A Brazilian experience

Seminar promotes social mobilization on ORT

In order to study the Brazilian experience in social mobilization and communication, and to have an interchange of participants’ experience, in accelerating the achievement of 80% use of ORT, the seminar was held in Recife, from August 30 to September 1, 1995. The participants from Brazil, Colombia, Ethiopia, Guatemala, Mexico, Nicaragua, Pakistan, Panama, South Africa, USA and Venezuela represented media, governments, NGOs, professional associations, business sector and UNICEF offices.

The specific objectives of the Seminar were to learn from the Brazilian communication and outreach strategy, which is in place, the role and work of key partners, and ORT campaign implementation learn from the area of the Child Defense Group, a multidisciplinary and multi-sectoral team, which has been an effective mechanism for involvement of the media and communication community in large-scale IYF activity; study the functioning and organization of community health agents, a government programme whose work has greatly contributed to the achievement of current levels of ORT use; study the Child Pastorate, a church-based volunteer body, in using ORT as an entry point for other child health interventions in reaching especially vulnerable communities; and articulate the potential roles of the business sector in reaching child health objectives. ORT in particular, and initiate dialogue on plans of action at country level.

For three days, the participants had the opportunity to debate various themes according to an established Agenda (see page 2), participate in working groups and panel discussions and visit critical areas where orf programmes were under implementation. They considered that the experience carried out in Pernambuco with the democratization of actions and society involvement contributes to reduce infant mortality and should be extended to other regions of the world.

The Recife Initiative and Commitments

The participants in the International Seminar on Communication and Social Mobilization for the Universalization of the Use of ORT, recognizing that:

1. Diarrhoea is accountable for 25% of the deaths of children under five, in the world (3 million deaths per year, or 8,000 per day);

2. Oral rehydration therapy is the most effective and efficient way to prevent almost all of such deaths, and therefore represents the best scientific alternative for many countries in the world; continued feeding is essential;

3. The goal of reaching 80% use of ORT in 1995, and the goal to halve the deaths caused by diarrhoea by the end of the century, have been ratified by all regional and global meetings of Heads of State in Latin America, Africa, Asia and the Middle East;

4. Coverage of ORT has expanded from almost zero in 1980 to one third in 1990, and two thirds in 1995; this

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Brazilian projects are an example to be followed

For three days, professionals from eleven different countries attended the International Seminar on Communication and Social Mobilization for the Universalization of ORT, held in Recife, capital of the State of Pernambuco, Brazil, from August 30 to September 1, 1995.

The seminar had as its purpose to study the Brazilian experience in social mobilization and communication and to promote an interchange of experience among participating countries in accelerating the achievement of 80% of ORT use.

The participants had the opportunity to debate various themes, participate in working groups and panel discussions and visit critical areas where ORT programs were under implementation. They concluded that the experience carried out in Pernambuco with the democratization of actions and the involvement of communities contributes to reduce infant mortality and should be extended to other regions of the world.

Consequently, UNICEF is recommending the implementation of national health programs to Third World countries such as those developed in Pernambuco, particularly the Community Agent and Family Health programmes and emphasizing the importance of social mobilization for the success of the programmes.

Seminar discussions also stressed that any infant mortality reduction project should be based on alliances established with the Government, the Church, labor unions and NGOs. In addition, mobilizing society, with support from the media, was considered another essential initiative which has been successfully adopted by UNICEF to stimulate the reduction of infant mortality rates in Brazil in the past ten years.

Together, all these factors resulted in an ongoing social mobilization effort to raise public awareness besides promoting low-income communities' access to basic information on child health and to low cost technologies of proven effectiveness which have already saved many lives in Brazil's poorest areas. This is, therefore, an example to be followed.

The seminar agenda

30 August 1995
- Opening Session
- Panel Discussions
  Social Mobilization - A Strategy for the Universalization of ORT in Brazil
  Lectures
  Control and Social Participation Mechanisms in the Health System
  The Control of Tuberculosis Diseases within the Institutional Perspective
  Community Involvement in Social Mobilization
  Inter-institutional Articulation as Part of Social Mobilization
  Social Participation in the Follow-up of the Grants Established by the World Summit for Children

31 August 1995
- Field Visit:
  Community Health Agents Programme
  Group Work on Field Visit
- Panel Discussions
  Commercialization of Oral Rehydration Salts (ORSs)

1 September 1995
- Field Visit:
  Child Protection Programme
  Group Work on Field Visit
- Panel Discussions
  Countries' Experience
- Closing Session

20 August - 01 September 1995
improvement in ORT coverage has caused a decrease of one million deaths of children under five in developing countries; but still much needs to be done.

