

Evaluation of the Prenatal Public Service Announcement

Report to Health Canada, National Projects Fund

Submitted by:
The Young/Single Parent Support Network

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Exhibit 1

Evaluation of the Prenatal Public Service Announcement

INTRODUCTION

The Flett Consulting Group Inc. is pleased to submit this report to the Young/Single Parent Support Network (YSP Network) of Ottawa-Carleton. The report presents the results of an evaluation of the Prenatal Nutrition Public Service Announcement (PSA) funded by Health Canada's National Projects Fund. The bilingual (English and French) PSA was initiated and developed by the YSP Network and its CAPC project, Brighter Futures for Children of Young Single Parents to:

- raise the awareness of the importance of healthy nutrition during pregnancy
- raise the awareness of the availability of local Prenatal Nutrition Programs across Canada
- recruit participants for the local program, *Buns in the Oven/Ça mijote*

The project goals and objectives are shown in Exhibit 1.

Production of the PSA

The PSA was produced by Pan Films, the company which generated the *Kick Butt for Two/Maman, on écrase!* video advertisement. A community, intersectoral Advisory Committee with representatives from health, education, social services and young, pregnant and postnatal women was established to oversee the development of the PSA. The committee's role was to ensure that the PSA was of superior quality, and addressed the projects goals and objectives.

Programs and agencies represented on the Advisory Committee were:

- Ottawa-Carleton Regional Health Department,
- Eastern Ontario Health Unit,
- Somerset West Community Health Centre,
- Children's Hospital of Eastern Ontario,
- Children's Aid Society,
- Lanark County Connections CAPC/CPNP project,
- Perinatal Education Program of Eastern Ontario, and
- Aboriginal Women's Support Centre.

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In addition, a professor of the University of Ottawa School of Nursing, prenatal program participants as well as recent graduates of the *Buns in the Oven/Ça mijote* program were members of the Advisory Committee. The list of participants is contained in Appendix A.

Advisory Committee Meetings were held at the Laurentian Club from 5:30 pm to 7:30 pm and included a light supper. Meeting venue, format and arrangements incorporated the best practices, identified during the evaluation of the *Anger/Stress H.E.L.P. (Healthy Emotions/Loving Parents) Toolbox program*¹, for the conduct of highly effective advisory committee meetings. The agenda for the first Advisory Committee meeting held on 20 May 1998 included introductions, refinement of goals and objectives, an explanation of the process for making the PSA, discussion of PSA content, and the formation of a working group². The Advisory Committee met three times over the summer and early fall to advise on the script, content and overall aspects of the project. In total, seven meetings were held, three Advisory Committee and four Working Group.

The PSA launch party occurred 4 November 1998 at St. Mary's Home. The launch was a celebratory occasion with food, the opportunity to view the final version of the PSA and to acknowledge everyone's participation and contribution. The occasion was well attended by Advisory Committee members and funders.

The PSA, which was produced in English and French, is a thirty second animated video. In the Ottawa-Carleton viewing region, the local *Buns in the Oven/Ça mijote* program phone number is provided at the end of the PSA. In other viewing areas across Canada, the audience is asked to call their local health department for more information.

¹ Evaluation of the Anger/Stress H.E.L.P.(Healthy Emotions/Loving Parents) Toolbox program for young, single parents, 1998, conducted by the Flett Consulting Group Inc. for the Young/Single Parent Support Network with funding from Health Canada.

² The thirteen member Working Group included Karen Hunter, Project Coordinator, Brighter Futures; Cathy Fortier, Project Coordinator, Krissy Duhan, Program Assistant and Jennifer Muldoon, Graduate, *Buns in the Oven/Ça mijote*; Heidi Last, Director, Victor Poirier, Producer and Jacqueline Toupin, Writer, Pan Films; Lise Bertrand, prenatal resident, and Stephanie LePage, prenatal resident, St. Mary's Home, Joanna Jennings, Dietitian (CPNP), Eastern Ontario Health Unit; Renee Crompton, Dietitian, Ottawa-Carleton Regional Health Department; Dr. Cora Hinds, Professor, University of Ottawa School of Nursing; and Dr. Kristine Whitehead, Family Physician, Somerset West Community Health Centre.

