we're not needed anymore -
hugh?
129. Health agent
No! Not at all. Traditional mid-wives
like you are very badly needed. What
we're saying is that some of the harm-
ful traditional practices that you
follow must be avoided. And in order
to help the traditional mid-wives avoid
their traditional harmful practices a
training programme will start soon.
130. Village crier
*Shouting from a distance
Coming nearer, then fading away)*
Woo-O-O-y! Woo-O-O-y! Woo-O-O-y!
Tora-Meda! Tora-Meda! Listen here!
Listen here! Ato Sebhat Geremew has
lost his child. The funeral is at
St. George's Church. You all are asked
to come out at once.
131. Father
(Shocked) Oh! dear! Did you hear that?

In that case

Ato Santayehu's (*Pause*)

Ato Melake's (*Pause*)

Woizero Kekemua's - all those children must have died because of that? No!No! I don't believe it -

But it must be true! cause Ato Sebhat's child also just died. Oh! My Gracious God - forgive me! I didn't do any of it knowingly. But surely it was all a crime - forgive me Lord! (*Pause*)

I should've known. I should've known. I should've understood when Ato Tibebe and Ato Derbe talked about me this morning!

- They said I'm a criminal. How can it be?

Oh! I'm really confused.

Oh! Lord Please help me I'm a poor woman what can I do now?

And the health agent says they are going to train the mid-wives.

- Will they take me in with the others?

(*Pause*)

- What a day - It's really unbelievable.

144. *Baby crying - from a distance*
(fades in and under voice)
145. Mother *(Surprisedly calling out from a distance)*
Mrs. Tangut! Mrs Tangut! Aren't you alright? It seems you're talking by yourself. Are you alone?
146. Mid-wife *(Waking-up)* Oh! dear! - are you up ?
I'm alright - I'm alright, don't worry.
147. Narrator
Now listeners,
as we have just heard, the traditional mid-wife seems to have been convinced at last.
Why? - Well, I say it was partly due to the bitter experience of the parents of the new baby. They strongly advised the traditional mid-wife to avoid some of the unhealthy traditional practices. As it's often said, a burnt child dreads fire. And truly isn't prior care better than life-long suffering? What do you think? Discuss this question and the others mentioned in the animator guide after the broadcast.

148.

Closing Music (under voice)

