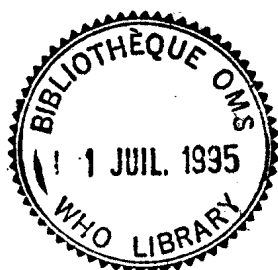


# **a guide to using radio spots in national CDD programmes**

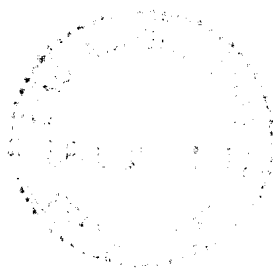
*(adaptable to other health programmes)*



# *radio guide*

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## INTRODUCTION

The main focus of national diarrhoeal disease control (CDD) activities is to assure the correct **treatment** of child diarrhoea. This involves teaching parents how to take care of their children during and after diarrhoea episodes, including when to seek help from health professionals.

Face-to-face communication, such as that between a health worker and a caretaker, is the most effective way to teach parents how to treat their children during diarrhoea episodes. The WHO/CDD document *Advising mothers on management of diarrhoea in the home*<sup>1</sup> teaches health workers the basic skills they need to advise parents how to manage their child's diarrhoea. But the advice given by health workers reaches only those people who come to health facilities, which may be only certain groups: families who live near enough to walk to the facility, or who can afford transport, or who are already convinced that the clinic is the best place to go for help, or those whose child is dangerously ill. In addition, a mother probably comes to the health facility only rarely, and it may be difficult for her to remember all the information learned at each visit.

Radio can complement face-to-face communication in national CDD programmes because it:

- ♦ **Reinforces the advice** that health workers are giving.
- ♦ **Reaches** those people who do not come to health facilities.

It can also:

- ♦ Help the CDD programme to **promote behaviours** that will help prevent diarrhoea.
- ♦ Help **inform people** and **raise awareness** about a new idea, a new product, or a service that is available. ("When your child has diarrhoea, help him to eat and drink so he will stay strong." "ORS (oral rehydration salts) packets are now available free at district health posts.")
- ♦ **Create a demand for services.** ("Ask the doctor for advice on how to encourage your child to eat during diarrhoea." "Ask the nurse how to mix ORS correctly.")
- ♦ **Remind people what they have already learned.** ("Remember to take your child to the clinic if her diarrhoea has blood in it.")
- ♦ **Motivate people**, by presenting information in a compelling or entertaining way.

---

<sup>1</sup>Document CDD/93.1

These possible uses of radio underline the importance of this CDD *Radio guide*. Well-produced and locally-adapted CDD radio spots are appropriate for national communication strategies, and also to promote goals set for "Day of the African Child", National Breastfeeding Week, and the International Children's Day of Broadcasting (ICDB). In fact, the process described in this guide for planning, developing and testing radio spots can be applied to a number of health issues.

Radio is a very important tool for the promotional and educational components of national programmes. In many countries, radio reaches the largest audience of all media, electronic or print. Radio shows and radio spots which are well-targeted, researched, pretested and adequately placed in the broadcast schedule become attractive, competitive and cost-effective ways to communicate new and time-tested advice.

Radio programmes, songs and spots have all been demonstrated to have an important role in supporting CDD and other health programme goals. Many radio formats (spots, drama, interviews, documentaries, quiz shows, interactive audience participation) have been used. Some countries organize listener groups or set up special radio stations for particular health issues.

However, radio has some important limitations that affect how it can be developed and used to support a CDD programme:

- ◆ **Unlike face-to-face communication, radio offers no immediate way to ask people questions about what they know or to check if people have understood what they have heard.**

Think about how you hold a conversation with someone. You will notice that good communication is a **dialogue** during which you listen to the other person's opinion as well as give your own. What you say depends on what the other person is saying. In the same way, radio communication needs to take into account the other person's point of view. Before you can talk to the community by radio, you need first to **listen** to community opinions.

With radio you cannot have the same kind of immediate dialogue as you have when you are talking. To achieve a radio **dialogue** with the community, you will first need to gather information from the community. Before you plan the radio intervention, you will gather information about what people know, believe and do about childhood diarrhoea and use this information to make decisions about how to use radio and what you will ask people to do. Once the radio materials are developed, you will need to pretest and revise them, that is play them for people and make changes based on their reactions. After the radio spots are broadcast, you will once again gather information from the community to find out what they have learned and understood from the spots. Then you make changes to the materials and the broadcast schedule on the basis of what people tell you.



Gathering information periodically and systematically from the community and using that information to guide your decisions will help to create a dialogue with the community. This in turn will make your radio materials more effective.

- ♦ **Listeners cannot ask questions or ask for something to be repeated if they do not understand what you have said the first time.**

For this reason, people need many opportunities to hear and understand the radio materials and to try out what the materials are saying. Radio materials need to be broadcast frequently, over a period of time, on the popular radio station(s) and at the times that people are listening.

There are several types of radio material that you can use to support your national CDD programme (see table on page 5).

To have an impact, longer radio programmes (which are usually broadcast only once) should be broadcast several times. Shorter materials, such as songs and spots, need to be broadcast **several times each day for three to four months** to have an impact.

Broadcasters around the world are seeking an audience. Radio stations often compete with each other to reach the largest audience; thus they need high-quality broadcasts that are interesting and creative. Using this guide, national CDD programmes can help their broadcast partners by providing the necessary information, production support and innovative opportunities for collaboration.

Because radio spots are the simplest type of radio material to develop and produce, this guide focuses on how to plan for, write and produce **radio spots**.

This guide will help CDD programme managers and communication/radio specialists to:

- ♦ **Decide** if radio is a good option for your national CDD programme to invest time and money in, and **if it is**, to
- ♦ **Determine** the best way(s) to use radio in your country,
- ♦ **Plan** a radio intervention using radio spots,
- ♦ **Write, pretest, and produce** two to three radio spots,
- ♦ **Broadcast** the spots several times each day for three to four months,
- ♦ **Monitor and evaluate** the spots in order to decide whether to continue broadcasting them or to make new ones.

Radio is an effective way to give information and help motivate people. However:

Radio alone is not enough to teach new skills, such as mixing ORS or preparing an enriched weaning food. Radio is one channel that should be part of an overall communication plan, integrated with all other CDD programme activities. Radio should only be used to strengthen and support other communication activities such as face-to-face advising, health education talks, or the distribution of printed materials.

### Types of radio materials

| Type      | Length        | Description  | Advantages  | Disadvantages   |
|-----------|---------------|--|---|---|
| Jingle    | 5-10 seconds  | CDD slogan (frequently the reason why people should do what you are asking), usually put to music.   | Repetition. Popular. Easy to remember. If it is catchy, people will start singing it. One-time production costs because it is used many times over a period of several years. | Cannot communicate complex messages or instructions.  |
| Song      | 1-5 minutes   | Message and reason why put to music.   | Attractive and memorable. One-time production costs because it is used many times over a period of several years.   | Usually only a single message. Must be very simple and use a high production quality.   |
| Spot      | 15-60 seconds | One message repeated at least twice, usually accompanied by the jingle or using the music of the jingle to identify it.                          | Frequency of message because spots are broadcast many times over a period of several months. Lower production costs.  | One message. Cannot teach complex skills.   |
| Programme | 5-20 minutes  | Has the same opening and closing for each programme to give it continuity and only the content in the middle varies from programme to programme. | Can discuss behaviours in more detail. Radio can be made more interactive if listeners are encouraged to write letters and participate in contests.                           | Usually only broadcast one time and therefore cannot provide frequency and repetition. More time consuming and costly to produce. |

Note: There are two more radio formats: 1) the radio drama in which a plot develops around a central person or group of people and their relationships, and 2) the magazine format - a radio programme which uses a combination of the above formats and may treat several themes. However, these formats are much more complicated and expensive to produce. You should use these only if a person with a lot of experience is available to produce them.

## HOW TO USE THIS GUIDE

This guide is organized according to six steps in the development and use of effective communication materials, **adapted to apply to radio spots**:

**STEP 1 - INVESTIGATE:** **Gather information** about the status of your CDD programme, and about radio listenership patterns in your country. Using that information, decide whether or not to use radio, whether to use free radio time or purchased (commercial) time, and whether to develop your own spots or to adapt the sample spots included in the Annex to this guide. **Gather information** about what people currently know, believe, and do about their child's diarrhoea, why they do it, what words and phrases they use to talk about it. Use that information to plan (Step 2).

**STEP 2 - PLAN:** **Decide** what CDD problem you will focus on in your radio spots, who is your target audience, what they should do to solve the problem and why, and how many spots you will produce.

**STEP 3 - DEVELOP MATERIALS:** **Write (or adapt) and produce draft radio spots.**

**STEP 4 - PRETEST AND REVISE:** **Pretest your radio spots** to ensure that they are understandable, acceptable, relevant, attractive, and persuasive. **Revise** your spots based on the comments and suggestions made during the pretest.

**STEP 5 - IMPLEMENT:** **Broadcast your radio spots** several times each day on the radio station(s) and at the times when people are listening.

**STEP 6 - MONITOR, EVALUATE, AND REVISE:** **Listen to the radio** to ensure that your materials are being broadcast as scheduled. **Evaluate** to understand what people are learning and doing, and **revise your spots** and broadcast schedule based on their reactions.

This guide should be used with a small team of people. The team members will be one or two staff of the national CDD programme, and the people who will actually write and produce your radio spots. In some countries, these may be staff from the health education unit, at the Ministry of Health. In others, these may be producers from national or local radio station(s). Other local experts - personnel at nongovernmental organizations (NGOs) working in radio promotion, for example - may be invited as appropriate.