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Distribution of the PSA

In January, 1999, copies of the PSA were distributed by Pan Films to 200 television broadcasting stations across Canada. A brief response card was included in the package to be completed by the PSA coordinator at each station. The response cards were used to track how often the PSA was aired and to glean comments. Pan Films conducted a telephone follow-up of all coordinators to confirm how often and when the PSA was aired and the dollar value of the airtime.

At the same time, copies of the PSA were also sent directly to all 277 programs across Canada funded by the Health Canada's Prenatal Nutrition Program (CPNP). A cover letter and a brief self-administered evaluation questionnaire was included in the mail-out package.

EVALUATION SCOPE AND APPROACH

The purpose of the evaluation was to establish the extent to which the goals and objectives of the project (as specified in Exhibit 1) have been achieved. In other words, *Did we do what we said we would do?* To address each of the evaluation questions, the following data collection activities were implemented.

Advisory Committee and Working Committee meeting minutes were reviewed and Interviews conducted with selected Advisory Committee members to monitor the development and production process of the Prenatal Nutrition PSA and identify lessons learned.

Focus groups with teen parents representative of the target population were contacted to obtain their first-hand reactions to the video and to ascertain the extent to which the video:

1. was "teen friendly",
2. increased their awareness about the importance of healthy eating during pregnancy, and
3. enlightened them regarding the availability of local programs.

Feedback was obtained from CPNP program facilitators across Canada by a self-administered evaluation questionnaire. The questionnaire, which was sent to each of the CPNP sites with the PSA video, collected background information about the programs offered at the site, the target population, and a series of questions specifically about the PSA. The questions about the PSA were designed to obtain feedback on the use of the PSA in their local nutrition

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programs, its appropriateness for the target audience, and the extent to which it raised awareness about the availability of local prenatal nutrition programs. Sites were asked to fax or send the completed forms back to the evaluator by 31 March 1999. (See Appendix B)

Daily tracking of local referral calls using a contact and referral record form (see Appendix C) was undertaken by the Coordinator of the *Buns in the Oven/Ça mijote* program in Ottawa-Carleton. The purpose of this activity was to establish if the PSA increased awareness of the *Buns in the Oven/Ça mijote* program locally. Information recorded included the source of referral for each call, whether the caller had seen the PSA or not, and if the caller had seen the PSA, what their reaction was.

Collaboration with Pan Films to obtain and coordinate information collected on the exposure of the PSA to the target population.

EVALUATION RESULTS

This section presents the results obtained by addressing the project goals and objectives.

Lessons Learned During the Development and Production of the Prenatal Nutrition PSA

Four key lessons were learned:

1. The involvement of the community through the establishment of the Community Advisory Committee was indeed helpful. Committee members contributed significantly to the vision, the articulation of what was ethnically and racially inclusive and what nutrition information would work. It also facilitated the bringing together of professionals in the community from different organizations interested in improving the nutrition of pregnant teens. As a result, a greater awareness of programs in the community was developed by all, linkages were established and a sense of goodwill created.
2. A working group of 12 was established to work on the script and animation. A community Advisory Committee of 25 members established direction, reviewed progress, and provided feedback on the work produced by the working group. This model was found to work well by most members.

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3. The most significant learning experienced by Advisory Committee members was just how little text can be incorporated into a 30 second advertisement. At the outset, each of the 25 members had identified what they thought should be included in the script. Collectively, this would have produced, at minimum, a three hour PSA! Once the reality of the situation was absorbed and the role of the medium better understood, it was easier to let go of text that seemed so important.
4. The importance of having representation of the intended target audience on the Advisory Committee was a new learning for some members and a reinforcement for other members. The producer and director especially valued the input offered by the young women on the Advisory Committee who were participants or graduates of the local *Buns in the Oven/Ça mijote* program. They offered insights, perspective and suggestions that were integral to the successful development of the PSA.

Distribution the PSA to communities in Ontario and across Canada

As indicated in the previous section, the PSA was distributed to over 200 television stations across Canada and a video sent to all CPNP programs for viewing by program participants across the country. In the next section, the results of information received from the CPNP are presented. In addition, an information article was prepared and featured in *Sharing Matters*, the CAPC/CPNP newsletter, about the PSA and its availability to all programs.