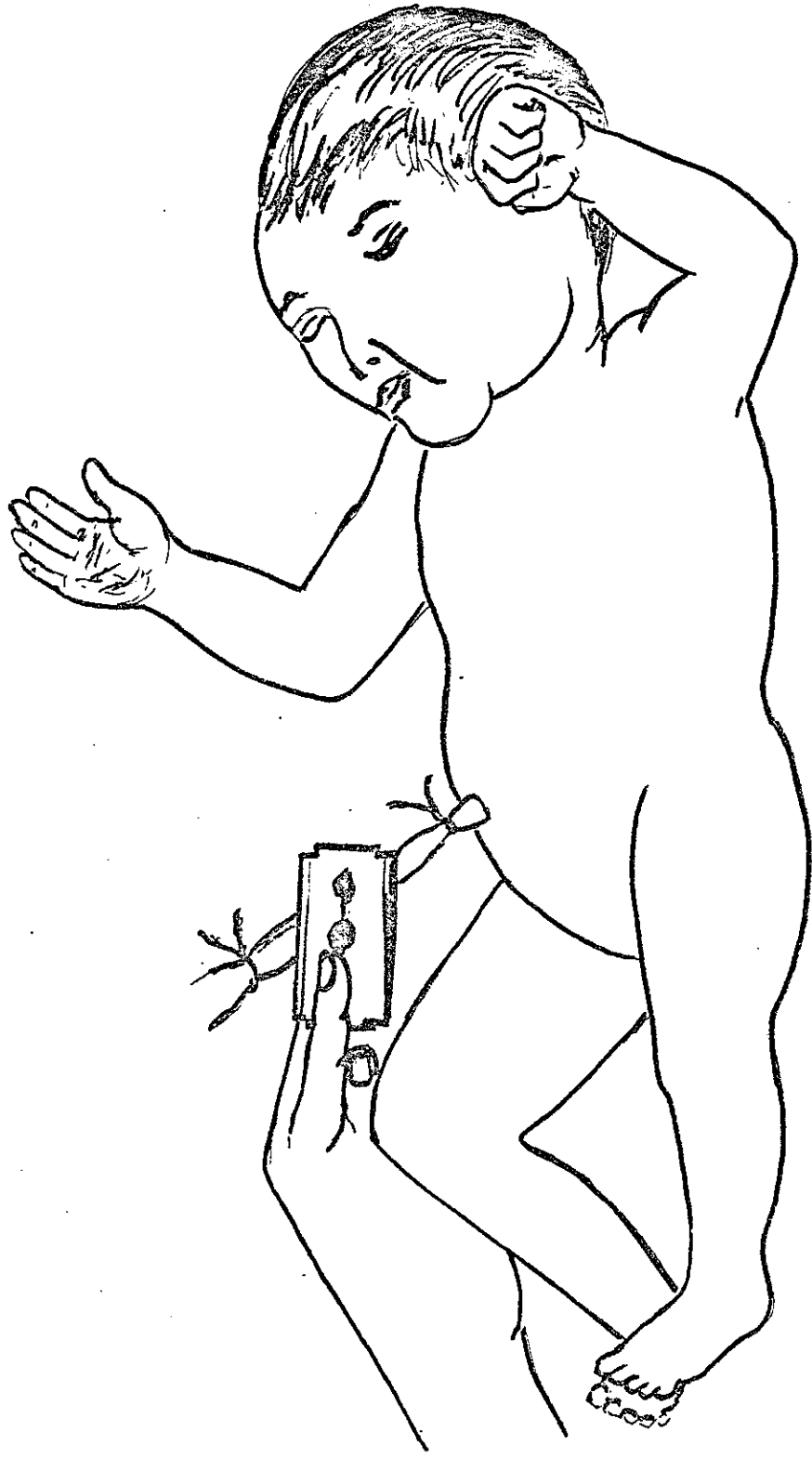
149. Announcer

Our programme for today ends here.
If you've any questions or suggestions
Please write to us.
We would also like to request all centre
animators to fill the evaluation
questionnaires as soon as the broadcast
is over and send them to us immediately.
Join us again next week and till then
goodbye everyone!

150.

Closing Music (Up and then fade out)

Primary Health care...



... & the process of cutting
the umbilical-cord.

PROGRAMME NOTE

The Ethiopian Educational Broadcasting Service, in cooperation with concerned institutions, broadcasts weekly health programmes mainly addressed to the captive audience of the rural vocational training and literacy centre participants. Originally produced in Amharic, the programme is also transmitted into 3 other national languages (Oromogna, Tigregna, Walaitigna) so as to adapt it to the needs of the different regions of diverse socio-cultural complexities.

This version, however, as it is produced in the official language (Amharic) is transmitted twice a week by all the 11 educational transmitters located in the different regions of the country. And this particular programme was one of those prepared by the Ethiopian Red Cross Society and transmitted in the 3rd week of October, 1982.

Synopsis of the programme

The various services rendered by traditional mid-wives are obviously indispensable in the countries like ours where modern medical treatment has not yet reached the majority of the rural population. Nevertheless, owing to different sets of traditional belief, some of their activities particularly those associated with the process of cutting the umbilical cord and the application of things like butter and dung in persistent adherence to tradition and custom, often turn out to be harmful to the new born ones eventually causing tetanus.

Consequently, it has been felt necessary to launch an all out national campaign with a view to introducing the traditional mid-wives to some aspects of modern medical treatment related to their activities when a new born baby is born. And this programme is designed to promote the process of sensitization of the general public towards that end.