Some steps involve only CDD programme staff, some involve only radio staff, and some involve both. At the end of each step there is a worksheet.

Steps 1, 2 and part of 3 are done in a workshop format over two weeks.

CDD staff prepare for one week.

CDD staff and communication/radio specialists work together for one week.

Steps 3 to 6 are done mainly by communication/radio specialists.

They develop and pretest materials over six to 10 weeks, checking periodically with CDD staff.

They broadcast the spots over three to four months and, with CDD staff, monitor and evaluate.

It usually takes about one year to do all six steps.

A more detailed explanation of the process described in this guide, including approximate times, is shown in the following table:

Workshop (steps 1, 2, and part of 3):

| Who   | does what  | how long          |
|---|--|-------------------|
| CDD programme staff                                     | Gather documents;<br>Fill in the Gather Information Form.  | One week          |
| CDD programme staff                                     | Decide whether to use radio, and if so whether to use free or commercial time and whether to write new spots or adapt the sample spots provided in the Annex to this guide;<br>Complete the Step 1 Worksheet.  | Two days          |
| CDD programme staff and communication/radio specialists | CDD programme staff give a technical briefing on CDD to communication/radio specialists with emphasis on case management in the home, review the decisions they made in Step 1, and review the information they have gathered about what people currently know, believe, and do concerning children's diarrhoea. | One day           |
| CDD programme staff and communication/radio specialists | Work together to decide what CDD problem to focus on, who the target audience will be, what this audience will be expected to do to solve the CDD problem and why;<br>Complete the Step 2 Worksheet.   | Two to three days |
| CDD programme staff and communication/radio specialists | Work together to review Step 3 and the sample spots provided in the Annex;<br>Complete the Step 3 Worksheet.   | One day           |

Development, Testing, Production, Implementation, Evaluation (steps 3, 4, 5, and 6)

| Who   | does what  | how long   |
|---|--|--|
| Communication/radio specialists                                 | Write or adapt the draft radio scripts.  | One to two weeks   |
| CDD programme staff   | Select and approve scripts.  | One day  |
| Communication/radio specialists                                 | Produce the spots.   | One to two weeks   |
| CDD staff, communication/radio specialists, and/or researchers  | Pretest and revise your radio spots based on comments and suggestions made during the pretest;<br>Complete the Step 4 Worksheet.   | Four to six weeks  |
| CDD programme staff and communication/radio specialists         | Deliver the spots to the radio station;<br>Conduct a motivational meeting with station staff.  | One day  |
| Radio station staff   | Broadcast your radio spots as planned and at the times when your target audience is listening;<br>Complete the Step 5 Worksheet.   | Three to four months                                       |
| CDD programme staff, communication specialists, and researchers | Monitor the radio spots for a specified period of time;<br>Evaluate and revise the radio spots after a period of time, usually three to four months;<br>Complete the Step 6 Worksheet. | Periodically for three to four months<br>Four to six weeks |





## STEP 1: GATHER INFORMATION AND DECIDE WHETHER AND HOW TO USE RADIO TO SUPPORT YOUR CDD PROGRAMME

(Step 1 Worksheet begins on page 23)

|                            |                        |
|----------------------------|------------------------|
| Who is involved?           | How long does it take? |
| <i>CDD programme staff</i> | <i>One week</i>        |

During this step, CDD programme staff will gather information and use that information to decide whether to:

- Use radio to support your CDD programme or not,
- Use free radio time or purchased (commercial) time, and
- Develop your own spots or adapt the sample spots included in the Annex.

### I. GATHER INFORMATION

You will need the following documents:

#### From the national CDD programme:

- \_\_\_ National CDD programme policy guidelines
- \_\_\_ Household survey results
- \_\_\_ Health facility survey results
- \_\_\_ Programme review reports (focused programme review, comprehensive review, or desk review)
- \_\_\_ Country programme profile
- \_\_\_ KAP (knowledge-attitude-practice) survey results
- \_\_\_ Qualitative research or ethnographic study reports about what people currently know, believe, and do concerning child diarrhoea.

**From national or private radio stations, the health education unit, the Ministry of Information, other programmes which use radio, advertising agencies, and/or NGOs:**

- \_\_\_\_\_ Radio "listenership" surveys
- \_\_\_\_\_ Broadcast schedule(s) (at least for government radio station)
- \_\_\_\_\_ Rate schedules for broadcasting (government and private)
- \_\_\_\_\_ Rate schedules for production (government and private)

*If no recent information on listenership is available, you may consider adding several questions to the next CDD household survey in order to find out how many and which households have radios, who in the family normally listens, and at what time(s) of day they listen.*

**Note:** In some cases, you may want to complete the existing information about what people currently know, believe, and do about child diarrhoea with small focused studies. **This will be important for Step 2.** The following research techniques have been successfully used to complement existing studies and help CDD managers understand the community's point of view:

Focus group discussions

In-depth interviews

Focused observation

Intercept surveys

Definitions of each of these techniques may be found in the glossary. If you do not know how to conduct these types of research, you could request help either from educators and communicators working in other health or development programmes or from private sector advertising or research companies which have this expertise.

**Using all the documents you have gathered, answer the questions on the following pages to organize the information. Then use the information to make the decisions as summarized on the Step 1 Worksheet.**

## GATHER INFORMATION FORM (5 pages)

**1. What is the current status of the national CDD programme concerning case management in the home?**

| Indicator                                     | Target (and date) | Current status | Source (and date) |
|---|-------------------|----------------|-------------------|
| Cases given increased fluids                  |                   |                |                   |
| Cases given continued feeding                 |                   |                |                   |
| Cases continued breastfeeding                 |                   |                |                   |
| Cases given ORS                               |                   |                |                   |
| Knowledge of correct ORS preparation          |                   |                |                   |
| Knowledge of when to seek care (danger signs) |                   |                |                   |
| Knowledge of where to get ORS                 |                   |                |                   |
| Access to ORS                                 |                   |                |                   |

**2. What is the current status of radio in your country?**

| <b>Information needed</b>  | <b>Information available</b> | <b>Source</b> | <b>(Data not available)</b> |
|--|------------------------------|---------------|-----------------------------|
| What proportion of the adult population listens to radio?  |                              |               |                             |
| How many working radios are estimated to be in your country?   |                              |               |                             |
| Are radios more common in urban or rural areas?  |                              |               |                             |
| What parts of the country does the national station reach?   |                              |               |                             |
| What proportion of the country does it reach?  |                              |               |                             |
| Are there local (regional) stations? (where? how many?)  |                              |               |                             |
| Are there private stations? (where? how many?)   |                              |               |                             |
| What languages and dialects are used for broadcasting?   |                              |               |                             |
| Are recording facilities available free or at reduced cost at the health education unit or radio station?  |                              |               |                             |
| How much does it cost to rent studio space and technician time from a Ministry of Health or Ministry of Information facility? From a private facility? |                              |               |                             |
| How much does it cost to "rent" professional voices?   |                              |               |                             |

3. Who listens most?

|                    | Males                           |                               | Females                         |                               |
|--------------------|---------------------------------|-------------------------------|---------------------------------|-------------------------------|
|                    | With children under 5 years old | No children under 5 years old | With children under 5 years old | No children under 5 years old |
| Geographic locale: |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
| Age range:         |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
| Income level:      |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
| Educational level: |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |
|                    |                                 |                               |                                 |                               |

4. Summary table: What times are available free of charge for health broadcasts on the national radio station? What time do people listen? (Use information from the preceding table to fill the last column.)

| Day of week | Hour          | Number of free minutes | In which programme? | Who is listening? |
|-------------|---------------|------------------------|---------------------|-------------------|
|             | 5:00 - 6:00   |                        |                     |                   |
|             | 6:00 - 7:00   |                        |                     |                   |
|             | 7:00 - 8:00   |                        |                     |                   |
|             | 8:00 - 9:00   |                        |                     |                   |
|             | 9:00 - 10:00  |                        |                     |                   |
|             | 10:00 - 11:00 |                        |                     |                   |
|             | 11:00 - 12:00 |                        |                     |                   |
|             | 12:00 - 13:00 |                        |                     |                   |
|             | 13:00 - 14:00 |                        |                     |                   |
|             | 14:00 - 15:00 |                        |                     |                   |
|             | 15:00 - 16:00 |                        |                     |                   |
|             | 16:00 - 17:00 |                        |                     |                   |
|             | 17:00 - 18:00 |                        |                     |                   |
|             | 18:00 - 19:00 |                        |                     |                   |
|             | 19:00 - 20:00 |                        |                     |                   |
|             | 20:00 - 21:00 |                        |                     |                   |
|             | 21:00 - 22:00 |                        |                     |                   |
|             | 22:00 - 23:00 |                        |                     |                   |
|             | 23:00 - 24:00 |                        |                     |                   |

For additional radio stations, use a photocopy of this form.

**5. Who at the radio station, the health education unit, and/or the Ministry of Information decides how this free time is used, and what subjects are put on the air?**

**6. What are the possibilities for changing or adding free time? What is the procedure for doing this?**

## **II. DECIDE WHETHER TO USE RADIO OR NOT**

Refer back to the Gather Information Form when you are making the following decisions.

### **A. Whom can you reach using radio?**

The group of people you select to reach with your radio spots is called your "target audience".

Some possible target audiences are:

Poor urban mothers of children under five

Middle-class urban mothers of children under five

Village mothers of children under five

Rural grandmothers

Rural fathers of children under five

Urban fathers of children under five

**At least 30-40% of your target audience should have access to radio and listen to it.** If no appropriate groups have access to radio or listen to it, you should not use radio to support your CDD programme. If several groups have access to radio and listen to it, Step 2 will help you to select one of these target audiences for your radio spots.

