

Report

**Study on Mobile Film  
Program (MFP)**

**Final Report**

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# Study on Mobile Film Program (MFP)



A Research Report Prepared for  
Social Marketing Company

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## Executive Summary

### Background, Objectives and Methods

SMC has been using Mobile Film Program (MFP) for reaching out to the rural audience with enter-educating shows to deliver messages on various issues including FP & Somaject, STI/STD, HIV/AIDS, Diarrhoea/ORS, Trafficking in women, etc. There are 8 zonal teams who carry out shows every month as per a monthly plan.

A study was carried out to assess the MFP shows.

The key objectives were to observe the show process to ascertain if the shows were taking place, and in correct way. Also the study was carried out to find out the immediate outcome of the shows on the audience in terms of change in awareness in the issues on which film is shown.

A case-control approach was followed to carry out the assessment. A pre-show sample of respondents were interviewed to assess the before show level of awareness and a post show interview assessed the post show knowledge level. A comparison of the pre-post data would indicate relative effect of the show.

Prior to the show the MFP team's activities were observed to assess if proper announcement and show arrangement was taking place. During the show the audience and the Show-men were observed on their handling the show, progress of the show in an orderly fashion and audience size composition and involvement.

The control respondent interviews took place before the show using face to face interview technique. The Test group, i.e. show audience interview followed the same technique and covered the same issues with some additional questions on the show.

The locations and sample were randomly selected.

In all 45 shows were observed and 319 control respondents and 1550 test respondents were interviewed, The respondents were adult men and women.

### Findings

45 out of the 64 shows selected from the monthly plan of the 8 MFP units for observation could be covered; the rest of the shows did not take place. Half or less

than half the sampled shows could be observed in Chittagong, Sylhet, and Barisal zones.

The show locations are often linked to the presence of Blue Star outlets. Only 29% show locations were media dark i.e. only a few households had a TV, and only 24% did not have any health care facilities like hospitals, clinics or health complexes, etc.

Majority of the spots announced twice and the duration of announcement was between 45 and 90 minutes starting from 3:30 in the afternoon and ending at 6:00 pm, covering up to 1.9 km from the show spot, on average. Though the population in the area covered by the show was pretty large (average 9696), show attendance was not high. Attendance of adult women was also low. The audience size peaked during the middle of the show (average 485). At the peak audience, attendance of adult women reached only at 84 on average. The attendance of women was much lower in Chittagong and Sylhet zones, the two areas commonly known for high religiosity.

In most locations the show started at sun down and continued between 90 minutes and 120 minutes. It is clear that the whole show was not screened in majority of the shows.

Most of the shows took place in a disciplined manner, with the audience well organized, and enjoyed the show. They got involved with the show very much by laughing and clapping early on and more emotionally involved as the show drew closer to the end.

The Show had positive effect on awareness of diarrhea – 54% audience indicated unsafe water caused diarrhea compared to 44% among the control sample. Other causes or preventive measures indicated by them did not show any improvement. When it comes to management of diarrhea, the exposed group focused mainly on home management by ORS, while the control group had similar high response on ORS, they indicated seeing a doctor much more (42%) than the exposed group (29%). Source of information on diarrhea is predominantly TV for all, but for the Test group nearly half also recalled MFP show. Orsaline is universally known. The show has been successful in increasing awareness of ORS Fruity as 56% of the exposed group recalled it compared to 39% in the control group; 69% of those aware of Fruity in the exposed group recalled MFP show as the source of awareness. However, the key perception is it is available in the pharmacy outlets – two thirds of the respondents said it is available in the pharmacies and half the respondents said it is available in the grocery outlets. Only 23% respondents in the Test group indicated that 250 ml water to be added to 1 pack of Fruity. Only 9% of the Control group respondents knew this. Majority indicated that 500 ml water needs to be added to 1 pack Fruity. Only 28%



bought Fruity at the show. Those who did not buy were not having a diarrhea problem at home or did not have any cash on them.

MFP shows play a reinforcing role in the already very high FP awareness. 57% exposed respondents recalled the show as a source of FP awareness. Pill, condom, and injectables as methods of contraception are near universally known. MFP provides good reinforcement in this awareness. Around 40% respondents recall that MFP is a source of information on these methods. The show is playing a very good role in increasing awareness of Somaject. 51% of the exposed group respondents knew about Somaject compared to 21% awareness in the Control group. Further, the show has created correct awareness of the effective period of Somaject among men which is 8.7 months on average in the control group. Further, the MFP show has increased the specific awareness of Blue Star as a source of Somaject from 11% in the Control group to 31% in the Test group.

Awareness of STI/STD has been reinforced by the MFP show, as 50% of the audience recalled having known about STI/STD from the show. Also awareness level of sex and blood route of transmission of STI/STD has gone up among the exposed group, particularly the women. Consequently, knowledge of STI/STD prevention in the area of abstaining and condom use is relatively higher among the exposed group.

Major transmission routes of HIV is well known to the control group. The MFP show has marginally improved most of them. Awareness of Mother to child route was improved substantially by the show.

The show had little effect on TB awareness level.

The awareness of trafficking in women was also reinforced by the MFP show.