Presentation of the programme

- A. The programme opens with a shrilling voice of a new-born baby and "ELILITA" the traditional joyous out-cry usually chanted by women to welcome the new-born baby.
- B. The narration that follows underscores the fact that reproduction is so important since it is the only string that binds the past with the present and the present with the past generation, leading to the conclusion that the act of merry making when a new baby is born is proper and justifiable. Conversely, it points out to the fact that the rate of child mortality in the country is very high due, mainly, to the unhealthy traditional practices carried out by some traditional mid-wives and raises the question as to what should be done to combat this catastrophe.
- C. "Tora Meda" a very small village in the country is the setting and the main body of the programme is based on the dialogue (with a bit of dramatization) between the characters represented by the parents of the new-born baby, the health agent from the "Worda" Farmers' Association and the traditional mid-wife. The issue is the high rate of child mortality in that particular village and the main concern is why so many children die and what should be done to alleviate the problem.

The conflict starts between the traditional mid-wife and the parents of the new-born baby upon the question of how the umbilical cord should be cut. The parents, whose earlier child had died of tetanus, insist that well-cleaned pieces of string and razor be applied while the traditional mid-wife tries to maintain her position arguing that if the umbilical cord of a new-born baby is cut with any thing exposed to fire the child will later hate his/her parents and doesn't take care of them during their old age. The health agent from the "Woreda" farmers' Association, taking the side of the parents, stresses the fact that in order to prevent tetanus all the necessary care should be taken when a baby is born. Supported by the father who recalls his bitter experience in this regard, he systematically tries to convince the traditional mid-wife to give some of the unhealthy practices that could be dangerous to the new-born ones.

Finally, although the traditional mid-wife did seem to maintain her position throughout the conversation, she was later to be regretting all what she did in the past. Apparently she was convinced.

- D. The closing narration appreciates the alertness of the parents of the new-born baby, who having learnt from their bitter past experience, saw to it that all the necessary care was taken for the new born baby, which in turn greatly contributed to the effort made to convince the traditional mid-wife. And in conclusion, it raises the question: Is prevention not better than cure?, and invites the audience particularly the captive audience to discuss this and the other questions mentioned in the animators' guide after the broadcast.

AUDIENCES

This programme is basically designed to stress the importance of primary health care and is mainly addressed to the following 2 sets of captive audiences.

A) Adult Vocational Training Centre Participants

The training programme is carried out in the rural areas and is jointly run by the ministries of health, agriculture, educational and others. It is also supported by radio instructions of several dimensions, and in each case there are well-organized listening centres and centre animators.

The animators' guides are sent in advance to help them acquaint themselves with pre and post programme activities. At the moment there are about 300 listening centres of this type and a total number of about 15,000 participants. The number of centres and participants, is also increasing day by day as maximum effort is still being exerted towards that end.

B) Rural areas

The 2nd groups of our target audience are the 8th round literacy campaign participants about 90% of whom come from rural areas. This is a national-wide programme and high school graduates are sent out as campaigners every years. Adult participants at each centre are to listen to the radio instructions in accordance with the transmission time-table. The campaigners at each centre are supposed to play the role of animators, and at present there are about 1,375,000 participants in this group.

Finally although the programme is primarily geared towards the above mentioned 2 sets of target audiences, nevertheless it is hoped that the generality of the population does benefit from it as the transmission (by all the 11 regional transmitters) covers less than 85% of the country.

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EVALUATION

This programme was transmitted only recently and evaluation results have not been finalized yet. Of course, from the evaluation questionnaires already filled by centre animators and sent back to us (see the sample evaluation questionnaire attached with the animators' guide) it is possible to see that the programme has generally been useful in that it has clearly demonstrated the importance of primary health care. Some government and non-government institutions in charge of the organization of the training programmes for traditional mid-wives have requested that the programme be repeated periodically.