Example: You may have thought of using radio to reach women. This is good if enough women in the areas you want (rural, urban) and in the categories you want (older, younger) listen to radio.

However, you may find that women do not listen much to radio, but that a sizeable proportion of **men** do. In this case you may want to use radio to reach men. Fathers can encourage, support, and praise their wives to do many helpful actions related to child diarrhoea. For example, they can encourage their wives to feed and breastfeed a child during diarrhoea or to help them recognize the danger signs that mean a child needs medical attention. You may wish to persuade men to ask their wives to listen to the radio at certain times, when a programme or spot about diarrhoea will be broadcast.



## **B. How can you fit radio spots into your overall communication plan?**

There are three main points which will help you to include radio in your overall communication strategy:

1. **Define your communication objectives** at the beginning of the strategy. This means defining what behaviour(s) to change or promote, when they will be measured, and how much change is to be expected. For example, "By the end of next year (date), 40% of rural mothers will know to encourage their children to drink more during a diarrhoea episode."
2. **Use a multimedia approach** to meet those objectives. Radio is only one, although a very important one, of many possible means of communication.
3. **Develop radio messages and spots as you develop other communication and programme activities.** Don't develop them later or in isolation from the rest of your programme activities.

When you are developing the communication plan for your national CDD programme, make radio spots work for you to strengthen other communication and programme activities.

| <b>If you do these activities</b>                 | <b>Radio can do this</b>  |
|---|---|
| Face-to-face advising (e.g. in health facilities) | repeat the main points; stimulate mothers to ask questions of the health worker |
| Distribute posters                                | tell people to notice the posters; interpret what the poster says               |
| Traditional theatre presentations                 | encourage people to attend; broadcast the songs from the presentations          |
| Distribute ORS packets                            | tell people where to get them   |
| ORS demonstrations                                | remind people how to mix ORS  |

### III. DECIDE WHETHER TO USE FREE RADIO TIME, OR PURCHASED (COMMERCIAL) TIME

Based on the information you have gathered, you will have two main options: (1) to use production facilities, air time, and announcers/actors that are available for free or (2) to pay for them. To decide this, you will need to know:

#### A. What radio stations does your audience listen to, and at what times?

In the previous section, you decided whom you can reach using radio. In order to plan **how** you will reach these people, you now need to find out what radio stations they listen to and at what times and how the radio system in your country functions.

Knowing how your country's radio system works will be important to help you decide how you will use radio. The presence of local stations (broadcasting in local languages) would enable you to broadcast messages that are specific to a certain area (for example, local foods and fluids). Government stations often provide free air time for health programmes and materials. In some countries, private stations are also required to provide the Ministry of Health free or reduced-rate air time.

Look at the summary table on page 14 and decide:

**Do people listen to the radio at the times when you have access to free time?**

If not:

**How much does the air time you want cost?** (*Can you afford it?*)

Remember that you need to be able to broadcast the radio spots several times each day at the times that your target audience is listening. (Note: Just because a health programme is broadcast at a certain time of day does not guarantee that the right people listen to it.)

The relative advantages and disadvantages of using free air time allocated for health programmes as opposed to using purchased air time are shown in the following table.

**Advantages and *disadvantages*  
of free as opposed to purchased radio time**

| <b>Use of time and facilities<br/>allocated for health programmes</b>   | <b>Use of purchased air time and<br/>facilities</b>                 |
|---|---|
| Costs nothing or very little  | <i>May be very expensive</i>  |
| Donors will pay production costs  | <i>Donors may pay production costs<br/>but not pay air time</i>     |
| Audience is used to hearing health broadcasts<br>at these times         | <i>Audience may not listen to new health-related<br/>broadcasts</i> |
| Available time may be longer  | <i>Available time likely to be short</i>                            |
| <i>May be difficult to control content, form and<br/>quality</i>        | Can control content, form and quality                               |
| <i>Cannot control time of broadcast</i>                                 | Can require particular days and times                               |
| <i>Will compete with other health topics for time<br/>and attention</i> | Will compete with other publicity (other paying<br>customers)       |
| <i>May not be at a popular time (no one listening)</i>                  | Can be scheduled at most popular times                              |

It should be stressed: if free air time is only once per week (example: one hour on Sundays), and you cannot afford to pay for air time, **do not use radio spots**. Use the programme time, and request a small amount of free air time during the week to promote your programme, e.g. "Mothers, remember to listen on Sunday at 12:00 to learn about child care."

**B. How can you pay for it?**

Financial and administrative support and commitment can come from three main sources: the Ministry of Health, the Ministry of Information, and funding agencies. Consider the following when you decide how to use radio to support your CDD programme:

Are there already agreements between ministries (for free or reduced-cost production and broadcasting) that may be helpful to you?

Is there a budget for radio communication at the Ministry of Health?

Is there radio expertise in the health education department?

You can also find out what kind of support is available by examining how other programmes (health, social, agricultural, educational) have used radio. How did they pay for it?

If your programme does not have a sufficient budget for all the necessary activities that radio work requires, you can begin by building on existing resources.

For example:

Human resources (e.g. expertise in design and production): Coordinate with the health education unit or radio station staff to develop and produce your materials.

Financial resources (e.g. to pay for production and broadcast time): Find out what Ministry of Health funding already exists to produce radio materials and how you can use some of those funds.

Information gathering/research: use existing information, conduct only small, focused studies to complete the information you need.

Air time: Find out what other Ministry of Health programmes are using radio and ask them to include your materials in their programmes.

#### **IV. DECIDE WHETHER TO DEVELOP YOUR OWN SPOTS, or ADAPT THE SAMPLE SPOTS INCLUDED IN THE ANNEX**

In certain situations, it is recommended that you develop your own radio spots. To help the communication and radio specialists to do this, there is a section in the Annex of this guide called "How to develop effective new radio spots" (page 75).

You should develop your own spots if your country has a well-developed radio system, and if there are people available with experience in producing creative radio spots for publicity or for promotional purposes. These people might be found within the Ministry of Health education unit, the national or local radio stations, in NGOs or in private sector advertising agencies.

In some countries this expertise is not available, or it is very expensive. In that case, you should adapt the sample spots included in the Annex (from page 81). You may choose to adapt the sample spots the first time you broadcast, and develop your own after you have some experience.

In either case, you will follow Steps 2 to 6.

The following worksheet will help you to decide whether to use radio to support your CDD programme and, if so, how you will use it.

## STEP 1 WORKSHEET: DECIDE WHETHER AND HOW TO USE RADIO

### I. GATHER INFORMATION

Forms are found on pages 13 to 17. Use these forms for the answers to some of the questions on this worksheet.

### II. DECIDE WHETHER TO USE RADIO OR NOT

- A. Whom can you reach using radio? How many people own radios? Who are they? Where do they live?

(Note: Unless a minimum of 30-40% of any target audience has access to radio or listens to it, you should not use radio to support your CDD programme. If there are several groups who listen to radio in your country, in Step 2 you will select one of these target audiences for your radio spots.)

#### Summary

- |  |         |        |
|--|---------|--------|
| 1. Do your national and local stations reach the areas you need to reach?            | ___ yes | ___ no |
| 2. Do the people you want to talk to have access to radio?                           | ___ yes | ___ no |
| 3. Do the national or local radio station(s) broadcast in the appropriate languages? | ___ yes | ___ no |
| 4. Can your CDD programme afford to use radio?                                       | ___ yes | ___ no |
| 5. Is there administrative support and commitment for using radio?                   | ___ yes | ___ no |

If you answered **no** to any of these questions, you probably should **not** use radio at this point in your CDD programme.

**B. How should you fit radio spots fit into your overall communication plan?**

List the communication activities your programme is currently carrying out, and those that are planned. Then list how radio spots can be used to strengthen these activities.

| If you do these activities | Radio can do this |
|----------------------------|-------------------|
|                            |                   |
|                            |                   |
|                            |                   |
|                            |                   |
|                            |                   |

**III. DECIDE WHETHER TO USE FREE RADIO TIME, OR PURCHASED (COMMERCIAL) TIME**

**A. What radio stations do your potential target audiences listen to and at what times during the day?**

**Do these stations provide free time at the hours when these people are listening?**  
(If not, you will need to purchase air time or negotiate with the stations to obtain that time free of charge.)

**B. If you need to purchase air time, how will you pay for it?** (For the monthly cost, multiply the cost of air time for a 30-second or 60-second spot by two spots per day, five days per week, and four weeks per month.)

**What administrative support and commitment is there for using radio?**

**Human resources:**

**Financial resources:**

**Information gathering/research:**

**Air time:**

**IV. DECIDE WHETHER TO DEVELOP YOUR OWN SPOTS or ADAPT THE SAMPLE SPOTS INCLUDED IN THE ANNEX**

- A. Does your country have a well-developed radio system, and are there people with experience in producing creative radio spots for publicity or for promotional purposes? If so, you should develop your own spots. If not, you should adapt the sample spots included in the Annex.**
- B. Who will you work with to develop your spots?**





## STEP 2: PLAN YOUR RADIO INTERVENTION

(Step 2 Worksheet begins on page 35)

| Who is involved?   | How long does it take?    |
|--|---------------------------|
| <i>CDD programme staff<br/>and<br/>communication/radio<br/>specialists</i> | <i>Three to four days</i> |

In this Step the CDD manager and programme staff will meet with the communication/radio specialists whom you have selected to develop your radio spots. You will work together to decide:

- ♦ What CDD problem will you focus on in your radio spots?
- ♦ Who is the target audience for your radio spots?
- ♦ What should these people do to solve the problem and why?
- ♦ How many radio spots will you produce?
- ♦ What is the workplan and time schedule for your radio intervention?