5. The opportunities created by broadening the participation of the civil society in the social development process as well as the private sector potential for involvement remain largely untapped in most countries; national alliances for ORT promotion with participation of the private sector have clearly demonstrated enormous comparative advantages.

6. The Brazilian strategy of social mobilization could be adapted to the situations of other countries, since it demonstrates in practice the advantages of coordination between government, NGO's, and private sector, for policy implementation and action in favor of children.

The involvement of Church and NGOs in the dissemination of ORS is essential.

The solution is salt and sugar.

4. The alliances with different sectors and institutions of the society, including the use of all possible forms of communication and partnership with the private sector to facilitate universal access to oral rehydration solution; a continuing dialogue with major players in developing innovative ideas, material, and interventions which take advantage of their great potential, and the necessary work to improve legislation and making in order to facilitate the active involvement of private sector.

5. The use of all forms of information, education and communication to improve the capacity of mothers, fathers, care-takers and families to use ORT and continue feeding during diarrhoea as well as correct use of drugs, to support reduction of infant and child mortality.

6. The building of an international network as a consultative group to provide the necessary support in this effort.

Low-income communities learn how to prepare and use ORS against diarrhoeal diseases.

And declare that:

1. Similar strategies could be used successfully to approach other difficult social problems such as basic education, malnutrition, water and sanitation, maternal mortality, childhood deaths produced by acute respiratory infections and perinatal causes, and increasing incidence of HIV/AIDS.

2. All these efforts must be based in the context of the broader interest of children and the implementation of the Convention on the Rights for the Child.

Recife, September 1st, 1985

Recife, Brazil
The Child Pastorate

Programme is a model for community health training

Stimulated by UNICEF, the Catholic Church initiated in 1984 a basic health actions project - the Child Pastorate - to encourage and promote the current struggle against the deaths of Brazilian children. Approximately 64,000 children die every year as victims of dehydration in the poor areas of the country and the National Council of Brazilian Bishops (CNBB) therefore decided for the implementation of the National ORT Programme. The goal of this initiative was to accelerate the dissemination of the homemade solution already used by the Child Pastorate Project, the ORT packets and the cereal-based solutions.

The National ORT Programme was planned in two phases. The first one had as objectives to disseminate and popularize the home- prepared salt and sugar solution; provide recognition to those communities already using it; enhance the Child Pastorate Project; and bring together and commit other social sectors. The second phase was designed to reinforce ORT dissemination, increase the use of cereal rehydration solutions; intensify knowledge and practices essentially concerning nutrition; initiate educational and preventive radio programs; and consolidate the Child Pastorate Project.

The utilization of the Child Pastorate structure allowed the mobilization and the involvement of the Catholic Church as a whole. This included: 236 dioceses, 8,000 parishes and approximately 100,000 ecclesiastical communities.

In the second phase, the National Coordinating Group was formed through strategic alliances among the Child Pastorate, UNICEF, the Brazilian Pediatric Society, the Ministry of Health, the National Advertising Council, the Globo Television Network, the Health Pastorate and the Catholic Radio Network. This initiative enabled the creation of technical, communication and interinstitutional groups specifically trained. Educational and mobilization material were provided to the dioceses, parishes and other entities. Among them were ten million measuring spoons, 13.5 million headdresses, posters, flipcharts and communicator's booklets, as well as spoons and jingles for all television and radio networks.

Perspectives

Future actions should give emphasis to the following recommendations based on the National ORT Programme's experience:

1. The same participation methodology should be applied by government agencies and NGOs and used for the popularization of other basic health measures.

2. The ORT Programme should serve as a model for a permanent training program on primary health care for mothers and communities.