But that is only an indication because of the fact that:

- a) the feedback in its totality is not yet processed by the evaluation office of the broadcasting service
- b) the overall effect of such a programme which is designed to bring about attitudinal change cannot be seen immediately.

ANIMATORS GUIDE

3

SERIES: Health and Society

WEEK: 3rd week of October, 1982

POINTS TO BE RAISED BEFORE THE BROADCAST

A. Title of the Programme:

Primary Health Care and the Process of cutting the umbilical-cord

B. Aims of the Programme:

1. To show the necessity of taking due care when the umbilical-cord is cut in order to avoid the dangers involved.
2. To raise the consciousness of the traditional mid-wives by making them aware of the dangers of some of the unhealthy practices that they carry out when a new baby is born.

C. Synopsis of the Programme:

The various services rendered by traditional mid-wives are obviously indispensable in countries like ours where modern medical treatment has not yet reached the majority of the rural population. Nevertheless owing to different sets of traditional belief, some of their activities particularly those associated with the process of cutting the umbilical-cord, and the application of things like dung or butter in persistent adherence to tradition, often turn out to be harmful eventually causing tetanus on the new-born ones.

Consequently, it has been felt necessary to launch an all-out national campaign with a view to introducing the traditional mid-wives to some aspects of modern medical treatment related to their activities when a new baby is born. And this programme is designed to promote the process of sensitization of the general public towards that end.

BEFORE THE BROADCAST:

- Read out the synopsis to all the participants of the listening centre and explain the message to them more clearly.
- Carefully detach the pictorial aid which is attached at the end of the booklet. Hang it on the wall; show them for some time and fold it again before the broadcast begins.
- Put the radio set in the centre so that everybody can hear without difficulty. (If there are any members who find it difficult to hear from a distance, help them to come nearer and sit at the front).
- Warn all the members of the centre that they are not allowed to talk to one another during the broadcasts, and if they have any questions about the programme tell them that they can ask later i.e after the broadcast.

DURING THE BROADCAST

- Turn on the radio a little before the broadcast begins and check the volume so that all the members can hear without difficulty.
- Make sure that everybody is listening quietly and attentively.

AFTER THE BROADCAST

- Turn off the radio
- Use the pictorial aid again and show them clearly how:

./..

3. Cutting the umbilical-cord with a well-cleaned razor (or with anything exposed to fire) will make the child hate his parents when he (she) grows up.

a. True

b. False

The answer is False.

4. Before the umbilical-cord is cut it must be tightly fastened at two points.

a. True

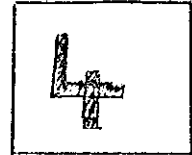
b. False

The answer is True.

B. Questions for further discussions

1. What are the major precautions that are necessary to prevent tetanus?
2. Is there any traditional means of preventing tetanus in your community?
3. What are the measures that should be taken in order to help the traditional mid-wives improve the service they give to the Society?

EVALUATION QUESTIONNAIRE



Name of centre Asebot Adm. Region Hararghe
"Awraja" Asbe Teferi "Woreda" Asebot
Type of prog. Health Week 3rd week of October 1982
Language Amharic No. of listeners 47

Occupation of listeners:

1. Farmers 2. Weavers & tanners 3. House-wives

Date of transmission Tuesday, Oct. 26, 1982

Note the the Animators

- a) Fill this form of questionnaire immediately after the broadcast of the programme.
- b) Although each programme is broadcast twice a week you will fill the questionnaire only once - either after the first broadcast or after the repeat.
- c) Respond to all the items in the questionnaire by putting a tick mark (✓) against the alternatives that you think will answer the questions.
- d) Use the envelope attached herewith and send the questionnaire back to use as soon as it is completed.

./..