On the first day of the work session:

- ♦ Give the communication/radio specialists a technical briefing on CDD with emphasis on case management in the home. They will need to have a thorough understanding of the technical issues to help you complete this Step.
- ♦ Review and discuss the decisions you made in Step 1.
- ♦ Review the information you have gathered about what people currently know, believe, and do concerning diarrhoea and the words and phrases they use to talk about it. **All of the decisions you will make in Step 2 will be based on this information.** If you have doubts about a decision, look again at the information you have gathered about what people currently know, believe and do.

After you have reviewed this information, work together to take the following decisions.

## **I. WHAT CDD PROBLEM WILL YOU FOCUS ON?**

You should focus on the main home care problem that your CDD programme is facing, and that radio could help to solve. Refer back to the Gather Information Form and to CDD programme indicators, evaluations, and KAP or ethnographic studies. Select **one** important home care behaviour for which the indicators are low, and if possible for which there are some ethnographic data.

**Important:** There are many home care behaviours to be promoted, and related problems to be corrected. However, a few of these stand out as common problems in many countries. These are that caretakers:

- ♦ wait too long before starting any treatment for the child;
- ♦ give the right fluids, but not large enough amounts;
- ♦ offer food, but without actively encouraging the child to eat;
- ♦ do not recognize danger signs that should prompt them to seek medical help;
- ♦ give medicines that have not been prescribed by a health worker (antidiarrhoeals, antibiotics).

One problem will lead to several spots. It is important that you choose only **one problem** to work on for developing your radio intervention.

## **II. WHO IS THE TARGET AUDIENCE FOR YOUR RADIO SPOTS?**

In Step 1, you identified one or more potential target audiences. You now need to select one of them as your target audience. Frequently, people want to develop radio materials for "all parents" or "everybody", because all parents need to know how to take care of their children. However, different target groups have different needs. For example, they may listen to radio at different times. Urban fathers may listen to the radio in the early mornings and evenings before and after work, while urban mothers may listen to the radio during the day.

Your radio materials will be more effective if they are developed for a specific target audience. Therefore, select one target audience for your radio spots.

Most CDD programme managers will want to use radio to talk to mothers because they are the principal caretakers of young children. However, not all mothers are the same: they have different knowledge, beliefs, and practices depending on their age, where they live, how many children they have, their experience, and other influences in their culture. Your radio materials will have more impact if they are developed for a specific group or segment within the wider audience of "mothers". This will help to make your messages more "personal" and help the mothers whom you want to talk to feel that you are talking specifically to them.

You need to select a specific group of mothers which **has the problem and can do something to solve that problem**. Then develop your radio materials specifically for this group. Use the information you have gathered to understand everything you can about your target audience's lives, beliefs, hopes, and problems.

#### Example of a target audience

In country X, the CDD manager decided that feeding during diarrhoea episodes was the most important problem that the programme was facing. An existing KAP study indicated that rural mothers tended to feed their children a liquid diet during diarrhoea episodes, while urban mothers tended to continue feeding solid foods. Rural mothers believed that you need to "rest the child's stomach" during diarrhoea episodes. Most solid foods were considered to be "too heavy" for a child's stomach when he has diarrhoea and could actually make the diarrhoea worse. However, there were some "soft foods" which rural mothers believed that children could eat when they are ill, although they generally did not give them.

Urban mothers, on the other hand, had heard in the clinics that they should continue to give solid foods to their children when they had diarrhoea. They were more likely to give solid foods than rural mothers.

Both urban and rural mothers expressed concern about what to feed their children when they were ill. They recognized that the child "wasted away" and asked the interviewer's advice about what they should do.

The CDD manager decided that his target audience would be rural mothers because he knew that children who are not fed solid foods during diarrhoea episodes are at a higher risk of becoming malnourished. Radio would provide rural mothers with the information that urban mothers were receiving from the clinic. At the same time, the radio messages would reinforce what the urban mothers were hearing. A description of this CDD manager's target audience included their age, education, and socio-demographic information, as well as a description of their beliefs and practices concerning feeding during diarrhoea:

Target audience: Rural mothers (17-40 years old) with children under five years old. These mothers believe that the child needs to "rest his stomach" during diarrhoea episodes. They have not had as much access as urban mothers to the clinic where they would have had the opportunity to hear that they should continue giving solid foods. They feel confused and worried about what is the best way to feed their child when he has diarrhoea. Most of these mothers have extremely limited resources and have only a few years of schooling.

### III. WHAT SHOULD YOUR TARGET AUDIENCE DO TO SOLVE THIS PROBLEM AND WHY SHOULD THEY DO WHAT YOU ARE ASKING?

Once you have decided what the main problem is that you need to solve and who your target audience is, you can decide **what the target audience should do to solve this problem and why they should do what you are asking.**

Think about the following as you make these decisions.

**1. Tell people the specific action that you want them to do.** Often educational radio materials simply raise awareness of the problem without giving concrete solutions. Your radio spots will have more impact if they suggest one simple action which your target audience can carry out.

The following are some examples of what radio spots might ask mothers to do, for selected common problems mentioned in an earlier section. You will notice that each action is very simple and very concrete:

- ♦ Problem: mothers give the right fluids, but not large enough amounts.

Possible action to promote: "Give your child one small glass of rice water every time he has diarrhoea."

- ♦ Problem: mothers offer food, but without actively encouraging the child to eat.

Possible actions to promote: "To encourage your child to eat, sit him on your lap." "Feed your child small portions at least five times a day."

- ♦ Problem: mothers do not know the danger signs that should prompt them to seek medical help.

Possible action to promote: "Take your child to the health centre if he has many watery stools, repeated vomiting, fever, or blood in the stool."

**2. Select an action which is easy, and which is similar to what your target audience is already doing.** People have many responsibilities and most of them do not have a lot of extra time or resources. They will be more likely to try something new if it is easy and similar to what they are already doing.

What you ask your target audience to do will depend on what they **already** do. Build on what people are already doing right.

If you are unsure about which action to choose, you may want to ask a small group of your target audience to try one of them for a week or two and then talk with them about their experience. Only the target audience can tell you which action is easiest for them and why.

3. Tell people why they should do what you suggest. People will only try something new if they believe that the results will be **better for them** than what they are presently doing. They therefore need to understand **why** they should do what you are asking.

However, why **you** think they should do something and why **they** think they should do something could be totally different. For example, you may believe that mothers should feed their children soft foods during diarrhoea episodes because it will increase nutrient absorption; mothers however may believe that they should feed their children soft foods during diarrhoea episodes because the stomach is "weakened" by diarrhoea and other foods will make the diarrhoea worse.

To define the **reason why** your target audience should do what you are asking, look again at the information you have gathered. Do some people already do what you are asking? Why do they do it? (Do they believe that the child will be healthier? That it will save them time in the long run because their child will get well faster? That they feel they are a "better parent" if they spend extra energy feeding their child when he is ill?) To define the reason why, put yourself in the place of your target audience and, using the information you have gathered about what your target audience knows, believes, and does concerning their children's diarrhoea to guide you, answer one of the following questions:

## WHY SHOULD I DO WHAT THE RADIO TELLS ME TO DO?

|  |  |
|--|--|
| <p>If I (insert what you want mothers to do), _____</p> <p>I will feel (examples: happy, loving, calm, assured) _____</p> <p>because _____</p>   | <p>If I <u>mash up foods</u> for my baby to eat when he has diarrhoea,</p> <p>I will feel <u>assured that he will eat more</u>,</p> <p>because <u>soft foods are easier on his tummy</u>.</p>                      |
| <p>If I (insert what you want mothers to do), _____</p> <p>I will have (examples: peace of mind, a healthier baby, more time because my baby will cry less, etc.) _____</p> <p>because _____</p> | <p>If I <u>offer my baby just one more bite</u> to eat after she has finished,</p> <p>I will have <u>a healthier, stronger baby</u></p> <p>because <u>even during diarrhoea my baby needs food to grow on</u>.</p> |
| <p>(Insert what you want mothers to do) _____</p> <p>is good because _____</p>   | <p><u>Helping your baby to eat</u></p> <p>is good because <u>it shows how much you love and care for him</u>.</p>  |

#### IV. HOW MANY SPOTS WILL YOU DEVELOP?

The number of radio spots you develop will depend on the problem that you have chosen to focus on. Each problem may require several actions to solve it. Experience shows that **people remember only one message** in each spot. Thus, ask people to do **one specific action** in each radio spot. If there is more than one action needed to solve the problem, **make several radio spots**.

**Putting only one message in each radio spot** makes it more likely that people will **understand and remember that message**.

The table on the next page shows three examples of a main problem, the actions needed to solve that problem, and how many spots will be needed to promote these actions.