Exposure to the PSA by Television Viewing

The PSA was aired to the general public by broadcasters across Canada. It is impossible to estimate the number of viewers exposed to the PSA through this route; however, follow-up interviews with the television stations indicate that a reasonable estimate including national and local CBC affiliates could be in the 275,000 plus range. The estimate of airtime translates into \$5,500,000 to \$6,000,000 worth of airtime. (Refer to Appendix D for details)

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Exposure to the PSA by CPNP Programs

Completed PSA evaluation questionnaires were received from 15 CPNP sites - 5 from Quebec, 3 from Ontario, 2 from Nova Scotia, 2 from British Columbia, 2 from Manitoba, and 1 from Newfoundland. The geographic distribution of the responses shows that the PSA did penetrate all regions of the country. The response rate (5.4%), although small, is typical of surveys of this nature and does not mean that the non-responsive sites did not use the PSA.

According to feedback received from the sites who completed evaluation questionnaires, the number of clients participating in programs can range from as few as 3 or 4 in smaller populated sites to as many as 100 in large urban centres. Most of the programs offered at these CPNP sites are targeting at-risk groups including young immigrant women, young women on social assistance, high risk prenatal clients, aboriginal clients or young pregnant teens.

About half of the CPNP sites who provided feedback reported that they showed the PSA to their clients. The number of times the PSA was shown in the three month evaluation period ranged from twice at three sites to as many as eight times at one particular site. The number of clients who were exposed to the PSA at these sites ranged from two clients at one site to 40 clients at two different sites. The average number of clients is 23. Of these, about 15% (or 3 clients) on average are teens.

Using the exposure results of the feedback survey, we can estimate that as many as 831 at-risk pre or postnatal teens in Canada may have been exposed to the PSA while attending a local CPNP program during the evaluation period.

Use of the PSA by CPNP Programs

Most of the sites who provided feedback reported using the PSA for client awareness and education purposes. Only one site indicated that they used the PSA in other ways. This site reported using the PSA for staff training. They also indicated that they found the PSA to be an effective tool for this purpose.

Just over 40% (number=6) of the 15 sites that completed the PSA evaluation questionnaire indicated that they had plans to use the PSA in the future. All but one of these sites had already used the PSA at least once in their program. When asked how they anticipated using the PSA in the future, the following uses were given:

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- for general conversation
- to promote their programs
- at health fairs
- by local TV stations
- at drop-in sessions

Of the 8 sites (57%) who indicated that they had no plans to use the PSA in the future, the main reason given by 3 different sites was that they did not have to advertise their program. Other reasons given were that in the respondent's opinion it did not provide useful information (3 sites), or it did not catch the attention of their clients (2 sites), the vast majority of whom were not teens.

Impact of the PSA on the Awareness of Local CPNP Programs

To answer the question of whether the PSA raised awareness about the availability of local prenatal nutrition programs, a pilot project was established Ottawa - Carleton, the only location where the telephone number for access to the local programs was provided during the airing of the PSA. The Coordinator of the *Buns in the Oven/Ça mijote* program in Ottawa-Carleton kept an ongoing record of all incoming calls during the evaluation period.

Prior to the introduction of the PSA on local television stations in the Ottawa-Carleton region, the main source of referrals for the *Buns in the Oven/Ça mijote* program came from other health agencies in the area. As a rule, relatively very few self-referrals were being received according to the Coordinator.

After the PSA began airing on local television stations in early January, as many as 10 calls per day from the public were received. On average, 2-3 calls were received on most days during the evaluation period. Altogether, 85 calls of inquiry were made to the *Buns in the Oven/Ça mijote* program including 1 made to the Ottawa-Carleton Regional Health department from a caller outside the local viewing area. 18% of the calls were from French language viewers.

A large majority of the callers (76%) indicated that it was seeing the local phone number on the PSA that encouraged them to make the contact. In some instances, a relative (usually a parent or sibling) was calling on behalf of a pregnant family member.

All but one in both focus groups conducted in Ottawa - Carleton had seen the

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PSA numerous times on television. Many had seen it on the learning channel while watching programs on pregnancy and birthing and parenting. One-third of the participants who were at the prenatal class focus group were enrolled in a local *Buns in the Oven/Ça mijote* program as a result of seeing the PSA. The two or three men in the class were equally enthused about the PSA. One participant said that it was her boyfriend who first saw the PSA and encouraged her to phone the telephone number provided.