1. The aim of the programme was
 - a.) very clear.
 - b.) reasonably clear.
 - c.) not clear.

2. The presenters of the programme were speaking
 - a.) too fast.
 - b.) too slowly.
 - c.) at an average speed.

3. The words and the phrases used in the programme were
 - a.) difficult to understand.
 - b.) easy to understand.

4. Generally the programme was _____ the level of understanding of the rural adult listeners.
 - a.) below
 - b.) above
 - c.) exactly fitting

5. The message of the programme
 - a.) exactly reflects the needs of our community.
 - b.) slightly reflects the needs of our community.
 - c.) does not reflect the needs of our community.

6. a.) There are favourable conditions.
 - b.) There aren't favourable conditions.

7. During the post-broadcast discussion of the questions raised in the animators' guide
 - a.) all members participated.
 - b.) some members participated.
 - c.) none of them participated.

8. Do you think that this programme has been successful in bringing about the desired attitudinal change among the rural areas listeners?

- ✓ a.) yes
 b.) no
 c.) I am not sure.

9. If you have any additional comments or suggestions regarding this particular programme please do write them in the space provide below.

This part of the country is very backward. There are no clinics or hospitals. All the babies are born with the help of traditional mid-wives. Your programme was very useful because it advises the traditional mid-wives to avoid the unhealthy practices and cut the umbilical-cord very carefully. Another harmful tradition in this area is the pratice of keeping a delivering women in a quarantine of a forest for about 15 days. I think it would also be very useful if you can also prepare some other programmes that can help to avoid such harmful traditions.

Thanks for your cooperation

ETHIOPIAN RED CROSS SOCIETY

Some supplementary information regarding Red Cross activities
before and after the radio broadcasts

In addition to the regular activities of the centre animators, the health programme produced by the Ethiopian Red Cross Society is expected to be reinforced by the activities of the Red Cross staff members from the ERCS branch offices located in the different regions of the country.

Priority needs

First of all, the ERCS branch offices, on the basis of their day to day observation, point out priority needs regarding health problems in their respective regions. On the basis of this flow of information the radio programme is centrally produced and subsequently transmitted. Although this is informally done at the moment, studies are being conducted to strengthen this link in the future. The study also envisages the possibility of involving the ERCS branch offices in the evaluation of the radio programme that will be produced by the ERCS.

Evaluation of the radio programmes

When the plan is fully implemented ERCS branch offices will be able to help the regular centre animators in their respective areas devising their own pre-broadcasting activities in addition to those indicated in the animators' guides. Some might use posters, illustrative leaflets, or even relevant films and cassette-recorded material as a means of animation and sensitization.

Pre-broadcast activities

ERCS strengthen links with branch offices

As regards the evaluation of the radio programme, the study indicates that the link that exists between ERCS and its branch offices will further be strengthened. In most cases, unlike the evaluation that is formally conducted by the regular centre animators, this one is expected to be done on an informal basis in order to avoid awareness on the part of the respondents and be able to solicit their natural response.

Feed back

*Developing
more of such
programmes*

*Training
traditional
mid-wives*

*80% of the
evaluation
question-
naires*

*Similar
radio
programmes
on other
unhealthy
traditional
practices*

Been useful

Even at this stage the ERCS branch offices have become useful as a source of feed back. And, regarding this particular programme, for instance, the information that reaches us from the different ERCS branch offices indicate that the programme has been useful as it clearly demonstrates the dangers of the unhealthy traditional practices associated with the process of cutting the umbilical-cord. Some of the suggestions also requires that more of such programmes be developed in a series and others say that this same programme be repeated periodically in order to facilitate the nation-wide programme which is being launched by the Ministry of health to train the traditional mid-wives.

On the other hand, the formal evaluation results that are coming through the evaluation office of the Broadcasting Service reflect more or less the same opinions.

It is reported that about 80% of the evaluation questionnaires have been collected. And, although the information is not yet processed (finalized) one can see that the results seem to be generally encouraging. As a sample representative of the general opinion, the results of a sample evaluation questionnaire (the one from the region of Harraghe) has been included here. So far, the most recurrent suggestion has been the one that demands that similar radio programmes be prepared on the other unhealthy traditional practices such as the act of cutting the uvula, female circumcision, isolation of a delivering woman in a quarantine of a forest, pre-mature marriages etc.. which means that all these vices of tradition are still strongly prevailing in quite a number of our communities.