## Examples of deciding how many spots to develop

| Main problem facing the CDD programme  | Target audience  | Action(s) to be taken to solve the problem  | Number of spots (one message per spot) |
|--|--|---|--|
| Parents are not giving increased amounts of fluid as soon as the diarrhoea starts.                                     | Rural mothers of children under five.                  | Give increased amounts of locally available fluid and give fluid as soon as the diarrhoea starts.                         | 2                                      |
| Parents in urban areas give medicines (antidiarrhoeals, antibiotics) that have not been prescribed by a health worker. | Urban mothers of children under five.                  | Give appropriate fluids, and do not give antidiarrhoeals, and give antibiotics only when prescribed by the health worker. | 3                                      |
| Parents of a certain ethnic group give only watery porridges to their children during diarrhoea episodes.              | Mothers in this ethnic group with children under five. | Give solid foods (e.g. banana) along with the porridge.   | 1                                      |



## **STEP 2 WORKSHEET: PLAN YOUR RADIO INTERVENTION**

### **I. WHAT CDD PROBLEM WILL YOU FOCUS ON?**

**A. What is the principal home care related problem that the CDD programme is facing?**

**B. What is the proposed solution to this problem?**

### **II. WHO IS THE TARGET AUDIENCE FOR YOUR RADIO SPOTS?**

**A. Who has this problem?**

**B. What group has access to radio and can do something to solve this problem? This is the target audience of your radio materials. Describe everything you know about them: What is their age, education, and socioeconomic status? What do they currently know, believe, and do about the problem? Why do they do what they are doing? What words and phrases do they use to talk about it?**

**III. WHAT SHOULD THE TARGET AUDIENCE DO TO SOLVE THIS PROBLEM AND WHY SHOULD THEY DO WHAT YOU ARE ASKING?**

**1. What do you want the target audience to do?** (Select an action which is relatively easy and which is similar to what your target audience is already doing.)

**2. Why should your target audience do what you are asking?** Use the form on page 32 to help you determine the reason why.

**IV. HOW MANY RADIO SPOTS WILL YOU DEVELOP?** (Remember, each radio spot should have only one message.)

### STEP 3: DEVELOP MATERIALS - WRITE OR ADAPT THE RADIO SPOTS

(Step 3 Worksheet begins on page 44)

| Who is involved?   | How long does it take?  |
|--|-------------------------|
| <i>CDD programme staff and communication/radio specialist(s) (decide what spots to develop)</i>      | <i>One day</i>          |
| <i>Communication/radio specialists (write/adapt draft spots)</i>                                     | <i>One to two weeks</i> |
| <i>CDD programme staff and communication/radio specialists (meet to select spots for pretesting)</i> | <i>One day</i>          |
| <i>Communication/radio specialists produce/record spots for pretesting</i>                           | <i>One to two weeks</i> |

This step is carried out in four parts, as shown above. First the CDD staff and communication/radio specialist(s) decide what spots will be developed. The communication/radio specialist(s) then write the draft scripts. CDD staff and the communication/radio specialist(s) meet again to select the spots which will be pretested. (The CDD Manager's role is to guide this process and to ensure that the draft spots are technically correct.) Finally, communication/radio specialists record the selected spots for pretesting.

Read the following sections and the sample radio spots provided in the Annex. This will help the CDD staff and the communication/radio specialists agree on what an effective radio spot should sound like.

Then fill out the Step 3 worksheet at the end of the section. The communication/radio specialists will then develop the scripts, whether new or adapted from the samples. Finally, set a time to review draft scripts and to select the spots which will be pretested.

If you have decided to develop new spots, the communication/radio specialists should use the section "How to develop effective new radio spots" in the Annex.

If you have decided to adapt the sample spots, the communication/radio specialists should read "How to adapt sample radio spots" in the Annex, and follow the suggestions included with each sample script.

## **I. WHAT IS AN EFFECTIVE RADIO SPOT?**

The following will help you develop and evaluate effective radio spots.

**1. Tell people what they should do to solve their problem and why.** Make sure that they can really do what you are asking by picking the one practice which is **the least complicated** and the **most similar** to what they are already doing. Tell people **why** they should do what you are asking. People will be more likely to try to do what you are asking if they think it will be better for them than what they are already doing.

**2. State the message at least twice in the spot.** Repeating the message will increase the number of times your target audience can hear it and will also make it more likely that they will remember, understand, and act on it.

**3. Use characters and voices that your target audience trusts to give them information about the health of their child.** People will be more likely to listen to your radio materials and do what you are suggesting if they believe in and trust the people who are talking to them. The person or people who talks in your radio materials is called the "source of information".

The source of information you select will depend on your message and your target audience. It could be a real or fictional person. You could develop a fictional character who represents a trustworthy source of information, such as a "Dr. Healthy", "Mama Knowsbest", or "Nurse Caresalot". You could also use a real person who is well respected by the mothers you want to talk to - a popular actress or other well-known person. The sample spots in the Annex demonstrate how to use different sources of information, depending on the spot's target audience.

**4. Make your radio spots fun to listen to.** Too many radio spots are boring to listen to; they sound like a teacher giving a lecture in a classroom.

## **BAD, BUT TYPICAL RADIO SPOT**

### **MUSIC: (ANYTHING AVAILABLE WHEN THE MESSAGE IS RECORDED)**

**Male**

**announcer 1:** Mothers, it's important to counteract the adverse nutritional effects of diarrhoea. Children should be offered a nutritionally complete diet during diarrhoea episodes. This diet should be formulated to maximize its digestibility and palatability. Optimal feeding will depend on the age of the child and will be determined to some extent by the child's usual feeding practices.

**Male**

**announcer 2:** This message was brought to you by the Ministry of Health.

This "typical" spot would make any target audience feel "lectured to". They would be bored, confused, and possibly offended, and probably would not really listen to the spot again the next time it was broadcast.

Your radio materials should use music, words, and sound effects in a way that makes people want to listen to them. They should create a picture in people's minds. With radio, the listener can travel to new places, meet new people, look at her neighbours in new ways, feel and see things in her imagination that she never thought of before. When you listen to good radio material, you should be able to shut your eyes and "see" who is talking, where they are, and what they are doing.

Another way to make your radio spots fun to listen to is to use unusual types and formats. There are two formats which you will most likely use in your radio spots - the monologue and the dialogue. The following table describes the advantages and disadvantages of each one.

The important thing is to try something different to make your spots fun to listen to - a new song, format, sound effect, jingle, or source of information - something that will make people stop and listen to your radio spot.

## Types of format

| Format    | Description  | Advantages   | Disadvantages   |
|-----------|--|--|---|
| Monologue | <p>The voice of one person. It may be:</p> <ol style="list-style-type: none"> <li>1) informational - a person talks in the third person (e.g. he, she, they) with the purpose of explaining something or giving information. The most common format in most countries for both programmes and spots;</li> <li>2) the testimonial - a real or fictitious person talks in the first person (e.g. I, me) about his or her own experience;</li> <li>3) "character" - a memorable "character", either real or fictitious, who is a credible source of information and spokesperson for the programme messages.</li> </ol> | Simple and less costly to produce than dialogue.   | The informational monologue is monotonous and may sound like all of the other materials on the radio. |
| Dialogue  | <p>Contains voices of two or more people. These voices can be:</p> <ol style="list-style-type: none"> <li>1) real people talking about their own experience (the interview, the round table or panel discussion, and the news story if it includes interviews with other people);</li> <li>2) fictional people discussing the messages in a setting similar to that of the target audience, similar to a radio drama;</li> <li>3) alternating announcers discussing the message. Similar to the informational monologue, but with two voices.</li> </ol>   | Frequently more attractive and interesting than monologue because of the variety of the voices and interchange of different opinions and perspectives. | Can be more complex and costly to produce.  |

**5. Make people feel happy, loving, or confident that they can do what the spots are asking.** One of the best ways to make people want to listen to your radio materials is to make them feel something after they listen - happy, affectionate, energetic, capable of doing what you are asking. People are more likely to do something if they feel good about it. You will notice that all of the sample spots in the Annex make the listener feel happy, loving, or confident.

**6. Use the same words and phrases as your target audience.** People cannot try to do what you are suggesting if they do not understand what you are saying. Do not use technical words in your radio spots. For example, you might want to say "stomach" instead of "digestive system" or "foods which are good for your baby" instead of "nutritious foods".

A radio spot should have the same natural, spontaneous sound of a conversation, sometimes with the imperfections of that conversation. Read your spot **aloud** several times to **really hear** how it will sound over the air.

**7. Show people doing what you are asking and being rewarded or praised for it.** Everyone likes to be praised for what they have done. Radio spots are a powerful way to show people being praised for doing the right action.

**8. Maintain continuity.** Many elements of your radio spots should stay the same over a period of several years. This will help give your radio materials continuity over time. You should establish a special voice, music, sound effect, or jingle to be used in all of your CDD radio materials. When people hear this voice, music, sound effect, or jingle they will recognize it and they will know that this radio material contains important information that will help them take better care of their children. Some examples are:

**Voices:** The "source of information" in your radio materials will be very important because people will be more likely to follow the advice of someone that they trust. Develop a character who is a relevant source of information for your target audience and use that character in all of your spots.

**Music:** Develop an attractive jingle which explains the reason why people should do what you are asking and use it in all of your spots. You could also develop a song using the rhythms and musical groups that your target audience likes best, such as a simple "feeding song" that mothers can sing to their child while helping him to eat. Use this song as the background in all of your spots.

**Sound effect:** You could select a baby or mother laughing, the sound of a baby eating, a call to prayer, a dinner bell, or other appropriate sound effect. Use that sound effect at the beginning and/or ending of each spot.

| How to maintain continuity |  |   |
|----------------------------|--|---|
|                            | Elements which should stay the same over a period of several years | Elements which should change every four to six months |
| Target audience            | X  |   |
| What you want them to do   | X  |   |
| Why they should do it      | X  |   |
| How you say it             |  | X   |
| Song                       | X  |   |
| Jingle                     | X  |   |
| Source of information      | X  |   |

Those elements which will stay the same over a period of several years need to be tested to ensure that they are attractive and persuasive to your target audience. You will need to test 1) the words and phrases you use in your message, 2) the **reason why** people should do what you are asking, 3) the source of information, 4) the format, and 5) the music and sound effects.