3. The Programme should serve as a model to provide incentives for impoverished populations to demand basic sanitation, health services, education and a better life quality.
Joint actions provide access to basic information

Mobility, society, with support from the media, has been one of the successful strategies adopted by UNICEF to stimulate the reduction of infant mortality rates in Brazil. Estimates indicate that approximately 230,000 Brazilian children die every year. The cause is to be found in poverty, illiteracy, extreme disparities of income, low wages, unemployment, lack of clean water and basic sanitation and other problems. Most of these premature deaths occur, however, because parents do not have access to basic information on child health and, therefore, to low cost technologies of proven effectiveness to avoid this tragedy.

Agreement

With a view to finding a solution to this suffering, and in an attempt to guarantee millions of children and adolescents survival with dignity, UNICEF signed an agreement with the Brazilian Association of Radio and Television Stations (ABERT) which calls for joint action to mobilize the communications media (radio and television) to conduct support programmes for the survival and development of children and adolescents. Through the agreement, ABERT provides support for the organization of training courses for radio and TV communicators, in a joint action with UNICEF. The objective is to develop communication and information activities on behalf of children and adolescents, programmed as a priority goal for the North and Northeast of Brazil. Approximately 2,000 communicators have already been trained and the medium term expectation is that this initiative will make an effective contribution toward assuring conditions for survival with dignity to the Brazilian children and adolescents.

Publicity

A member of the National Publicity Council, the publicity agency PROPLP has supported UNICEF and its counterparts in the creation, production and broadcast of a number of mobilization campaigns for children and adolescents. Jointly with the Association of Radio and Television Stations of Pernambuco (ASSERPE), which is affiliated to ABERT, the agency created in 1995 a child awareness raising campaign related to child mortality. The “Alive Child Northeast” campaign mobilized the whole sector of graphic and audiovisual production in the State of Pernambuco as well as the media in all Northeastern states. Such initiatives are intended to contribute to the goal of infant mortality reduction and the dissemination of low cost technologies to save lives throughout the country.

Child and Hope

Another important initiative carried out with UNICEF support is the “Child and Hope” campaign produced by the Globo Network along the past eleven years. Globo TV is the leading network in the country and this campaign has the purposes of raising the awareness of the population and authorities on the situation of children and youth, calling the attention to their rights, especially those guaranteed by the Constitution, and pointing out solutions for these problems; and raising funds through a telethon campaign for UNICEF to invest in child assistance programmes in Brazil. The amount raised along the years reaches US$ 72 million.

The lack of clean water greatly contributes to premature deaths.

Support from the media is essential to raising children awareness.

Recto, Brazil
How Brazil has been mobilized to struggle against diarrhoea

Significant numbers

Dehydration as a consequence of diarrhoea was the second greatest cause of infant mortality in Brazil in 1980.

In the Northeastern region of the country, diarrhoea accounted for more than 29,000 deaths of children representing approximately 80 deaths per day or one per 20 minutes.

In 1982, it was the fourth main cause of deaths representing 14% of infant mortality. The first three were perinatal, respiratory infection and others.

It is estimated that 250,000 children were saved during the 80’s mainly due to the use of the Oral Rehydration Therapy.

In 1991, the use of the Oral Rehydration Therapy reached 69%. The goal for 1995, according to the World Summit for Children, is 80%.

Improvement factors

- Social mobilization was a determining factor in strengthening the community by enabling them to search for alternatives in order to face and solve their own problems. They became aware of their rights, demanded improved attention and were therefore successful in the search for citizenship rights despite political changes experienced during the 80's.

- The Community Health Agents played an important role as a consequence of community mobilization, this concept stimulated the Ministry of Health to disseminate this service to all Brazilian states.

- The alliance of institutions representing various sectors of society enabled the creation of the Child Health Defense Group in 1987 and the establishment of a national policy for ORT use and an overall communication strategy which included the utilization of mass media and individual approach by community agents.

- Local and national efforts were supported by a monitoring and evaluation system which, together with the Situation Analysis produced by UNICEF, have been used as parameters in approaching new challenges.

6 30 August - 01 September 1995
The joy of surviving without depending on miracles

In the past decade, an estimated quarter of a million children have experienced the joy of surviving in the poorest areas of Brazil. There were no miracles, but simple and effective actions, particularly the massive use of ORT and a sound mobilization and communication strategy based on the mass media, were effective. The individual efforts of community health agents, the local church, and local NGO’s, all contributed to this success story, for which this initiative generated a feasible and reliable policy for the reorganization of ORT.