Thus the feed back both from the formal evaluation office of the Broadcasting Service as well as from the ERCS branch offices has already been useful in that it has helped us take note of such important issues of unhealthy traditional practices as possible areas of future concentration and programme production.

LEAGUE OF RED CROSS SOCIETIES

GENEVA

SPECIAL PRIZE AWARDED TO A NATIONAL RED CROSS OR RED CRESCENT SOCIETY

- A. The League of Red Cross Societies has decided to award a Special Prize to the National Society having given tangible support in rural animation to the
- NATIONAL RADIO SERVICE
- in the context of the Red Cross Radio Prize 1983 for the promotion of community participation in primary health care.
- B. Special attention will be paid to the following criteria:
1. Co-ordination for the Red Cross Radio Prize between the National Society and the Radio Service and the national bodies involved in implementing primary health care or any other health activity with community participation.
 2. Preparation of rural communities for radio health education campaigns (radio, press, National Society, etc.)
 - (a) at national level
 - (b) at regional and local branch levels
 3. Sensitization and animation of the public:
 - (a) before the broadcasts
 - (b) after the broadcasts
 - (c) compilation of listener feedback (by the radio, field agents, Red Cross animators, etc.)
 - (d) have supplementary media (posters, magic lanterns, flannelgraphs, etc.) been used?
- C. This data should reach us by 30 November 1982 at the latest.
- D. The winning National Society will be associated with the official ceremony for the award of the Red Cross Radio Prize 1983 in May 1983.

UNICEF

INTER-OFFICE MEMORANDUM

To: NOTE FOR THE RECORD

Date: 14 October 1983

From: Jeanne Vickers, Chief NGO/DevEd, Geneva

Subject: Presentation of Red Cross Radio Prize 1983

In the absence of Mr. König and Mr. Freiberg, I was asked to represent UNICEF at the Red Cross Radio Prize Ceremony which took place on Saturday, 8 October, at the meeting of the League of Red Cross and Red Crescent Societies. First prize was awarded to Mr. Tsenna Mengistu, of the Educational Radio Service of the Ethiopian Red Cross. Mr. Mengistu's prize-winning programme was entitled "Primary Health Care - the process of cutting the umbilical cord" and a copy of the script, programme note, animator's guide, evaluation questionnaire, and a note on the Red Cross animation activities before and after broadcasting, is being sent with a copy of this note for the record to Mr. Revy Tuluhungwa.

The ceremony opened with a statement by Mr. Enrique de la Mata, President of the League of Red Cross and Red Crescent Societies, which was followed by my statement on behalf of UNICEF (attached) and another by Jack Ling on behalf of the World Health Organization. A statement by the Secretary-General of URTNA (African Radio/TV) was read by Ms. Ingrid Flaks. At the luncheon which followed, duplicates of the prize statuette were presented to UNICEF and WHO, and Mr. Mengistu later visited the UNICEF Office in Geneva where he was interviewed by the Ideas Forum staff. An article will appear in the next issue, and photos have been given to Peter David.

- cc. *Mr. Boubacar Sock, Nairobi
- *Mr. John Williams
- *Mr. Revy Tuluhungwa (+ copy of script)
- *Ms. Sheila Barry
- Mr. Reinhard Freiberg/Ibrahima Fall
- Ms. Marjorie Newman-Black
- Mr. Peter David

*with text of speech

Jeanne Vickers

Date	27 Oct	Red Cross
Attn	W. Young	
Action	Please handle	
	Washburn	
	acc. RT	
		10/14