How to pretest your radio spots is described in Step 4.

## II. THE LANGUAGE OF RADIO

The language of radio is made up of three elements - voices, sound effects, and music. Put together creatively, they have the potential to create images in your listener's mind and give your radio materials impact.

**Voices** can contribute to the overall sound and meaning of your radio materials far more than the simple significance of the words that they are saying. The speed and intensity with which people talk can create an atmosphere or mood for the spot. The speech patterns of your script, actors, and announcers should also be the same as the geographical, ethnic, and social background of your target audience.

**Sound effects** are considered to be any sound other than voices or music occurring in a radio material. Sound effects may be considered in two categories: natural and artificial. **Natural or realistic sound effects** are effects which are produced at the locale where the radio material is being recorded. **Artificial sound effects** are introduced by the writer of the radio material in order to help create an illusion or picture in the listener's mind. For example, the sound of traffic creates the image of an urban setting; the sound of chickens and cattle, a rural one. The sound of women talking and babies crying could set the scene of a hospital.



The **music** you select also has several very important uses in your radio spots. It can act as a theme song, establish a mood, act as a transition between scenes, or signify the end of a spot, scene, or programme. You should select music which is relevant and attractive to your specific target audience. However, since most radio materials currently broadcast have a "musical bed" under them, using similar music will make your materials sound like all of the others on the air. Select music to create a specific mood or do not use it at all.

Now that you know the various components of an effective radio spot, you will draft, select, and produce spots for pretesting.

The Step 3 Worksheet will help you to develop, i.e. write or adapt, the spots.

The checklist at the end of the Step 3 Worksheet will help you to evaluate the draft radio scripts and to choose the spots to be produced for pretesting.

More information about how to use voices, sound effects, and music is included in the Annex, "How to develop effective new radio spots".

### STEP 3 WORKSHEET: DEVELOP MATERIALS - WRITE OR ADAPT THE RADIO SPOTS

1. **What types of spots will you write or adapt?** Describe the source(s) of information and the format of each spot. Remember, each spot should have only **one message**. Also, you will need two versions of each spot for the pretest. If you have two messages, you will need to select four spots - two versions of each one. Select versions which have different formats and/or sources of information in order to learn in the pretest which one(s) your target audience prefers.

**Message**

**Source of information**

**Format**

2. **What words and phrases of your target audience will you use in your radio spots?**

3. **When will you meet again to review the draft scripts and select the spots for the pretest?**

#### 4. Checklist for selecting radio spot to be pretested

Have someone read the radio script aloud several times; rate it on the following scale. Rate each criterion on a scale of 0 (none or not at all) to 5 (very highly). Select the spot(s) with the highest scores. Rewrite the spot if it does not score more than 40.

- (0-5) \_\_\_\_ 1. It is clear **who the target audience** is for this spot. Who is it? What elements of the spot make it clear that this is the target audience?
- (0-5) \_\_\_\_ 2. The spot asks people to **do** a concrete action. What is it?
- (0-5) \_\_\_\_ 3. The spot tells people the **reason why** they should perform this action.
- (0-5) \_\_\_\_ 4. The spot has **one message**. What is it?
- (0-5) \_\_\_\_ 5. The message is stated at least twice.
- (0-5) \_\_\_\_ 6. The spot is "different" from other materials you hear on the radio right now.
- (0-5) \_\_\_\_ 7. The spot uses sources of information that your target audience trusts to give them information about the health of their children.
- (0-5) \_\_\_\_ 8. The spot makes the listeners feel happy, loving, or confident that they can do what you are asking. How will the spot make your target audience feel?
- (0-5) \_\_\_\_ 9. The spot shows people being rewarded or praised for doing the right action.
- (0-5) \_\_\_\_ 10. The spot uses the phrases and words that your target audience does.
- (0-5) \_\_\_\_ 11. The spot has a jingle, sound effect, or music that you can maintain over time to give continuity to your spots.
- (0-5) \_\_\_\_ 12. The music is relevant to your target audience and is used to create a specific mood.
- Total \_\_\_\_ Does this spot score 40 or more?  
If it scores less than 40, rewrite it.



**STEP 4: PRETEST AND REVISE YOUR RADIO SPOTS**

**(Step 4 Worksheet begins on page 55)**

|   |                          |
|---|--------------------------|
| Who is involved?  | How long does it take?   |
| <i>CDD programme staff, communication/radio specialists, and/or researchers</i> | <i>Four to six weeks</i> |

**I. WHAT IS PRETESTING?**

Pretesting means: systematically gathering the reactions of the target audience to the radio messages and materials before the materials are produced in their final form. This involves playing the spots to 20-40 representatives of your target audience and asking a series of questions which will help you understand what changes you need to make in the spots before they are broadcast.

Pretesting can save you time and money, and it can lower the risk that your spots misdirect your audience. It cannot guarantee success, but it can help reduce some of the uncertainty and risk of producing spots which may be misunderstood or misinterpreted.

Pretesting is designed to provide information on the following "components of effectiveness":

**Acceptability:** Is there anything in the spot that is offensive? Is there anything that people perceive to be false and unrealistic? Is there any element which might become irritating after the spots are broadcast?

**Comprehension:** Do people understand what you are trying to say? Is the spot as clear as it needs to be in order to be understood?

**Personal relevance:** Does your target audience perceive that the spot is talking to them or to "other people"?

**Attraction:** Is the spot interesting enough to attract and hold the attention of your target audience? Do people like it?

**Persuasion:** Does the spot convince the target audience to do what you are asking?

## **II. HOW TO PRETEST: Overview**

1. Produce two versions of a spot with the same message. The versions may have different formats, sources of information, music, and/or sound effects. Pretesting will help you identify strengths and weaknesses of each version and determine which one could be the most effective. Produce the spots as if they were going to be broadcast. For example, use the same sound effects, voices, or music that you would use in the final production.
2. Record the two versions on a cassette.
3. Using a portable tape recorder, play the spots for 25-50 people who are members of your target audience. Play one version of the spot and ask a series questions about the components of effectiveness. Then play the second version of the spot and ask a similar series of questions. Finally, play both versions of the spot and ask the respondent to select which ones she or he likes best and why. This pretest interview can be conducted either individually or in group discussions.

Pretesting, using this method, usually takes about one month to carry out if you have a full-time coordinator. This includes one week to produce the spots and pretest the questionnaire, two weeks to carry out the field work including the training of the interviewers, and one to two weeks to tabulate and analyse the data and write the final report.

### III. ROTATE THE SPOTS DURING THE PRETEST

Experience shows that if people are unsure about which version of a radio spot they like best, they will tend to select the last version that they hear. It is important, therefore, to **rotate** the order in which the spots are played.

To facilitate this process, you need to make two cassettes for each interviewer. On the first cassette, record the spots as follows and mark it "Version A":

Version A (pause three seconds), Version A (pause five seconds)

Version B (pause three seconds), Version B (pause five seconds)

Version A (pause three seconds), Version B.

On the second cassette, record the spots as follows and mark the cassette "Version B".

Version B (pause three seconds), Version B (pause five seconds)

Version A (pause three seconds), Version A (pause five seconds)

Version B (pause three seconds), Version A.

Play the Version A cassette during the first interview, the Version B cassette during the second, the Version A cassette during the third interview, and so forth.

The following describes a typical pretest interview. You can use this as a checklist when you train your interviewers.

1. Put the Version A cassette in the tape recorder.
2. Select a potential respondent, explain the purpose of the study, and solicit the person's collaboration. Once the person agrees to participate, explain that you are going to play two radio messages on the tape recorder and then talk to him about each one.
3. Play Version A twice and ask questions concerning that spot.
4. Play Version B twice and ask questions concerning that spot.
5. Play both versions again and ask which of the two the person prefers and why.

6. Ask any other sociodemographic or programme-related questions. Finally thank the respondent for his cooperation.
7. When you leave the interview, rewind the Version A cassette. Then put the Version B cassette in the tape recorder. You are now ready for your next interview.
8. When you leave the next interview, rewind the Version B cassette. Then put the Version A cassette in the tape recorder. You are now ready for the next interview.
9. Continue alternating versions in the rest of the interviews.

A sample pretest questionnaire is included in the Annex. You will notice that it includes several places to note which version was played first. This helps you remember to rotate your spots during the pretest; as you will see, it also helps when you analyse your pretest results.



#### IV. TABULATE THE PRETEST RESULTS

The following are important considerations for tabulating pretest results.

1. First, tabulate the pretest results for each version of the spot. This can be confusing the first time you do it. Because you are rotating the spots, on some questionnaires Version A will be on the first page, while on others Version B will be on the first page. It helps to unstaple the questionnaires and make three piles. One with Version A, one with Version B, and one with the questions about which version people prefer. You can then quickly tabulate each version. A form for tabulating the results can be found in the Annex.
2. Closed-ended questions (see glossary) are easy to tabulate. However, open-ended questions take a little more time. In this case, you will want to combine **similar responses** so as to have a smaller number of categories for the final analysis. For example, the following are typical responses to the question "What is it that you particularly liked about the radio spot?"

##### Typical responses

- a) The music
- b) The person's voice
- c) I liked everything
- d) The person who talked
- e) The music was lively
- f) It was all good
- g) I don't remember exactly
- h) The song at the beginning
- i) The narrator
- j) The way the person spoke

While these ten responses are worded differently, they can be combined into four categories:

1. The music (includes answers a, e, and h)
2. The narrator (includes answers b,d,i, and j)
3. Everything (includes answers c and f)
4. Don't know (answer g)

You will need to judge whether the respondents meant the same thing even though they used different words.