Impact of the PSA on the Awareness of the Importance of Healthy Nutrition During Pregnancy

In addition to tracking the number of calls made to the local *Buns in the Oven/Ça mijote* program, the Coordinator also recorded the reasons for the calls and tried to ascertain whether the caller was a pregnant teen or someone calling on behalf of a pregnant teen.

It was evident from the nature of the calls, that the callers were concerned about their nutrition during pregnancy. In fact, the majority of the callers were requesting more information on nutrition during pregnancy. This seemed to be the main motivator for making the call in the first place.

It was difficult to determine how many of the callers were pregnant teens or making inquiries on behalf of a pregnant teen because this question was not asked directly. Based on voluntary information, it is estimated that about 22 of the inquiries related to young/teen parents to be. These callers were referred to the closest *Buns in the Oven/Ça mijote* program site. Of these referrals, 11 pregnant teens (50%) eventually participated in the *Buns in the Oven/Ça mijote* program at one of the local sites.

The two focus groups held with pregnant teens and young women in Ottawa-Carleton³ indicated that the PSA was successful in conveying the message that healthy nutrition was important during pregnancy. Several participants volunteered that they learned, from the PSA, that it was important to eat well for someone other than themselves – the baby.

³ Both were held with participants attending a prenatal program for at-risk pregnant teens. One was held at St Mary's Home where eight participants (including residents and community living teens) and 8 partners, mothers or friends were present. The other one was held at The Friendly Corner, a drop-in centre, located at St. Laurent Shopping Centre. Here, six pregnant teens, 2 young women in their early twenties and a partner attended.

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When probed about what foods they remembered, all the foods were identified by the group. Some participants volunteered that the foods made them hungry, others that it removed their guilt for eating pasta or ice-cream or pizza. One indicated that she did not have access to some of the foods featured, in particular fresh vegetables. Other participants urged her to enroll in a local program which would provide her with fresh vegetables and fruit weekly and a nutritious meal to be eaten during the class, cooked by participants.

How Well Was PSA Received by the Target Audience

All focus group members and their partners loved the PSA, especially the kick and the associated sound; it caught their attention and made them “feel good”. They conveyed that the approach and message was especially appropriate for pregnant teens but perhaps less so for young women in their early twenties. Several participants in their early twenties expressed the view that they already knew the importance of healthy nutrition during pregnancy.

There were two other sources of evidence on how well the PSA was received by the target audience: (1) information recorded by the Coordinator of the *Buns in the Oven/Ça mijote* program in Ottawa-Carleton on the referral tracking form, and (2) information received from the 15 CPNP sites across Canada who completed the PSA evaluation questionnaire.

Almost all of the 85 callers to the *Buns in the Oven/Ça mijote* program in Ottawa-Carleton indicated they liked the PSA. This is understandable since these were clearly “interested” parties.

Respondents to the PSA evaluation questionnaire were asked to rate the feedback they received from clients about the PSA on a scale of 1 to 7, where 1 was very negative and 7 was very positive. Over 80% of the sites rated the client feedback a 6 or 7 indicating a largely positive reaction to the video.

When asked if, in their opinion, the PSA was “teen friendly”, 85% of the respondents reported yes. A smaller majority (almost 60%) also were of the opinion that the PSA appealed to women of different cultures.

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CONCLUSIONS

The Young/Single Parent Support Network did what they said they would do by:

1. establishing an intersectoral community advisory committee for the project,
2. building on the success of the *Kick Butt for Two/Maman, on écrase!* animated PSA,
3. providing messages about the importance of healthy nutrition based on CPNP guidelines, Canada's Food Guide and input from the Regional Health Department, and
4. seeking client input throughout the PSA development through focus groups and participation on the Advisory Committee.

Based on the evaluation results, the PSA was successful in raising awareness among at-risk and pregnant teens (and others) about the importance of healthy eating during pregnancy and the availability of nutrition programs locally. As anticipated, the PSA with the telephone number of the local program provided during the airing of the PSA was more effective in raising awareness than the PSA directing viewers to their local health department.

The pilot project indicated that the PSA aired on television not only increased the awareness of pregnant teens about eating well during pregnancy but was also successful in conveying that message to partners, family and friends. It spurred viewers to seek information and/or to enroll in a local program.