STATEMENT BY JEANNE VICKERS, REPRESENTATIVE OF UNICEF

RED CROSS RADIO PRIZE TO PROMOTE
PRIMARY HEALTH CARE IN AFRICA

AWARD CEREMONY

Geneva, 8 October, 1983

YOUR EXCELLENCY, AMBASSADOR OF ETHIOPIA

- PRESIDENT OF THE LEAGUE OF RED CROSS SOCIETIES
- REPRESENTATIVE OF THE WORLD HEALTH ORGANIZATION
- SECRETARY-GENERAL OF THE UNION OF NATIONAL RADIO AND TELEVISION
ORGANIZATIONS IN AFRICA
- DIRECTOR OF RADIO SECTION OF THE EUROPEAN BROADCASTING UNION
- DIRECTOR OF RADIO AND TELEVISION FOR THE SUISSE ROMANDE
- REPRESENTATIVES OF NATIONAL SOCIETIES

LADIES AND GENTLEMEN,

IT IS INDEED AN HONOUR FOR UNICEF TO BE ASSOCIATED WITH TODAY'S
CEREMONY IN HONOUR OF MR. TSENNA MENGISTU, THE FIRST PRIZEWINNER OF THE
1983 RED CROSS RADIO PRIZE.

HEALTH FOR ALL BY THE YEAR 2000 THROUGH PRIMARY HEALTH CARE IS
THE GOAL THAT THE WORLD SET ITSELF AT ALMA ATA IN 1978. SINCE THEN
WHO AND UNICEF, IN COLLABORATION WITH NATIONAL GOVERNMENTS AND THE
NON-GOVERNMENTAL SECTOR, HAVE BEEN GRAPPLING WITH THE COMPLEX ISSUES
INVOLVED IN TRYING TO TRANSFORM A GLOBAL OBJECTIVE INTO PRACTICAL
PROGRAMMES.

EXPERIENCE OVER THE YEARS HAS TAUGHT US THAT THESE PROGRAMMES CAN ONLY BE EXPECTED TO ACHIEVE THEIR OBJECTIVES IF THE PEOPLE FOR WHOM THEY ARE INTENDED ARE NOT ONLY ALLOWED, BUT ENABLED, TO PARTICIPATE.

COMMUNITY PARTICIPATION HAS BECOME ONE OF THE CATCH PHRASES OF DEVELOPMENT JARGON, AND ALL TOO OFTEN LIP SERVICE ONLY IS PAID TO THIS PRINCIPLE. IN COMMUNITIES AROUND THE WORLD WHERE, FOR MANY YEARS, THE "TOP DOWN" APPROACH TO DEVELOPMENT HAS PREDOMINATED, PEOPLE HAVE FORGOTTEN HOW TO SHARE WITH GOVERNMENTS THE RESPONSIBILITY FOR MANY OF THE THINGS WHICH AFFECT THE DAILY LIFE OF THEIR COMMUNITIES.

ONE OF THE PRINCIPAL TASKS FACING THOSE WHO WORK IN PRIMARY HEALTH CARE PROGRAMMES IS THE NEED TO FIND WAYS TO REVITALIZE THIS ENORMOUS HUMAN POTENTIAL FOR SELF-RELIANCE, AND EDUCATION BY FORMAL AND NON-FORMAL METHODS IS PERHAPS THE SINGLE MOST EFFECTIVE WAY OF ENGENDERING THE ACTIVE INVOLVEMENT OF THE PEOPLE.

THIS EDUCATION MUST, HOWEVER, BE CULTURALLY APPROPRIATE AND MUST PROVIDE PEOPLE WITH THE KIND OF INFORMATION THEY NEED IN ORDER TO LIVE, NOT AT ODDS, BUT IN HARMONY WITH THEIR ENVIRONMENT. THIS IS THE CHALLENGE OF EDUCATION IN THE PRIMARY HEALTH CARE CONTEXT, -- ONE WHICH MR. MENGISTU HAS TAKEN UP WITH GREAT SUCCESS. HIS RADIO PROGRAMME, BY VIRTUE OF ITS MASS OUTREACH AND CAPACITY TO EFFECTIVELY COMMUNICATE HEALTH EDUCATION MESSAGES, HAS HAD A POSITIVE IMPACT ON THE DAILY LIVES OF THOUSANDS OF ETHIOPIANS.