The open-ended questions concerning comprehension (What does this radio message ask people to do?) are especially important. You will need to decide whether or not the respondent understood what the message was asking him or her to do "correctly" (remembered all of the message), "partially correctly" (remembered part of the message), or "incorrectly" (did not really understand what the message was asking him or her to do at all). You will need to be particularly rigid in your interpretation of this question.

## **V. REVISE THE SPOTS BASED ON THE PRETEST FINDINGS**

At this point you will have a good idea of your findings. Now you need to communicate the results in a manner that is readily understood by the people who will assist you in producing the final spots, and decide how you will revise the spots based on the pretest results. This communication should take two forms: a concise, written report followed by group discussions of the findings based on this report.

### **A. The report**

The written report and conclusions should be based entirely on the tables. They should not reflect personal feelings or biases, but rather the actual responses of your target audience. Once the tables are completed, you should summarize the most important findings and conclusions.

The written report should include the following:

#### **1. Introduction**

- a) Reasons for the pretest;
- b) Number of persons included (and any criteria used in selecting them such as age, sex, etc.);
- c) The message, versions, and format of each spot;
- d) The sites where the pretest was conducted;
- e) Other relevant information, i.e. who conducted the pretest, when did the pretest occur, duration of the pretest.

2. Presentation of the tables and major findings. The description of the tables does not need to be lengthy since many times the tables speak for themselves, but it should point out the most important points. You will probably use terms such as:

"As suggested in Table 4B...."

"As visualized in Table 6..."

"Table 7 demonstrates..."

"....the majority (63%) of the rural mothers said/stated/reported.....; however, it is important to note that 37% did not understand the message....."

### 3. Conclusions and recommendations

Pretesting is only useful if it helps you to make changes in your radio materials based on the reactions of your target audience. You will use your pretest results to decide:

- ♦ Is either version of the spot "good" enough?
- ♦ Which version is potentially most effective?
- ♦ What changes need to be made to improve that version of the spot to make it more acceptable, attractive, understandable, persuasive, or personally relevant.

#### B. Is either version of the spot good enough?

As a general rule, you should discard a radio spot if it scores less than 50% on any of the components of effectiveness.

However, in conducting the pretests you may have found that there is a strong **positive** bias in your results - that most people do not want to mention anything negative. In this case, the very fact that 40% or even 30% gave negative responses signals trouble for the spot. You might then decide that the **acceptable percentage** of positive response should be higher, such as 60% or even 70%.

In some cases, you will need to discard both versions of the spot in favour of a new idea altogether. By the time a spot has reached the production stage, most people will be reluctant to discard their ideas entirely. However, if the pretest results show that both versions score low on several or all of the components of effectiveness, it will be more cost-effective to discard the two versions and begin again, using the lessons learned from the pretest to improve your new scripts.

#### C. Which version of the spot is potentially most effective?

To select the "best" version of the spot, you will need to compare their pretest results. Ideally one version of the spot will score highest on all five components of effectiveness - attraction, comprehension, acceptability, personal relevance, and persuasion. In this case, you would select this version and make revisions as discussed below. More often, however, the results will be "mixed". For example, people may better **understand** one version, but **prefer** the other one. In this case, you can do one of two things:

- ♦ Select the version that people prefer and find more attractive, but use the words and phrases of the version that people understand.
- ♦ Select the version that has the highest **summary score**. You will then need to consider which component(s) of effectiveness scored low on this version and make revisions to make it more acceptable, understandable, personally relevant, attractive, or persuasive.

**D. What changes need to be made to improve the selected version?**

Once you have selected the "best" version, you will need to decide what revisions need to be made to make it more acceptable, attractive, understandable, persuasive, or personally relevant to your target audience. The following are examples of changes made in spots as a result of pretesting.

| Pretest finding   | Change required in the spot   |
|---|---|
| People do not understand certain words in the spot.             | Change vocabulary to use words that they understand and use daily.  |
| People are offended by a word or phrase in the spot.            | Change vocabulary to use an inoffensive word or phrase.   |
| People are confused or irritated by a sound effect in the spot. | Eliminate or change the sound effect.   |
| People feel that the spot is meant for others and not for them. | Review your choice of source of information and vocabulary and make them more appropriate for your target audience. |
| People do not understand what the spot is asking them to do.    | Make the vocabulary simpler and clearer. Repeat the key message within the spot.                                    |
| People only understand or remember part of the message.         | Divide the message in two and make two spots, each with one part.   |

A blank form like the above can be found in the Annex.

The following worksheet will help you to organize your pretest.

## **STEP 4 WORKSHEET: PRETEST AND REVISE YOUR RADIO SPOTS**

- 1. Who is responsible for ensuring that the pretest is carried out in a timely manner?**
- 2. With whom will you pretest your spots? (Who is your "target audience"?)**
- 3. Who will conduct the pretests?**
- 4. Where will the pretests be conducted?**
- 5. When will the pretests be conducted?**
- 6. What messages/spots will you pretest?**
- 7. How many people will you interview for each spot?**

| Activity                                     | Dates | Person responsible |
|--|-------|--------------------|
| Copying of the spots<br>on cassettes         |       |                    |
| Design of the<br>questionnaire               |       |                    |
| Pretesting of<br>the questionnaire           |       |                    |
| Training of<br>interviewers                  |       |                    |
| Field work                                   |       |                    |
| Pretest analysis<br>and report writing       |       |                    |
| Revision and<br>production of<br>final spots |       |                    |

7. What resources do you need for these pretests? Write the amounts beside each one.

| Resource  | Number | Cost per item | Total |
|---|--------|---------------|-------|
| Tape recorders  |        |               |       |
| Clipboards  |        |               |       |
| Pretest questionnaires  |        |               |       |
| Vehicles or other transportation  |        |               |       |
| Extra paper/pencils   |        |               |       |
| Cassettes (Note: You will need two cassettes for each interviewer, one with Version A first and one with Version B first) |        |               |       |
| Supervisor(s)   |        |               |       |
| Interviewer(s)  |        |               |       |
| Daily allowances  |        |               |       |
| Other   |        |               |       |
| Total   |        |               |       |





## STEP 5: IMPLEMENT - BROADCAST YOUR RADIO SPOTS

Step 5 Worksheet begins on page 62

| Who is involved?  | How long does it take?      |
|---|-----------------------------|
| <i>CDD Programme Manager and communication/radio specialist(s)</i> (distribute spots and conduct motivational meeting with radio staff) | <i>One day</i>              |
| <i>Radio station staff</i> (broadcast the spots)  | <i>Three to four months</i> |

Once you have pretested and revised your radio spots, they are ready to be broadcast. In Step 1, you gathered information about what radio stations people listen to and at what time they listen. You will now use the information on the Step 1 Worksheets to help you decide at what times and on which stations to broadcast the radio spots.

Both the CDD Manager and the communication colleague (health educator, radio producer, and/or advertising agency representative) should make the first contact with the selected radio stations. Follow-up contacts can generally be made by the communicator. Here are some important points to remember:

- ♦ Make the radio station staff part of your "CDD team".
- ♦ Many radio personalities are opinion leaders; their support of your messages can also influence your target audience.
- ♦ Station staff can promote your spots and reinforce your messages during their own programmes.
- ♦ News staff can repeat the messages during their newscasts.

Before you begin broadcasting the spots, hold a motivational meeting with the radio station staff to explain the CDD goals and technical content of the radio messages. Explain how important their role is in playing the spots as planned and promoting the messages during their programmes. Present them with CDD promotional and educational materials. You might want to conduct other motivational activities with the station staff periodically while the spots are being broadcast. In some countries, radio stations are also a good place to display and distribute posters and other print materials.

Orienting communication/radio specialists to health-related content is also important for national programmes. Many countries undertake special seminars for writers and producers that help to reach specific health goals. These workshops concentrate on combining health content into creative broadcasts.

For example, in Brazil and Bolivia, agreements have been made with organizations of broadcast professionals to promote good health and children's rights through up-to-date training for producers and directors. These agreements include station promises to set up specific broadcast schedules by day and time for radio spots. In West Africa, a partnership has been set up between UNICEF, the Food and Agriculture Organization (FAO), and a union of rural radio production and broadcast agencies. A training package on new ideas and techniques for radio was developed, and trainers are now working in the entire region.

After you have established a good rapport with the radio station staff, begin your broadcasts.

1. **Broadcast your spots on the radio station(s) and at the times that your target audience listens.** Your radio spots can make an impact only if the people you want to reach actually hear them.
2. **Broadcast your spots enough times for your target audience to hear them, understand them, remember them, and to try what you are suggesting.** Repetition is the key to the effective use of radio. People need to hear **one message many times** before they can understand it, accept it, and try what you are suggesting.

Often, CDD spots are broadcast just a few times. These spots will have little effect on what people know or do. Because spots are so short, they must be repeated more often for people to be able to learn from them. It is the repetition of that single message which will give your radio spots impact.

Generally, to have an impact each radio spot needs to be broadcast **at least twice each day during the hours your target audience is listening for three to four months.** How many times you ask the station to play your spots will depend on how many spots you have produced.

Examples:

Example 1: If you have developed one spot, you should broadcast it **at least twice per day during the hours your target audience is listening.** This will give them an opportunity to hear that spot two times each day.

**Example 2:** If you have developed two spots, you should broadcast each one at least twice per day, for a total of four times each day.

**Example 3:** If you have developed three spots, you should broadcast each one at least twice per day, for a total of six times a day.