The evidence indicates that the PSA was highly appropriate for teens (the intended target audience) and had multi-cultural appeal. The suitability of this PSA for women in their early twenties and older is less clear.

The PSA was well received by the television companies and was widely and frequently aired. The television stations contributed significantly to the high exposure of the PSA and increased its likelihood of reaching the intended audience.

The need to distribute a copy of the PSA to CPNP programs across Canada is questionable from a program and outcome perspective. However, for information and the facilitation of positive relationships, it is probably essential.

In sum, the evaluators conclude that a well developed PSA is an effective method for raising the awareness of at-risk pregnant teens, their partners, family and friends about healthy eating. Participation in programs and access to nutrition information is greater when a contact phone number is given with the PSA.

Appendix A - List of Advisory Committee Members

Buns in the Oven PSA Advisory Committee

Victor Poirier
Producer
Pan Films
Phone: 722-7772
Fax: 722-0245

Patricia Niday
Perinatal Education Program
of Eastern Ontario
Phone: 737-3633
Fax: 738-3633

Heidi Lasi
Director
Pan Films
Phone: 722-7772
Fax: 722-0245

Dr Kristine Whitehead
Family Physician
Somerset West Health Centre
Phone: 238-1220
Fax: 238-7595

Jacqueline Toupin
Writer
Pan Films
Phone: 722-7772
Fax: 722-0245

Joanna Jennings
Dietician-CPNP
Eastern Ontario Health Unit
Phone: 774-2739
Fax: 774-2891

Karen Hunter
Project Coordinator
Brighter Futures
Phone: 749-0340
Fax: 749-7018

Andrea Corbett
CPNP Program Coordinator
Connections: Lanark
Phone: 257-2779

Nancy MacNider
Executive Director
St Mary's Home
Phone: 749-0340
Fax: 749-3762

Cathy Fortier
Program Coordinator
Buns in the Oven
Phone: 725-5152
Fax : 725-5188

Renee Crompton
Dietician
Ottawa-Carleton Health Department
Phone: 722-2242
Fax: 724-4191

Dr Robin Walker
Chief, Division of Neonatology
CHEO
Phone: 737-2415
Fax: 738-4847

Lisa Bertrand
St Mary's Home
Phone: 749-2491
Fax: 749-3762

Stephanie LePage
St Mary's Home
Phone: 749-2491
Fax: 749-3762

Maureen Cech
Preschool Services
CAS
Phone: 747-7800 x2746
Fax: 747-4456

Dr Cora Hinds
Professor, School of Nursing
University of Ottawa
Phone: 562-5800 x8422
Fax: 562-5443

Major Grace Hustler
Executive Director
Salvation Army Bethany Hope Centre
Phone: 725-1733
Fax: 725-9480

Krissy Duhan
Program Assistant
Buns in the Oven
Phone: 731-0971
Fax: 725-5188

Colleen Whiteduck
Director
Aboriginal Women's Support Centre
Phone: 741-5590
Fax: 741-8511

Jennifer Muldoon
Buns in the Oven graduate
Phone:
Fax: 725-5188

Anne Lim
Community Dietician
Phone: 234-5461

Appendix B - Prenatal Nutrition PSA Feedback Form

Dear CPNP Project Coordinator:

Please accept this complimentary copy of our **Prenatal Nutrition Public Service Announcement (PSA)**. This PSA was developed and produced by the Young/Single Parent Support Network (The Network) of Ottawa-Carleton with the hope that it will not only raise the awareness of the importance of healthy nutrition during pregnancy but also raise the awareness of the availability of local Prenatal Nutrition Programs such as yours. We will be distributing the PSA (which is available in English and French) to all organizations across the country that have received funding from Health Canada's *Canadian Prenatal Nutrition Program*. Beta copies of the PSA will be disseminated to major television stations across Canada.

We encourage you to use the PSA by showing the video to the young mothers in your program. It might be a good "icebreaker" in a new group or could be used for discussion in an ongoing program. You could also use the PSA to help you promote your program to others in your community, to assist in fundraising, and to help with staff training. The local version of the PSA can be adjusted by Pan Films to include your own program name and contact telephone number.