UNICEF WOULD LIKE TO TAKE THIS OPPORTUNITY TO CONGRATULATE
MR. MENGISTU MOST WARMLY UPON HIS ACHIEVEMENT.

WE SHOULD ALSO LIKE TO PAY TRIBUTE TO THE LEAGUE OF RED CROSS
SOCIETIES FOR THEIR INITIATIVE IN PROMOTING HEALTH EDUCATION AND
STIMULATING PUBLIC PARTICIPATION IN PRIMARY HEALTH CARE IN AFRICA THROUGH
THE ANNUAL RED CROSS RADIO PRIZE.

THANK YOU.

* * * * *

Geneva, 8 October 1983



BUREAU POUR L'EUROPE
FONDS DES NATIONS UNIES POUR L'ENFANCE

UNICEF

OFFICE FOR EUROPE
UNITED NATIONS CHILDREN'S FUND

10 October 1983

Dear Ingrid,

I should just like to thank you very warmly for inviting me to speak at the Red Cross Radio Prize ceremony on Saturday, 8 October, and to lunch afterwards with the prizewinner and with your colleagues at the League. I very much enjoyed meeting and talking with Mr. Tsenna Mengistu, and we shall be interviewing him today for Ideas Forum.

The statuette is very beautiful and much admired by us all. The replica we have will be placed prominently in the office of the Director for UNICEF at Geneva Headquarters. Thank you again for including us in this celebration of an important initiative which has united the League, WHO and UNICEF in the attempt to "spread the message" in Africa.

With best regards,

Sincerely,

Jeanne Vickers
Chief

NGO and Development Education
UNICEF Geneva

Ms. Ingrid Flaks
Information Division
League of Red Cross Societies
Geneva

cc: Mr. John Williams
Mr. Revy Tuluhungwa
Mr. R. Freiberg
Ms. Sheila Barry

PSC SERVICE	
Date	17 Oct 1983
Attended	RT
Time	30/10

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RED CROSS RADIO PRIZE TO PROMOTE
PRIMARY HEALTH CARE IN AFRICA

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THE ANNUAL RED CROSS RADIO PRIZE.

THANK YOU.

Geneva, 8 October 1983



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Page 1
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Login Name Upasana Young



CF-RAI-USAA-PD-GEN-2007-000073

Expanded Number **CF-RAI-USAA-PD-GEN-2007-000073**

External ID

Title

"Primary Health Care - the purpose of cutting the umbilican cord" by Ms. Tsenna Mengistu of the Ethiopian Educational Broadcasting Service. Radio drama.

Date Created / From Date

Date Registered

Date Closed / To Date

01-Jan-1983 at 3:27 PM

14-Aug-2007 at 3:27 PM

Primary Contact

Home Location **CF-RAF-USAA-DB01-2007-09392 (In Container)**

F12: Status Certain? **No**

Itm Fd01: In, Out, Internal Rec or Rec Copy

Owner Location **Programme Division, UNICEF NYHQ (3003)**

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Contained Records

Container **CF/RA/BX/PD/CM/1986/T004: PSC Files - Programme Support Comr**

Date Published

Fd3: Doc Type - Format

Da1:Date First Published

Priority

Record Type **A01 PD-GEN ITEM**

Notes

Radio drama awarded First Prize : Red Cross Radio Prize -- Promotion of Primary Health Care, Africa 1983. Background information including Note for the Record, dd 14 October 1983, and an account of the Award Ceremon: Geneva 8 October 1983 by Jeanne Vickers, Chief, NGO/DevEd, UNICEF Geneva, representing UNICEF.

Print Name of Person Submit Image

Signature of Person Submit

Number of images without cover

JARJIA DUGLAS

Jarjia Douglas

40