Awareness of the show sponsor is very low – only 32% thought it was sponsored by SMC. However, 73% respondents were aware of SMC. On the whole, the film show had good appeal in terms of overall liking, convenience of the show time, and place - 89% felt that it was overall a good show, 98% found the time convenient, and 97% opined that the place of the show was convenient for all. 65% respondents reported that they had learnt something new from the show. Generally, most of the topics was easy to understand. When asked to recall SMC brands 71% recalled Orsaline. Recall of other SMC contraceptive brands was rather low which was in the range of 3% to 23%.

On the whole the show seems to have positive effect.

## **Recommendations**

### **Show Planning**

Maximum benefit can be attained if the show spots are selected in a manner that ensures reaching out to those who are most media starved and at the same time exhibit poorer KAP in the areas of interest like FP, STD, HIV, TB, Diarrhea, etc. This can be further fine-tuned and expanded using the gender perspective, level of education, availability of services, Use of safe water & sanitary latrine, SMC product use, etc.

### **Ensuring Screening of Show**

The MFP teams may be asked to get a certification from the local authority that the show had taken place at the venue on a certain date. These certifications can be sent to SMC as show completion report. Random check by management can be initiated to improve the situation.

### **Increasing Audience size**

Announcement Spread: Extra effort to cover the by-lanes by-lanes connected to the main roads is likely to ensure higher attendance in general and particularly women.

Hiring Local Volunteers: Volunteers can be locally hired to help bringing in audience, particularly women.

Creative message: The announcement can be made more interesting and appealing, creative and interesting messages relevant to the TG can be used to draw attention.

Increasing female attendance: Female volunteers can be used to increase female audience. Further, separate women's area can be created in the show. Additionally, female only shows can also be considered.

### **Product Sale**

Products may be sold at a little discount to increase trial and use.

### **Reviewing Content**

Drama order may be shuffled and Various shuffled version of the compiled DVD can be played at different locations. It is also possible to have regional dialect dubbing for the shows.

There is a felt need among the audience to know more about divergent health issues. They also want to acquire skills on various income generating activities related to farming, and small business. Such components may be added to the show.



## 1.1 Background on Mobile Film Program (MFP) of SMC

A key goal of a social marketing company is to reach out to the target audiences to bring about behavioral changes in the desired direction. Social marketing creates demand for products that are not normally demanded due to many socio-cultural and religious perceptions. It also uses social marketing technique in changing peoples behaviour so that they refrain from unhealthy/undesirable behaviour and practice the correct ones.

Effectively reaching out to the target audience is always a challenge particularly when they are poor rural mass with limited mass media exposure. On the other hand, there are many shortcomings of mass media communication which is a one way communication. In this context, other innovative communication options become critical for changing behaviour.

SMC took up the strategy of carrying the media to the people by initiating the Mobile Film Program (MFP). To bridge the communication gaps, MFP goes around villages with films and screens them for free. This program has been initiated in 1980. The objective of MFP is to inform people on health and family planning issues through enter-education films in order to enable the target audience to become well informed and be motivated to resort to desired and correct health and FP practices.

The films illustrate topics on family planning, maternal and child health, AIDS prevention, ORT and other social priority issues like anti-trafficking, importance of education etc, through enter-education films. The target group of MFP is the people in village, union, thana, upazila level and the secondary audience includes community leaders, influential people at domestic and community level, who can motivate the primary target group.

SMC operates 8 mobile video units attached to Dhaka, Mymensingh, Sylhet, Chittagong, Barisal, Khulna, Rangpur, and Bogra sales offices, organizing approximately 176 shows across the country in a month. SMC believe each show covers 1500 audience on average.

## 1.2 The MFP Show

At present the show is held with a maximum duration of 2 and a ½ hours. A special video has been prepared for this purpose. The video contains several drama on topics

of interest, some Bangla movie songs, SMC product advertisement, and some non-SMC product advertisement.

The following table (Table 1) gives description of the film show content:

**Table 1: MFP show contents**

| Content              | Approximate Duration |
|----------------------|----------------------|
| Child Education      | 10 min.              |
| Family Planning      | 13 min.              |
| Somaject             | 17 min.              |
| Trafficking in Women | 10 min.              |
| ORS                  | 15 min.              |
| STI/STD and HIV/AIDS | 42 min.              |
| Tuberculosis         | 10 min.              |

The MFP teams are equipped with latest audiovisual equipments like DVD player, multimedia projector, audio system etc.

Each of the MFP teams, at the beginning of the month, plans where they will arrange show. The MFP team reaches a show location in the afternoon and makes announcements about film show which is later held at a specified place in the evening.

### 1.3 Objectives of the Study

The MFP has been active for a very long time and there was a felt need to have an assessment of the MFP teams' performance in terms of holding shows as per plan. Also, an assessment was needed to check the outcomes of such shows.

*The study was conducted to assess the process and immediate outcome.*

The broad objectives of the study stood was to assess:

- MFP teams performance in terms of
  - Punctuality
  - Audience composition
  - Show arrangement and management quality
  - Proper announcement and product sale
- The outcome of the show among the target audience in terms of:
  - Content recall
  - Change in awareness of various FP methods
  - Change in awareness on causes, transmission route, and ways of prevention of STI/STD, HIV and AIDS, TB, Diarrhea, Anemia, IDD, etc.

- Change in awareness on issues like education, trafficking in women, etc.
- Awareness of Sponsor, new information learned, and other ads noticed