Regardless of how you decide to utilize the PSA, we are interested to know how it is helpful to you. Please help us **evaluate** its effectiveness. Enclosed is a brief questionnaire which we ask you to return to us in about three months. We do hope you will have had the opportunity to use the PSA during that time.

Fax us your completed questionnaire (by March 1, 1999) to:

Buns in the Oven (613) 749-7018

You can also respond by **E-mail**. Simply send your Email address to brighterfutures@travel-net.com and request that a questionnaire be E-mailed back to you.

In the meantime, if you have questions or comments about the PSA, please do not hesitate to contact:

Karen Hunter, Project Coordinator,
Buns in the Oven,
659 Church Street,
Ottawa, Ontario K1K 3K1
Phone: (613) 749-4584
Fax: (613) 749-7018
E-mail: brighterfutures@travel-net.com

Yours sincerely,

Karen m. Hunter
Project Coordinator

Prenatal Nutrition PSA Feedback Form

First some background about your Prenatal Program:

Name of Program: _____

Name of Coordinator: _____

Address: _____

Telephone # _____ Facsimile # _____ Email _____

Please describe yours programs (or attach a brochure):

Please describe your client / target population:

How many clients are you currently serving? _____

How many of these clients are teen mother? _____

Did you use the PSA for any reason between December 1, 1998 and February 27, 1999? YES, GO TO QUESTION 1 NO, GO TO QUESTION 7

1. Approximately how many times did you show the PSA in your program between December 1, 1998 and February 27, 1999? _____
2. Altogether, how many people saw the PSA in this time period? _____ How many of these were teens? _____
3. Overall, how would you rate the feedback you received from your clients on a scale of 1 to 7, where 1 = very negative, and 7 = very positive (Please circle)

Very Negative 1 2 3 4 5 6 7 Very Positive

Prenatal Nutrition PSA Feedback Form

4. Would you say the PSA is “teen friendly”? YES NO
(IF NO) Why do you say this?

5. Did the PSA appeal to wopen in your program and community from different cultural or racial backgrounds? YES NO Not applicable
(IF NO) Why do you say this?

6. Did you use the PSA in other ways such as promotion or training?
 NO YES, Please describe the other ways you used the PSA.

- (IF YES) When you used the PSA for these other reasons, did you find it generally effective ? YES NO (IF NO) Why not?

ALL RESPONDENTS PLEASE COMPLETE REMAINING QUESTIONS

7. Approximately how many new clients came into your program between December 1, 1998 and February 27, 1999? _____

8. In your opinion, did the PSA help raise people's awareness in your community about your program and the importance of prenatal nutrition? YES NO

9. Do you anticipate using the PSA in the future? YES NO
(IF YES) How will you use it?

Prenatal Nutrition PSA Feedback Form

(IF NO) Why not?

Thank you for your feedback
Please fax your completed questionnaire to:
Buns in the Oven (613) 749-7018

Appendix C - Prenatal Nutrition PSA Evaluation Contract & Referral Record Completion Guidelines

This form will help you keep track of possible new participants. Please record each call or walk-in you receive between November 1 and March 31 on the form. Please photocopy ahead of time as many blank forms as you think you may need over the evaluation period. Fax your completed form to : Cathy Fortier, 725-5188. The information we require for the evaluation is as follow:

Name of person: It is important to record the name of each potential participant in order to look at referral patterns and to avoid “double counting” if someone calls or attends more than one program.

Date when contact was first made: Record the date when the person first contacted the program either by telephone or as a walk-in.

Source of referral: Record how the person found out about your program? Was it a referral from another agency, the Buns in the Oven Coordinator, or another source. If they mention the PSA, please record this here.

Had person heard about PSA: If PSA was not mentionned as the source of referral, ask the participant if she has heard about he PSA or seen the PSA. If yes, ask her what she thought of the PSA. If she has not heard about the PSA, record “NO” in this space. If she has heard about the PSA, record “YES” and “liked”or “disliked” (We also plan to hold a focus group with participantsw who have seen the PSAto get more feedback).

Did person participate in your program: Record “YES” here if the person participated in your program p if they came more than once. Record “REFERRED” if they did not participate in your program but were referred by you to another program (perhaps one closer to where they live). If neither was the case, record “NO”.