Dr. Monica Sharma, UNICEF Senior Advisor for the Control of Diarrhoeal Diseases, and one of the participants of the Recife’s International Seminar, considers that “Brazil has managed to create a wide social umbrella which included the private sector, government, the Church, the media and the communities. It is a country that is able to look at both the large and small pictures, and actually take action.”

UNICEF is recommending the implementation of public health projects in Third World countries such as those developed in the State of Pernambuco, Brazil, namely the Community Agents and Family Health programmes, and emphasizing the importance of social mobilization for the success of the programmes. Agop Kayayan, UNICEF Representative in Brazil, believed that the Seminar on ORT held in Recife enabled a sound exchange of experiences among participants, countries, and stressed that any infant mortality reduction project should be based on alliances established with the Government, the Church, labor unions and NGOs.

Strategy - During the Seminar, Miguel Arraes, the Governor of Pernambuco, also said that fighting the condition should not be an isolated government struggle but part of a strategy involving society in general. According to the Governor, social disparities and lack of access to clean water and basic sanitation greatly contribute to aggravate the problem. Two thirds of Recife’s 1.3 million inhabitants do not have quality water or sanitation and, therefore, the use of Oral Rehydration Salts becomes an essential tool to ensure children’s survival.

Objective - Despite recent programme achievements such as the Community Health Agents, a great deal still needs to be accomplished. In the words of Dr. Monica Sharma, UNICEF Senior Advisor, “our objective here is to guarantee that the alliances are maintained and to work on the unfinished job.” Although the lives of one million children are being saved throughout the world every year as a consequence of massive ORT use, three million still die during the same period due to diarrhoeal diseases. According to UNICEF data, diarrhoea is responsible for 25% of infant mortality in Pernambuco and for the death of 800 children per day in the Northeast Region.

Poverty - Sharp disparities in the distribution of wealth and the lack of access to basic preventive information definitely contribute to aggravate the situation of children in developing countries. Revelations from the Seminar, revealed the dark side of such distribution when stating that “poverty has different causes. Here in Brazil, it is caused by the political and economic structure. In Ethiopia, poverty is caused by an absolute lack of money in the absence of wealth to be distributed.”

Recife, Brazil
The Community Health Agents Programme (CHAP) is an initiative of the Ministry of Health and of the National Health Foundation based on a strategy to build a collective health care system that is accessible, affordable, quality-driven, and socio-economically equitable. The program aims to enhance the health and well-being of the community by promoting health education, disease prevention, and early detection and treatment. The program is implemented in partnership with local government and community-based organizations to ensure sustainability and impact.

The Community Health Agents (CHAs) are local volunteers who are trained to provide basic health care services and to promote health education in their communities. They work closely with the health authorities and other service providers to deliver essential health care services and to identify and address health needs at the grassroots level.

The Community Health Agents Programme was initiated in 1993 and has since been expanded to cover a large number of communities. The programme has demonstrated significant achievements in improving health outcomes and reducing health disparities. It has been recognized as a successful model for community-based health care delivery.

Achievements

- 640 agents are in active service and 230 are being trained.
- 54,000 families are visited every month.
- 67,314 children from 0 to 5 years are monthly monitored.
- 95% of children from 0 to 5 years are receiving basic vaccines.
- 22% of children in the first three months of life are being breastfed.
- 30% of children having diarrhoea use ORT.
- 6% of children assisted by Community Health Agents had diarrhoea; 100% of them were monitored and 90% used ORT.

The Community Health Agents Programme has been successful in improving health outcomes and reducing health disparities. It has been recognized as a model for community-based health care delivery and has been replicated in other countries. The programme has been acknowledged as a successful model for community-based health care delivery and has demonstrated significant achievements in improving health outcomes and reducing health disparities.

Society participation improves social control measures

Community Health Agents use any means of transportation available to disseminate information and technology.

Who is the agent?

The Community Agent is a person who is knowledgeable and has experience in health care and social work. They are trained to identify and address health needs at the grassroots level and to provide basic health care services.

The Community Agent has several responsibilities, including:

- Conducting health education and awareness programs
- Providing basic health care services, such as first aid and basic medical treatment
- Referring patients to medical facilities when necessary
- Monitoring health outcomes and reporting on health status
- Promoting healthy lifestyles and behaviors

The Community Agent is an important link in the health care system and plays a critical role in improving health outcomes and reducing health disparities.