**Example 4:** If you have more than one spot and you broadcast only once or twice per day, people will have little chance to hear each spot. This is not enough repetition for your spots to be effective.

If you are broadcasting more than one radio spot, ask the radio station to put them all on one "cartridge" ("cart") or cassette. (Most radio stations use cartridges which automatically rotate the spots). This will ensure that all of the spots are broadcast. If you put each one on an individual cart or cassette, you cannot be assured that all of the spots will be rotated; the announcer may play one spot more than the other(s).

**3. Broadcast your spots when it is important for your target audience to hear them.** If you cannot broadcast your radio spots all year long, broadcast them during the diarrhoea season when the information will be most useful and when people can put your advice into practice immediately. It is better to have your spots repeated **often during the diarrhoea season**, than infrequently throughout the entire year.

In summary, broadcast each radio spot:

- ♦ on the station(s) your target audience listens to;
- ♦ at least two times each day during the hours your target audience is listening; and
- ♦ for three to four months.

The following worksheet will help you to organize your broadcast schedule and activities.

## STEP 5 WORKSHEET: IMPLEMENT - BROADCAST YOUR RADIO SPOTS

1. **During which months will you broadcast your radio spots?** (Remember, if you do not have enough resources to broadcast your spots frequently throughout the year, you should broadcast them frequently during the diarrhoea season months.)

2. **On what radio station(s) and during what hours will you broadcast your radio spots?** (Remember, broadcast your spots only on the station(s) that your target audience listens to and at the times when they listen.) **How many times will your spots be broadcast during those hours?** (Remember, each spot should be broadcast at least twice each day during the hours that your target audience is listening.)

| Name of radio station | Hours to be broadcast | N u m b e r   o f<br>times/spot |
|-----------------------|-----------------------|---------------------------------|
|-----------------------|-----------------------|---------------------------------|

3. **What activities will you carry out to make the radio station staff part of your "CDD team"?**

## STEP 6: MONITOR, EVALUATE, AND REVISE YOUR RADIO SPOTS

(Step 6 Worksheet begins on page 68)

| Who is involved?  | How long does it take?      |
|---|-----------------------------|
| <i>CDD programme staff,<br/>and other monitors<br/>(monitor broadcasting<br/>of spots)</i>      | <i>Three to four months</i> |
| <i>CDD programme staff,<br/>communication/radio<br/>specialists, researchers<br/>(evaluate)</i> | <i>Four to six weeks</i>    |

Once your spots begin to be broadcast, you need to **monitor** them. That is, you must listen to the radio station(s) during the hours your spots are scheduled to be broadcast to ensure that they are being aired as planned. You can then take appropriate actions to improve the broadcast schedule if they are not.

After your spots have been on the air for three to four months, you will need to **evaluate** them to understand what your target audience is learning from them. Depending on what your target audience tells you, you will either continue to broadcast the same spots, or you will need to develop new spots.

### I. MONITOR YOUR RADIO SPOTS

Monitoring will ensure that the spots are being broadcast at the times and as frequently as you have agreed. To monitor your radio spots, have someone listen to the radio station(s) during the hours that you have asked the station(s) to play them. The people who monitor the radio spots could be housewives, primary health care workers, Ministry of Health administrative staff, division of education personnel, or others who have access to radio at the necessary times.

Give each monitor a "monitoring sheet", with a list of times at which your spots should be broadcast. Ask the monitors to check off the number of times they hear your radio spots during those hours.

Once a week, review the monitoring sheets. If your spots are **not** being broadcast as scheduled, you should talk with the radio station manager to find out why and to decide what can be done to ensure that they are. If your spots **are** being broadcast as scheduled, periodically write a letter to the station manager and staff thanking them and informing them of the impact of their work. This will motivate them to continue to promote your messages.

The following is a sample "monitoring sheet".

## CDD RADIO SPOT MONITORING SHEET

**Name of monitor:** \_\_\_\_\_

Radio station monitored: \_\_\_\_\_

**Hours listened:** \_\_\_\_\_

Date  
listened**Time aired**

## Radio spot

1

2

3

4

## **II. EVALUATE AND REVISE YOUR RADIO SPOTS**

After a period of time, usually three to four months, you will want to find out whether your target audience has heard the spots and what they have learned from them. This information will help you to decide whether to continue to broadcast the same spots or whether to make new ones with different messages. Your evaluation will ask three basic questions:

- ♦ Has your target audience **heard** your radio spots? On which radio station(s) did they hear them?
- ♦ What have they **learned** from the spots? What do they remember from what they have heard?
- ♦ Is your target audience **doing** what you have suggested? Why (or why not)?

The simplest and least expensive way to gather this information is to add questions on to KAP studies and household surveys that the Ministry of Health and/or other public or private sector institutions are already conducting. However, these studies take time to analyse and the information may not be available to you when you need it.

Focused small-sample studies with 30-50 people are another way to evaluate the impact of your radio spots. These can be designed, conducted, and analysed in four to six weeks. They can be conducted house to house or as intercept studies. In a central intercept survey, you would interview people in locations where your target audience gathers. For example, if your target audience comprises rural mothers, you could conduct your central intercept survey in clinics, marketplaces, or places where women gather to wash clothes. If your target audience is urban men, you could conduct your central intercept survey outside of factories or other work places, outside the place of worship, or in cafés. Your questionnaire should be very short so that the interview does not take long.

Whether you add questions to a KAP or other survey or conduct a focused small-sample survey, the following are the questions you would want to ask:

- ♦ Do you have a working radio in your home? If not, do you listen to the radio anywhere else?
- ♦ What time of day do you listen to the radio? What radio station(s) do you listen to most?
- ♦ Have you heard any health messages on the radio? What have you heard? What did the message say? What did the message tell you to do?
- ♦ What radio station(s) did you hear the messages on?
- ♦ Who was talking in the messages?
- ♦ Do you think people could follow the advice of the messages? Why (or why not)?
- ♦ Were you able to follow the advice? Why (or why not)?
- ♦ Can you complete this phrase? (Read part of the jingle or song.)

The information that you gather will help you to understand what changes you need to make in your materials, messages, and broadcast schedule. The following table shows examples of the types of decisions you might make based on the evaluation findings

The Step 6 Worksheet will help you to organize your monitoring and evaluation activities.



| Research finding   | Changes to be made  |
|--|---|
| Your target audience has not heard the spots because they are not listening to the radio at the time the spots are being played.       | Change the hour the spots are played to times that your audience is listening.  |
| Your target audience say they have heard "something about health on the radio", but they do not remember exactly what they have heard. | Continue playing the same spots. If possible, increase the frequency at which they are broadcast.   |
| Your target audience has heard the spots on one radio station, but not on any other.   | Review your information about the times and stations that your target audience listen to.<br><br>If they are listening to that station at other times, reschedule the spots at the times that your target audience is listening. If they are not listening to that radio station, do not continue to broadcast the spots on that station. |
| Your target audience remembers one of your spot messages.  | Increase the frequency of the spot that your target audience does not remember. Continue to play the spot that people remember, but not as frequently.<br><br>Develop a new (more attractive) spot about the message that people do not remember.   |
| Your target audience has misunderstood the spot message.   | Develop a new spot or spots to make the message clearer. Pretest the spot to ensure that the spot is understandable to your target audience.  |
| Some members of your target audience have tried what you suggested and like it.  | Develop a new spot or spots to feature testimonials from these people.  |
| Some members of your target audience have tried what you suggested and have problems or questions.                                     | Develop a new spot or spots to promote solutions to the problems or to answer their questions.  |
| Most of your target audience has tried what you suggested and like it.   | Develop a new spot or spots to reinforce what people are doing correctly. Change what you say to another priority CDD problem.  |

## **STEP 6 WORKSHEET: MONITOR, EVALUATE, AND REVISE YOUR RADIO SPOTS**

### **I. MONITORING**

- 1. Who will monitor your radio spots?**
  
  
  
  
  
  
  
  
  
  
- 2. On what days of the week will he or she monitor?**
  
  
  
  
  
  
  
  
  
  
- 3. What will you do if the station is playing the spots as scheduled?**
  
  
  
  
  
  
  
  
  
  
- 4. What will you do if the station is not playing the spots as scheduled?**

### **II. EVALUATION**

- 1. How will you evaluate your radio spots?**  
  
\_\_\_ Add questions on to a KAP or other study.  
  
\_\_\_ Do a focused, small-sample household survey.  
  
\_\_\_ Do a focused, small-sample central intercept study.
  
- 2. Who will you interview? (Who is your target audience?)**

3. **How many people will you interview?**
4. **Who will conduct the interviews?**
5. **Where will the evaluation be conducted?**
6. **How will the evaluation be conducted?**
7. **When will the evaluation be conducted? Who is responsible for carrying out each step in a timely way?**

| Activity                        | Dates | Person responsible |
|---------------------------------|-------|--------------------|
| Design of the questionnaire     |       |                    |
| Pretesting of the questionnaire |       |                    |
| Training of interviewers        |       |                    |
| Field work                      |       |                    |
| Analysis and report writing     |       |                    |

8. What resources do you need for the evaluation? Write the amounts beside each one.

| Resource                         | Number | Cost per item | Total |
|----------------------------------|--------|---------------|-------|
| Clipboards                       |        |               |       |
| Survey questionnaires            |        |               |       |
| Vehicles or other transportation |        |               |       |
| Extra paper/pencils              |        |               |       |
| Supervisors                      |        |               |       |
| Interviewers                     |        |               |       |
| Daily allowances                 |        |               |       |
| Other                            |        |               |       |
| Total                            |        |               |       |