Appendix D - PSA Airing Report prepared by Pan Films

BUNS BABY

NUMBER OF AIRINGS ON ROGERS AD AVAILS ON A&E, TLC, THE NASHVILLE NETWORK, HEADLINE NEWS AND CNN

I am pleased to present to you the number of airtimes and the range in dollar value for *Buns Baby* during its first quarter of airing in 1999.

National Toronto, Vancouver, Kitchener-Waterloo	January 1999	1,339
	February	1,168
	March	1,838
	Total	4,345
Local Ottawa	January 1999	281
	February	249
	March	934
	Total	1,464
	GRAND TOTAL	5,809

Based on information about rates provided by Rogers, the airtime for both national and local spots ranges from \$3,624,750 to 5,511,500. (At \$750 - 1,100 / airing for the national spots: \$3,258,750 to 4,779,500. At \$250 - 500 / airing for the local spots: \$366,000 to 732,000.)

BUNS BABY
 NUMBER OF AIRINGS ON ALL OTHER VENUES

Teletoon	February 1999	30	
	March 1999	19	
	April	17	
	till May 11th	10	Total: 76

The New PL	Windsor, Wingham and London	3 - 5 X / week Jan - April 1999	Total:48 - 80 times
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Global	does not air PSAs		
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Saskatchewan Cable Network	January	14	
	February	7	
	March	9	
	April	6	Total: 36

CBC National	• does not keep records		
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CTV	• does not keep records		
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HGTV and Life Network	January	24	
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	February	32	
	March	8	Total: 64
Global in Vancouver	<ul style="list-style-type: none"> have not had an opportunity to play it yet 	<ul style="list-style-type: none"> will play it in the summer 	

CBC Ottawa Local	January	16 (worth:\$414.46)	
	February	15 (worth:\$542.30)	
	March	10 (worth:\$831.83)	
	April	13 (worth:\$549.65)	Total: 54 (worth: \$2,338,24)

BUNS BABY

NUMBER OF AIRINGS AT CINEPLEX ODEON CINEMAS ACROSS CANADA

Cineplex Odeon	Jan 29 - Feb 25, 1999 (2 x / hour, 11 hours / day, 410 monitors). They will run it again in the fall.	252,560	Total: 252,560 times (normally worth \$20,000 plus GST)
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CONCLUSION

A modest estimate of the number of times the PSA has played in Canada is 258,593 times. It is difficult to project how often it has played on the stations that do not keep records. A reasonable estimate, however, including national and local CBC affiliates could be in the 275,000 plus range.

A reasonable estimate in terms of the worth of the airtime is in a range from **\$5,500,000.00 to \$6,000,000.00.**

The broadcasters have responded favourably to the PSA. Four of twenty two PSA Coordinators returned the response card with favourable comments and projected airtimes. When the follow up calls were made to track the PSA, most Coordinators knew the PSAA by name or theme (ie. Animated baby talking to mom about eating well while she's pregnant).

In conclusion, the number of airtimes - over 275,000 "hits" - and the worth of the airtime - approximately \$5,500,000.00 - is very favourable.

Exhibit 1

Goals and Objectives

To develop an animated Public Service Announcement which will alert viewers to the importance of healthy prenatal nutrition:

- Establish an intersectoral community Advisory Committee for the project
- Build on the successful *Kick Butt for Two/Maman, on écrase!* animated PSA
- Add a multicultural dimension through the addition of a baby of a visible minority
- Provide sound messages about the importance of healthy prenatal nutrition based on CPNP guidelines, Canada's Food Guide, and input by the Regional Health Department
- Seek client input throughout the PSA development, through focus groups and participation on the Advisory Committee

To increase awareness of the *Buns in the Oven/Ça mijote* program for teens locally:

- Be teen-friendly
- Develop the initial PSA containing contact phone number of local program
- Provide the Local Health Department, Community Health Resource Centres and CHEO with VHS copies to be shown at prenatal classes &/or programs for young/single parents
- Distribute Beta copies of local PSA(Bilingual) to local television stations
- Increase self-referral to the local program

To disseminate the PSA to communities in Ontario and across Canada:

- Send VHS copies to CPNP programs for viewing by program participants
- Distribute Beta copies to television stations across the country
- Write an information article for the CAPC/CPNP newsletter re: the availability of the PSA to all programs