The Community Health Agents Programme has been recognized as a successful model for community-based health care delivery and has demonstrated significant achievements in improving health outcomes and reducing health disparities.
Partnership is essential to overcome disparities

The 1997 Census reported more than 7 million inhabitants living in the State of Pernambuco, out of which almost 3 million in the metropolitan region of Recife. Approximately 35% of total state population live below the poverty line. Recife have experienced a disorderly process of development and the urban and economic activities did not grow accordingly to absorb the demanding migration. As a consequence, major socioeconomic problems were created, such as the lack of housing, inadequate education, one of the country’s highest unemployment rates and an increased crisis in the health system.

However, Recife counts with a significant number of popular associations which have a large experience accumulated in the institutional interaction with the municipal power, NGOs and local businessmen. These associations have participated since 1993 in the implementation of the Health Agents Programme which is financially supported by UNICEF.

Training of agents

The Programme contemplates two different phases: the training of agents and monitoring, supervision and evaluation. Training activities give emphasis to an integrated education and practice aiming at stimulate a critical awareness of the possibilities to improve in a short period of time the health patterns of the population through simple and low-cost initiatives.

Monitoring, supervision and evaluation activities are developed by an instructor/supervisor and by the Sanitary District coordinator. Monitoring and supervision are daily activities carried out at the community by the instructor/supervisor who visits the domicile together with the agent and whose contributions include the presentation of monthly reports. Monitoring and evaluation meetings are periodically organized with the participation of the community agents. Instructors/supervisors have their activities coordinated by the Programme’s coordinator.

Actions involve a sound community organization

The Community Health Agents Programme has so far developed the following actions:

- Permanent encouragement to community organization;
- Participation in the community daily life, particularly through the associations in order to stimulate the discussion of issues related to the improvement of life quality;
- Strengthening of ties between the community and health services;
- Providing information to health staff related to the community’s availability, demands and social dynamics;
- Community guidance for the adequate use of health services;
- Registration of all families living in the area covered by the Programme;
- Registration of births, diseases, deaths and epidemiologic surveillance activities;
- Execution of basic health actions and activities within the Programme’s capabilities;
- Monitoring of pregnancy and breastfeeding;
- Encouragement to breastfeeding;
- Monitoring of child growth and development;
- Control of diarrhoeal diseases;
- Control of Acute Respiratory Infections;
- Guidance in feeding alternatives;
- Promotion of health education.

Support means a better future.

Recife, Brazil
The role of private corporations in achieving social objectives

by Haider Khan

Let me start this article with a comment by a famous economist, Robert Solow, that when private corporations claim that they are performing an important social function, they are not lying by one hundred percent. Whether private corporations should or actually do participate in the achievement of social objectives is a long debate. Robert Solow’s comments fit into the middle of this controversy. On one extreme, we have Prof. Milton Friedman’s famous dictum that the only social responsibility of a corporation is to maximize profits. According to this school, it is Adam Smith’s so-called “invisible hand” that finally leads to a betterment of everyone or social welfare while individuals are only concerned with their personal welfare. On the other extreme are those opinions in which corporations are blamed for all modern day economic and social evils. According to the second school, corporations operate in a purely selfish manner being concerned with their own benefits only, which in many or most cases is against the interest of the society.

The real world perhaps is a mixture of all this. While there are cases where corporations have worked to the detriment of the society and environment for personal gains, there are also plenty of cases where various corporate functions have resulted into great social benefits for the society. In saying this, I am not exactly thinking about the philanthropic activities which might undertake, keeping “charity separate from Business”. Here I am actually thinking about corporations which in the normal course of their activity are doing things and performing functions which lead to great social benefits to the society. There are so many areas and so much common ground, where private companies like to participate in the achievement of public social objectives for a variety of reasons.

Corporations are under tremendous moral, social and economic pressure to take a close look at their activities and its effects on society.

The changing environment

In the last 3 to 4 decades, the business environment has changed drastically all over the world. The traditional dividing walls between private and public sectors are fast breaking down. Secondly, today’s consumer is far better informed and far more concerned about the positive and negative externalities of various industrial activities. There are Consumer and Environmental groups emerging everywhere who are keeping the people informed as to the benefits as well as harmful effects of various products and industries from acid rain or global warming to lead in the automobile exhaust etc.

Coupled with this, there is an increasing importance of the industry in deciding our life styles, consumption patterns, government policy and to some extent social norms. The corporations are therefore under tremendous moral, social and economic pressure to take a close look at their activities, and its effects on the society. With transglobal corporations operating in various countries, the need to be sensitive to the social goals of a particular country is also very important. Finally, they should take a very close look at the expectations that the society from them.

These expectations are the society’s benchmark on the basis of which they pass a judgement on these corporations. Putting all of these facts together, a corporation can have a fairly good idea as to what it takes to be a good Corporate Citizen in that particular industry. With a much better informed public, this issue has never been as important as it is today.

From another point of view, corporations have a tremendous advantage over government and other organization. They have an expertise which is special to them because of their closeness with the consumers and the sensitivity they have for their attitudes, habits, likes and dislikes. In other words, they know far better than others what people like, and what they will do or even how they can be persuaded to act in a certain manner without the use of government’s authority. Since various industries have particular specialized expertise, they are specially suited for performing their role in achievement of national objective in that particular area. These things actually come instinctively to a good corporation. Given this fact, their responsibility to take an initiative and play a positive role in the achievement of national objectives is enormous.

The modern day challenge is how to develop a business proposition in such a way that the social objectives are also achieved.

Having been involved in the Pharma industry for the last three decades, I have been sensitized on these issues for a long time. Pharma industry, which manufactures and market medications for the benefit of the sick is also one of the most criticized industry in the public media. This is not confined to Pakistan alone. It is true that a lot of this criticism is not justified and is based on impressions rather than facts, yet also true is the fact that people’s expectations from this
industry has not been met. Perhaps the pharma industry to be more sensitive to the needs of the nation than it has been.

There is no industry where people’s expectations are so high and the industry is so important to be sensitive to these issues.

People expect the pharma industry to be more sensitive to the needs of the nation than what it actually is.

Developing a business in line with social objectives may not be as difficult as it sounds. Traditionally, we are used to looking at various segments in isolation thinking that each has a domain of its own, separate from the other without any overlapping. It is usually that we actually see these walls being broken down. What used to be called government vs. private sector is not that sharply demarcated any more. Recently, the NGOs are also emerging in various areas discovering common grounds with the government, international agencies and in some cases with the private sector. In this new scenario, the national objectives in social sector are turning out to be everyone’s objectives whether they are in government, business or an NGO and all of them are reaping more and more the benefits of cooperation with each other, rather than doing it on a stand-alone basis.

Given these reasons, everyone has to look at the expectations of others, and its own expertise to decide what one has to do.

The problem

Governments, for long, have regarded business in advices and have always been suspicious of their activities, thinking that business is only concerned in making money and has no feeling for any social objective. Hence, they see the need for controlling them. They fail to see that there are many ways in which they can develop a symbiotic relationship with the corporations to achieve a national objective. For example close cooperation or even collaboration between Ministry of Population Planning and manufacturers and suppliers of family Planning medications and devices would only be natural.

Rather than suspect their intentions, government should do its utmost to facilitate their working so that a proper “Service Delivery System” can be developed. For example, the Ministry of Health, which is concerned with child survival, could develop a symbiotic relationship with the manufacturers of Oral Rehydration Salt or with vaccine producers and thus encourage them to improve their products in order to make their programme successful.

Facilitating does not mean financial incentives. Many times it is the removal of prohibitive tariff on the products or necessary change in rules or legislation or improving the product availability or some support in communication programme through joint funding. From the point of view of government, anyone who is helping them achieve a national objective is a helper or rather a “customer” in the business sense. A sensitive civil servant would obviously do his utmost to service the person or organization who is helping him become more productive.

The opportunities for this are many and so obvious, that most government functionaries working towards the achievement of a social objective whether in Health, Education or Environment can find people and organizations in the private sector who would be too happy to cooperate and coordinate with them. Someone has to see this opportunity and develop the trust and understanding which is needed for this kind of relationship.

The public sector can not expect much cooperation from the private sector unless it understands and appreciates its workings and its potential to achieve social objectives. The initiative in this relationship can come from either side.

As for the various international agencies as well as some NGOs, they can play the much needed role of a honest broker and provide a buffer in most of the cases. They can also work with government functionaries for the necessary changes in legislation when required. In developing this kind of relationship, they can also persuade the corporations to play a fat bigger role in becoming a good corporate citizen.

Developing mutual trust

A big hindrance in developing this trust and understanding, however, is the fact that in the public sector “profit making” is looked at with much scorn. For the business organization, on the other hand, “profit making” is their survival and their accountability since they don’t get funded by anyone’s tax revenues. They must stand on their own feet and earn their own money in the market place. So, whichever way they participate in a social objective, it must be through a business proposition.

However, since all projects and products are not equally profitable, projects of this nature certainly would be with a low profit margin, or sometimes just close to the break even point. This low profitability or even financial investment in a few initial years is more than justified because of the positive corporate image that such activities earn for the company, an issue about which companies are getting increasingly concerned. The public sector cannot expect to get much cooperation from the private sector unless it understands and appreciates its workings and its potential to achieve social objectives. The initiative in this relationship can come from either side.

*Managing Director Scaler Pakistan Ltd.
Recht, Brazil II
Democratization of actions reverts infant mortality

Maria Goulaves de Silva, a 32 year-old laundress and mother, who lives in 'Vila Tamandare', one of Recife's poorest areas, had never dreamed one day of receiving at her shack a group of foreigners. However, it actually happened on 1 September 1993 as part of a field visit promoted during the International Seminar on ORT. According to Nila Nyl, Special Advisor to UNICEF's Executive Director, and one of the foreigners, the situation was better than expected. Despite social disparities, Brazil is developing swift and effective actions against diarrhoeal diseases through the rise of ORT and was thus selected to host the Seminar.

Nila Nyl also emphasized that the mobilization of the mass media in Brazil for the dissemination of oral rehydration messages is one of the most effective worldwide initiatives. He added that the democratization of actions and the involvement of society greatly contributed to revert Brazilian infant mortality rates and is an example to be followed by all countries experiencing similar problems.

Counterpart promotion in social mobilization and communication actions in favor of children, adolescents and women development is an essential instrument adopted by UNICEF Brazil to increase awareness and stimulate initiatives to improve life quality and, therefore, decrease infant mortality. Important partnerships between UNICEF and the media community allowed direct and payment free contributions by newspapers, TV and radio stations and professional associations such as ABIR - Brazilian Association of Radio and TV Stations - and its state agencies, ANP - National Newspapers Association, ANP - National Newspapers Association and labor unions as well as personal and professional contributions by communicators, journalists, radio announcers, TV producers and artists. Such partnerships is benefiting children, adolescents and women throughout the country.

ORT received a strong communication support in Brazil during the past ten years as a priority instrument to fight infant and child mortality. The efforts of the media in promoting a greater involvement of NGOs and state/municipal governments, in addition to the involvement of the Ministry of Health, itself and the actions carried out by the Pact for Children, are leading to a dynamic and permanent process in favor of ORT, particularly in the North and Northeast regions. This is an ongoing social mobilization effort to raise public awareness about simple solutions that have already saved many lives.

In 1990, out of every 5,000 children born in Brazil, 181 died before the age of two. However, by 1993 this number had been reduced to 65.

**Brazil at a glance**

**Infant and child mortality**

In 1990, out of every 5,000 children born in Brazil, 181 died before the age of two. However, by 1993 this number had been reduced to 65.

Brazil at a glance

**The role of the media**

Approximately 50% of Brazilian homes have television sets representing an estimated potential audience of 120 million people. Radio is present in practically all homes and together with TV are the most important means of communication in Brazil. Therefore the strategy implies reaching vast populations. Advertisements play a fundamental role as vehicles in delivering social messages to decision makers within and outside the government.

- Number of households: 362 million
- Households with TV sets (68.4%): 241 million
- Households with radio (67.8%): 240 million
- Newspapers issued per day: 6.0 million

**Income disparities**

While Brazil has the world's tenth largest GDP, there are vast regional disparities in the country's distribution of wealth. In Sao Paulo, the wealthiest state, GDP exceeds US$ 4 (billion). However, in Brazil and eight times as high as the Northeastern state of Piauí, GDP per capita (1993): US$ 2,691.

1% richest concentrate 59% of wealth
50% poorest concentrate 12% of wealth